EXHIBIT 2-L.2

Site Specific Project Review for Homeowner Rehabilitation Projects (Intended for use following the CEST environmental review conducted for single family housing rehabilitation, i.e., homeowner (owner-occupied) rehabilitation, once a specific house/address has been identified)

(Note: Boxes will expand to accommodate information)

Date

MDOC HOME Grant Number  

Grantee Name

Activity/Site Location (Address)

Activity/Site Description

Date of Approved CEST Review

SITE SPECIFIC PROJECT REVIEW FINDINGS

1. Site Suitability
   Is the Project site or area generally physically suitable for the proposed HOME activity in terms of slope, erosion, or soils?

   YES _____  NO _____

   Compliance Source and/or Documentation: ________________________________

2. Floodplain
   Is the project area within or adjacent to an identified 100-year floodplain, similar flood-prone area, or area of storm water drainage discharge?

   NO _____  YES _____  Based on FEMA Map # ________________

   If yes, the homeowner must have proof of flood insurance throughout the period of affordability.

3. Surface Water and Aquifers
   Would the proposed project have a potential adverse impact on either surface water quality or an identified underground aquifer (water bearing zone)?

   NO _____  YES _____
Compliance Source and/or Documentation: ________________________________

4. Wildlife Habitat/Endangered Species
Would the project in general have a potential adverse impact on existing wildlife or fish habitat? Would the proposed project have a potential adverse impact on either an endangered animal or plant species?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

5. Wetlands
Would the proposed project alter or disturb wetlands? "Wetlands" generally include swamps, marshes, bogs or similar areas such as sloughs, wet meadows, river overflows, mud flats, and natural ponds.

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

6. Air Quality
Would the proposed project have an adverse effect on existing area air quality?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

7. Historic Properties and Archeological Resources
Is the house associated with the proposed project older than 50 years or located within an identified Historic District?

NO _____ YES _____

Would the proposed project have any effect on historic structures, properties, or archeological resources?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________
8. Farmlands
Would the proposed project impact prime, unique, or statewide designated or locally important farmland?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

9. Noise
a. Is the proposed project located within the noise contours of an airport?

NO _____ YES _____ (Noise level must be under 65DNL (Day Night Level))

b. Is the proposed project located within 1000 feet from a major highway?

NO _____ YES _____

c. Is the proposed project located within 3000 feet from nearest railroad?

NO _____ YES _____

d. Would aircraft, highway, or railroad noise adversely affect the proposed project?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

10. Hazardous Facilities
Is there a facility that produces or stores flammable material that is visible from the project site? Hazardous facilities could consist of chemical or petrochemical gas or liquid storage facilities, including propane gas storage tanks.

NO _____ YES _____

If yes, please refer to the HUD Explosive and Flammable Material Handbook or call your HOME Program Officer.

Compliance Source and/or Documentation: ________________________________
11. Airport Clear Zones

Is the proposed project located within the crash zone (2500 feet) of an airport?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

12. Environmental Justice

Will this project have a disproportionately high and adverse human health or environmental effect on minority and/or low-income populations? Will this project exclude participation in or deny benefits to people because of their race, color or national origin?

NO _____ YES _____

Compliance Source and/or Documentation: ________________________________

(Preparer’s Name – Please Print) (Title)

(Preparer’s Signature) (Date)