

Housing Activity –Tracking Sheet -

City/County _____ Project # _____
 (Update and Submit a Copy With Each RFF)

House Number _____
 Address _____
 City _____

Type of Construction _____
 (Rehab/Demolition/Substantial Reconstruction/Relocation)

Occupant _____
 Phone _____

Renter/Owner (circle one) LMI or 25% pay (circle one)

General Contractor _____

Maximum RFF#	<u>Construction Contract</u>		
	\$15,000 RFF Amount Rehabilitation	\$6,000 RFF Amount Lead/ADA	\$21,000 RFF Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Payments: \$		\$	\$

Amount of Contract \$ _____
 Change orders _____

Other contracts: _____

Total Contracts paid with CDBG Funds: \$ _____ \$ _____ \$ _____

Maximum \$600.00
 *Lead Risk Assessor * _____
 *Risk Assessor Contract \$ _____

Lead Reduction Contractor _____
 Lead Rehab Contract \$ _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Termite Inspection Contractor _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____

*Supportive Services _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____

Termite Treatment _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____

*Budgeting Contract _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____

Asbestos Inspection Contractor _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Contracts _____

RFF	Contractor	RFF Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Carbon Monoxide Testing _____

RFF	Source	RFF Amount
_____	_____	_____

Heating System Inspection _____

RFF	Source	RFF Amount
_____	_____	_____

Note: * Lead Risk Assessor and Supportive Services are not included in Rehabilitation Construction totals.