

HIGH RATE WORKSHEET

Request for Rates \$200 and Greater Per Hour

Instructions:

Complete this for new staff, contractors, and consultants with a total hourly rate of \$200.00 and greater. Include the information for one person within a single row. Attach this form when inputting hourly rates for approval in DRGR.

Certification:
I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct.
WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802).
This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to the Reports Management Officer, Office of Policy Development and Research, REE, Department of Housing and Urban Development, 451 7th St SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2506-0197.
Public reporting burden for this collection of information is estimated to average 8.0 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for HUD's Community Compass Technical Assistance and Capacity Building Program Notice of Funding Availability (NOFA) and will be used for application review. Response to this request for information is required in order to receive the benefits to be derived.

TA Awardee Name:											
Name	Rate Type "S" = Staff "C" = Consultant "SU" = Contractor	Total Hourly Base Rate (Staff=Initial rate of compensation an employee receives in exchange for service. Consultant/Contractor = Fully Loaded Rate)	Subject Matter Expertise	Selected Under Procurement Policy? (Yes/No)	If No, Explain Why Not	Describe Value of Person to TA Team	Estimated Annual Hours for TA	Estimated Annual Cost	Prior Approved Rate (if applicable)	Prior Approval Date	Other information including justification for contractor/consultant rate increase and/or sole source selection (if applicable)
			<u>Staff Type:</u> <u>Industry:</u> <u>Occupational Type (as selected in DRGR):</u> <u>Occupational Title:</u> <u>Areas of Expertise:</u> <u>SME Details:</u> <u>Awards, Education, Certifications, and Professional Affiliations:</u>			<u>Work Plan(s):</u> <u>Value to Project(s):</u> <u>Estimated Hours for Current/Pending Work Plan(s):</u>		\$ -			
			<u>Staff Type:</u> <u>Industry:</u> <u>Occupational Type (as selected in DRGR):</u> <u>Occupational Title:</u> <u>Areas of Expertise:</u> <u>SME Details:</u> <u>Awards, Education, Certifications, and Professional Affiliations:</u>			<u>Work Plan(s):</u> <u>Value to Project(s):</u> <u>Estimated Hours for Current/Pending Work Plan(s):</u>		\$ -			