



## Section 504 Self-Evaluation For CDBG-DR Infrastructure Subrecipients

### Instructions

This self-evaluation is required for compliance with Section 504 of the Rehabilitation Act of 1973 and HUD accessibility requirements. Subrecipients must complete this evaluation for each CDBG-DR-funded infrastructure project. The evaluation applies to the following three areas:

1. **Administrative Offices** – Municipal or agency offices administering the program.
2. **Public Engagement** – Hearings, meetings, application processes, and citizen participation.
3. **Funded Infrastructure** – Facilities, buildings, or public infrastructure built or improved with CDBG-DR funds.

If any physical or procedural barriers are identified, a Section 504 Transition Plan must be completed and maintained on file.

### Section 1: Basic Information

Subrecipient Name	
Primary Contact Name and Title	
Phone Number	
Email Address	
Project Site Address	
Number of Full-Time Employees	

### **Project Description (brief overview of CDBG-DR-funded activities and target populations)**



## **Section 2: Communication and Public Notice**

### **Applies to: Administrative Offices, Public Engagement**

1. What steps have been taken to ensure that all beneficiaries and employees are aware of their rights under Section 504? (Check all that apply)

Policy statement regarding non-discrimination on the basis of disability is posted in a prominent public area

Public notices include statements that accommodations for persons with disabilities will be made upon request

Section 504 rights are discussed during public meetings or included in program outreach materials

Other (describe below)

*Description:*

2. Are auxiliary aids or services available upon request? (Check all that apply)

Large print documents

Language interpreters

TTY/TDD number available

Assistive listening devices

Materials in Braille or alternative formats

Other (describe below)

*Description:*

3. How are individuals made aware of available accommodations?



### **Section 3: Policies, Grievances, and Oversight**

#### **Applies to: Administrative Offices, Public Engagement, Funded Infrastructure**

1. Do your contracts with vendors, engineers, or contractors include requirements to comply with Section 504 and ADA?

Yes

No

2. Are any internal policies or procedures found to limit access to persons with disabilities?

Yes (describe below and include in transition plan)

No

*Description:*

3. If the subrecipient has 15 or more full-time employees, complete the following:

A Section 504 Coordinator has been designated

A written policy of non-discrimination based on disability is in place

A grievance procedure has been adopted and is accessible in alternative formats

Name of Coordinator: \_\_\_\_\_

### **Section 4: Facility and Infrastructure Accessibility**

#### **Applies to: Administrative Offices, Funded Infrastructure**

1. Are the municipal/program-related offices accessible?

Accessible entrance and parking

Restrooms compliant with ADA standards

Signage and path of travel are compliant

No barriers identified

Barriers exist (describe below and include in transition plan)

*Description:*



2. Is the CDBG-DR-funded infrastructure physically accessible?

Ramps, sidewalks, paths meet ADA requirements  
Public spaces (e.g., restrooms, seating) are accessible  
No barriers identified  
Barriers exist (describe below)

*Description:*

### **Section 5: Emergency Procedures and Notifications**

**Applies to: Administrative Offices, Public Engagement**

1. How are employees and the public notified in the event of an emergency?

2. Do emergency plans include provisions for persons with disabilities?

Yes  
No (describe why not or plans to address below)

*Description:*



## **Section 6: Public Participation and Consultation**

### **Applies to: Public Engagement**

1. Have persons with disabilities or organizations representing them been consulted during this evaluation?

Yes (List names or organizations along with dates of consultation below)

No

*List names or organizations along with dates of consultation:*

2. Were any changes made to facilities or procedures as a result of consultation?

Yes (describe below)

No

*Description:*

### **Certification**

I certify that this self-evaluation is complete and accurate to the best of my knowledge. Any identified barriers have been documented in the attached Transition Plan or noted with justification for delay or deferral.

**Signature:** \_\_\_\_\_

**Authorized Official Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_



### Section 504 Transition Plan (Only if barriers were identified)

Action Type (Structural/Policy)	Description	Responsible Party	Start Date	Completion Date	Estimated Cost	Notes
Example: Structural	Add ADA ramp to community center	Public Works Director	5/1/25	5/5/25	\$5,000	Budgeted FY25
Example: Policy	Create written accommodation policy	Program Manager	4/1/25	4/30/25	Staff time	N/A