

Round ____ Quarter: ____

Individual Unit Submission Packet

Grantee:

Property Address:

PIN:

- *Maximum costs per individual PIN for all eligible uses cannot exceed \$40,000.*
- *Before submitting for reimbursement all properties must have been submitted via Jotform and received approval for Part 1 and Part 2 of the Pre-Approval process:*
 - [SCP Pre-Approval Part 1: Initial Property Approval Form](#)
 - [SCP Pre-Approval Part 2: Pre-Approval Checklist](#)

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Property: _____

Reimbursement Request Checklist

- Is this a first (partial) or second (final) payment request*?

**if no further reimbursements will be requested for this property this is considered a second (final) payment request*

First (partial) payment request

Second (final) payment request

- Has the rehabilitation or demolition project been completed on this property?

Yes

No

- In addition to this checklist and cover sheets, please also provide the following, depending on the type of project undertaken on this property:

- Signed Reimbursement Request Form (PDF or Excel, if able to sign electronic form)
- Scope of work narrative (if different from first request or pre-approval or to reflect multiple change orders)
- Change order(s) if any
- Contractor payment invoice and proof of payment organized by eligible expense category using cover sheet
- Invoice or comparable documentation and proof of payment for all other eligible costs organized by eligible expense category using cover sheets
- Pictures of completed work (include both “during”, for rehab, and, if completed “after” photos)
- Completed [Asbestos Project Notification Form](#) or alternate documentation (required for second [final] payment requests)

- For rehabilitation projects, please also provide the following with second (final) payment requests:

- Lead risk assessment, conducted by a certified lead risk assessor.
- Confirmation of final inspection
- Is the property ready for occupancy?

Yes

No

If yes, provide Certificate of Occupancy.

If no, provide a narrative explanation below.

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Acquisition Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*
- *Acquisition costs can be reimbursed up to \$5,000 per property with submission of backup documentation*

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Rehabilitation Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*

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Demolition Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*

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Tree, Shrub and Debris Removal Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*
- *Grass cutting expenses should be included under the Grass Cutting category*

Round _____ Quarter: _____

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Grass Cutting Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*
- *Grass cutting expenses should not exceed 5% of your total grant amount*

Round _____ Quarter: _____

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Lot Treatment and Greening Costs

- *Include an invoice and proof of payment for every cost that you are seeking reimbursement for*
- *All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label*