CEST Site-Specific Environmental Review Worksheet: Owner Occupied Rehab (OOR)

BASIC PROJE	CT INFORMATION						
Grantee/Applicant:							
Project Name:	:	Responsible Entity/GA:					
PROPERTY LO	DCATION INFORMATION: F	ull Common Address AN	ID State Parcel #				
	ess: (Street #, Name, Suffix)						
City/Town:		County:		State:	IN	Zip:	
State Parcel	#:						
1. FLO	ODPLAIN MANAGEMENT	/FLOOD INSURANC	E				
a) Is	s the project located in a sp	ecial flood hazard?		□YES	□NC		
*	If NO, 1(b) & 1(c) are N/A. C	heck N/A and skip; to	SECTION DETERMI	INATION>	□N/.	A	
b) lo	dentify the flood hazard:		oodplain* (Zone A1-			· ·	
			G.S. MUST COMPL				
			oodplain (Zone B or	shaded Zone X)	– Ques	tion 1(c) N/A. Ski	ip to
		<u> </u>	ETERMINATION				
-> 1	- 4h - O		Zone AE hatched) –) S
c) Is	s the Grantee enrolled and	in good standing with 	tne NFIP?	YES	NC	, 	
E	SECTION DETERMINATION Based on the above respons applicable floodplain manag			□YES	□NC), CONTACT G.S.	
s	☐ If applicable: Copy	rovide N-DNR Floodplain Map of NFIP Community S Iplain Notifications & I	Status Book for IN, v	vith community i			
2. AIRP	PORT HAZARDS (RPZ/CZ	, APZ)					
	s the project within 2,500 ft	of a civil airport or w	ithin 15,000 ft.	□YES	□NC)	
o	of a military airport? *If NO, 2(b) is N/A. Chec	k N/A and skip to SEC	TION DETERMINAT	ion. →		N/A	
 b\ I	s the project located within	a Punway Protection	7	YES		·····	
	or Accident Potential Zone (•	Zone/Clear Zone	Пісо		,	
S	SECTION DETERMINATION						
E	Based upon the above responsive Hazards (RPZ/CZ, Al		t comply with	□ YES	□NC	O, CONTACT G.S.	•
S		ovide ap listing project site letter from airport sta					

SE	CTION 106 HISTORIC REVIEW	*Area of	Potential Effect – A.P.E.
a)	Are there any structures in the A.P.E. that are over 50 years old?	□ YES	□NO
b)	Is the project site or any site in A.P.E a cultural or historical	□ YES	□no
	resource according to IN-DNR's SHAARD database?		
c)	Are there resources on the National Register of Historic Places?	□ YES	□NO
	Source Documentation to Provide Copy of SHAARD Map Copy of DNR's Historic Buildings, Bridges, Cemeteries Map Copy of National Register of Historic Places listing, if applic		
d)	Will the project replace any building components?	□YES	□NO
e)	Will the project involve ground disturbance (any digging)?	☐YES	□NO
ŕ	Source Documentation to Provide (if not already provided) Scope of Work Color photos of all four (4) sides of the project structure Color photos of the surrounding homes in the project area Project drawings, renderings, plans, etc.		
f)	Non-Tribal Consultation: Were any responses received from	YES	NO
	DNR-DHPA and/or any other consulted parties?		
	List of Consulted Parties:		
g)	Are there any eligible/listed historic properties within the A.P.E.? *If NO, 3(h) is N/A. Check N/A and skip to SECTION DETERMINATION	□YES	□NO □ N/A
h)	Will the undertaking alter or diminish the defining characteristics of the historic property as outlined in 36 CFR Part 68? Describe below in the provided space:	□YES	□NO
i)	Recommended Determination of Effect: No Historic Propertie No Adverse Effect Adverse Effect – If se.		ct G S immodiately
	SECTION DETERMINATION	ecteu, conta	or 0.5. minieulately
	Based upon the above responses does the project comply with Section 106 and 36 CFR Part 800?	□YES	□NO, CONTACT G.S.
	Source Documentation to Provide Copies of correspondence between Grantee and DNR-DHP DNR-DHPA AND DNR's Concurrence Letter Copies of correspondence between additional consulted page 1.		