

AMENDMENT TO THE ENVIRONMENTAL REVIEW RECORD

Responsible Entity: Project Number:

Project Name:

Estimated Project Costs for Proposed Activities – All Sources & Amounts:

Total Project Cost: _____	
CDBG Funds: _____	Other State Funds: _____
Local Cash Contributions: _____	Other Federal Funds: _____
Private Contributions: _____	In-Kind Contribution: _____

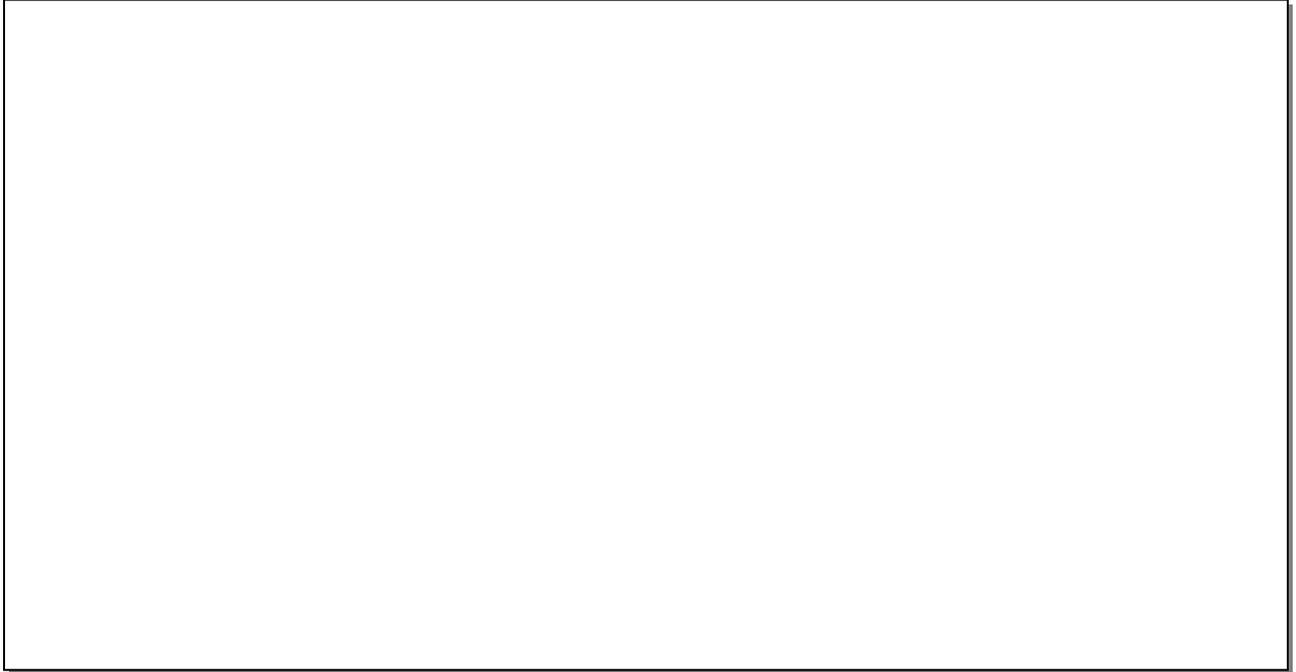
Preliminary Project Design: Check the appropriate box or boxes and attach:

<input type="checkbox"/> PER	Date: _____	Firm: _____	
<input type="checkbox"/> Addendums		Number of Addendums to Date: _____	
<input type="checkbox"/> PAR	Date: _____	Firm: _____	
<input type="checkbox"/> Addendums		Number of Addendums to Date: _____	
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Building Plans	<input type="checkbox"/> Design Drawings/Renderings	<input type="checkbox"/> Work Write-up
<input type="checkbox"/> Cost Estimates/Revised Budge			
<input type="checkbox"/> Other: _____			
<input type="checkbox"/> N/A – Explain: _____			

Project Description As Originally Funded:

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Proposed Project Activities

A large, empty rectangular box with a thin black border, intended for describing the proposed project activities.

Conditions for Approval for Proposed Activities

A large, empty rectangular box with a thin black border, intended for listing the conditions for approval of the proposed activities.

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REVIEW OF ENVIRONMENTAL IMPACTS:

Environmental Section

Choose One of the Following:

Historic Properties

Impacts Anticipated No Impacts Anticipated

Floodplain Management

Impacts Anticipated No Impacts Anticipated

Flood Insurance

Impacts Anticipated No Impacts Anticipated

Wetlands

Impacts Anticipated No Impacts Anticipated

HUD 8-Step Decision Making Process

Impacts Anticipated No Impacts Anticipated

Airport Hazards

Impacts Anticipated No Impacts Anticipated

Endangered Species

Impacts Anticipated No Impacts Anticipated

Wild and Scenic Rivers

Impacts Anticipated No Impacts Anticipated

Farmland Protection

Impacts Anticipated No Impacts Anticipated

Noise Control

Impacts Anticipated No Impacts Anticipated

Explosive and Flammable Operations

Impacts Anticipated No Impacts Anticipated

Water Quality

Impacts Anticipated No Impacts Anticipated

Air Quality

Impacts Anticipated No Impacts Anticipated

Contamination and Toxic Materials

Impacts Anticipated No Impacts Anticipated

Environmental Justice

Impacts Anticipated No Impacts Anticipated

Land Use

Impacts Anticipated No Impacts Anticipated

Community Facilities and Services

Impacts Anticipated No Impacts Anticipated

Wastewater

Impacts Anticipated No Impacts Anticipated

Solid Waste

Impacts Anticipated No Impacts Anticipated

Storm Water Drainage

Impacts Anticipated No Impacts Anticipated

Lead Based Paint

Impacts Anticipated No Impacts Anticipated

Asbestos

Impacts Anticipated No Impacts Anticipated

Energy Consumption

Impacts Anticipated No Impacts Anticipated

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Provide an explanation for each of the “Impacts Anticipated” chosen on the preceding page (for guidance on how to determine impacts, refer to respective sections of the Statutory Checklist or Environmental Assessment, whichever document was originally prepared.) Attach all supporting documentation generated from the Amendment (i.e., correspondence to and from environmental agencies and Tribes, color maps/aerials, photographs, Field Visit Checklist & Site Evaluation form, web based documentation, etc.)

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CERTIFICATION OF ORIGINAL ENVIRONMENTAL FINDING:

The Responsible Entity has completed an Amendment to the Environmental Review Record. In conformance with HUD Federal regulation 24 CFR 58.47 – *Re-evaluation of environmental assessment and other environmental findings*, the original environmental review record was examined and the Finding of No Significant Impact (FONSI) determination remains valid.

In my capacity as Certifying Officer on behalf of the Responsible Entity and in conformance with Part 58, I certify that I have independently evaluated the Amendment, including all related documentation, and have supplemented the Amendment with additional information where appropriate. On behalf of the Responsible Entity, I assume responsibility for the accuracy of the information contained herein. I hereby approve the Amendment and acknowledge all identified conditions for approval that must be implemented and appropriately documented.

Signature, RE Certifying Officer

Date

PREPARER'S CERTIFICATION:

As preparer of the Amendment as designated by the Responsible Entity, I certify to the accuracy of the information contained herein.

Preparer Signature

Date