

LEVEL OF REVIEW DETERMINATION FORM

Instructions: Provide the required information and submit this form, along with copies of any required Notices & Affidavits and RROFs.

Grant Recipient: _____ Grant Number: _____

Address: _____ City: _____ State: ____ Zip Code: _____ County: _____

Funding Source: _____ Other: _____

ADECA Funds: _____ Matching Funds: _____ Total Funds: _____

Project Description and Location(s) (Include all actions which are either geographically or functionally related):

This subject project has been reviewed pursuant to HUD regulations 24 CFR Part 58 and the following determination is made (check one):

- 1. Exempt from NEPA review requirements
- 2A. Categorically Excluded Subject to review
- 2B. Categorically Excluded Subject to review **CONVERTS** to Exempt
- 3. Categorically Excluded **NOT** Subject to review
- 4. Environmental Assessment (EA) is required
- 5. Environmental Impact Statement is required

By signing below the Responsible Entity officially determines, in writing, that the subject project and all its included activities meet the conditions specified for the Level of Review selected above. A copy of this document must be maintained in the ERR.

AUTHORIZED RESPONSIBLE ENTITY OFFICIAL:

Certifying Officer Signature

Date

Certifying Officer Name (printed)

Title (printed)