**Grant Recipient Name:**

**CITIES ALLIANCE**

**INTEGRATED ASSESSMENT FRAMEWORK (IAF)**

(To be submitted by Grantee with Proposal Submission)

**Country:**

**Project Title:**

**Requested Grant Amount**:

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**A. Financial Management (FM) and Procurement**

| **Area/Item** | **Question** | **Recipient Response** | **Observations by Cities Alliance** |
| --- | --- | --- | --- |
| 1. **General information on Grant Recipient** | Contact information of Recipient organization (address, telephone, fax, email and website). |  |  |
| Please provide a copy of the latest organizational chart/ structure. |  |  |
| Provide a brief description of the Recipient organization and its main business/mandate. |  |  |
| What is the legal status/ registration of the Recipient organization? What is the year of registration (attach statute and proof of registration)? How many years has it been operating? |  |  |
| Is the Recipient a government entity (e.g. government ministry, agency or department, or state-owned enterprise or public institute)? Can the Recipient sign International Donor Grant Agreements and receive grants under the law of the Federal/National Government of your Country? |  |  |
| What are the statutory reporting requirements for the organization? Please attach samples of financial and non-financial reports that are currently produced. |  |  |
| What are the effects of the Recipient’s country/state’s tax policies on the management of grant or donor funds? |  |  |
| Does the Recipient have previous experience in administering grants from other international donors? If so, please provide for the most recent projects, the funding/ donor agencies, project titles, duration in years, grant amounts, and any other relevant details. |  |  |
| 1. **Ethics, Anti-Corruption and Transparency** | Does the Recipient have a Code of Ethics? Is it published? If so, where? How is the Code administered? Are there avenues for confidential reporting regarding compliance and other business conduct concerns? |  |  |
| Has the Recipient or its directors ever been convicted of a criminal offence? If so please provide details including dates and how this was resolved. |  |  |
| Does the Recipient, or any of its directors or staff have ownership or a stake in any firm/organization that provides the same type of services/goods/works as those that may be procured under the grant? |  |  |
| Does the Recipient publish annual or other reports? If so, are they publicly available, for instance through a website? If so please attach such reports or provide links. |  |  |
| Does the Recipient have a transparency policy? If yes, please provide a copy. If not, please describe how the organization handles transparency in its operations and reporting. |  |  |
| Does the Recipient have policies and procedures for mitigating Fraud and Corruption? (Briefly describe the policy in place and provide us with a copy of the policy document.) |  |  |
| **Financial Management Arrangements** | | | |
| 1. **Financial policies and procedures and structure** | Does the Recipient have a Financial Management (FM) or Operating Manual (OM) that describes the financial management policies and procedures? If yes, please attach a complete copy. If not, please describe how the financial management function is or will be carried out. |  |  |
| Please provide the most current organizational chart/structure of the Finance and accounting Department if any. If not, please provide a brief description of the current structure and how it functions. |  |  |
| 1. **Staffing** | Does the Recipient have staff specialized in (a) financial management, (b) accounting and (c) contract management? If yes, please provide the names, titles/functions, qualifications and years of experience for each. |  |  |
| Will the Recipient have a finance person/s designated to handle the financial management of the requested grant? If the answer is ‘yes’ please provide the name/s of those who will handle the financial management of the Grant including their qualification, experience and their role. Please indicate whether they will be working on a full or part time basis. If ‘the answer is ‘no’, please elaborate on alternate mechanisms proposed by the organization to handle the financial management of the requested grant. |  |  |
| Will the Recipient have a project manager designated to manage the requested grant? If the answer is ‘yes’ please provide the name of the person and indicate whether they will be working on a full or part time basis. If ‘the answer is ‘no’, describe what alternate mechanism is proposed by the entity to manage the proposed grant. |  |  |
| Please provide the names and titles of the Recipient’s current staff that have prior experience in implementing a Cities Alliance funded project or any other donor-financed project. |  |  |
| Please describe how the organization ensures that its Finance and Accounting staff have the necessary skills to carry out their roles and responsibilities effectively. |  |  |
| 1. **Financial Reporting and Budgeting** | Does the Recipient prepare and issue interim financial statements or other types of financial reports? If yes, please describe the information included in such reports (e.g. income and expenditure, balance sheet etc.) and their frequency? Please attach samples of the interim financial reports issued by the Recipient. |  |  |
| Are interim financial reports generated directly by an automated accounting system or are they prepared using other systems such as excel worksheets? Please explain how this done. |  |  |
| Describe the review and approval process of interim financial reports and who has this responsibility within the organization. |  |  |
| Describe the budget preparation and approval process. Are budgets prepared in sufficient detail for all significant activities? Please attach a sample budget. |  |  |
| Do the financial reports include statement that compares actual expenditures to budget and what is the frequency? If yes, please attach a sample. |  |  |
| Describe how the Recipient monitors budget utilization and how often this is done and by whom. |  |  |
| Are significant variances between actual expenditures and budget investigated and explanations provided? If yes, please describe the process and the officers responsible for approving such variances. |  |  |
| 1. **Accounting System, accounting policies, and procedures** | Provide a brief description of the current accounting system used by the Recipient. |  |  |
| State whether the accounting system is computerized or manual. If computerized, please describe the key modules of the system that are currently in operation (such as budgeting, ledger accounts, fixed asset register, reporting etc.) |  |  |
| Can the current accounting system be customized to generate tailored reports on specific project components/activities, disbursement categories, and sources of funds in accordance with approved donor budgets and in accordance with financial reporting requirements of each donor agency? |  |  |
| Does the accounting system link financial data with the project’s progress on implementation? If yes please provide a brief description of how this is achieved. If separate systems are used to gather and compile reports on progress on implementation, what controls are in place to reduce the risk that funds utilization matches the progress on implementation? |  |  |
| Describe how the organization ensures that staff are adequately trained to fully utilize the current accounting system and its related financial, budgeting, and fixed asset modules? |  |  |
| Indicate the accounting standards (or accounting basis) used to record Recipients financial transactions and to prepare financial statements and reports. (I.e. IAS, GAAP, IFRS, local accounting standards, etc.) |  |  |
| 1. **Internal Controls and Internal Audit** | Does the Recipient have an internal control framework that is documented and which includes clearly defined roles for the board (or comparable body), management, internal auditors and other personnel? If yes, please provide a brief description and attach a copy. If no please elaborate on how internal controls are addressed within the organization including segregations of duties. |  |  |
| Describe how the following functions are allocated within the organization to ensure effective internal controls within the organization and provide the name/title of the officer responsible for each function:   * Authorization of financial transactions; * Recording of financial transactions; * Custody of assets |  |  |
| Describe the controls in place to ensure that all transactions are properly authorized, recorded and reported including:   * Bank and cash transactions and reconciliations; * General and subsidiary ledgers transactions and reconciliations thereof (including fixed assets); * Dating and marking of paid invoices to avoid double payments; * Retention of supporting documents for all accounting and financial transactions etc. |  |  |
| Provide the names, title/function of current staff authorized to approve new purchases and the related thresholds (Dollar/ Euro value of thresholds) for each officer. |  |  |
| Does the Recipient have an internal audit function/ department? If yes, please provide the titles/functions, qualifications and experience of internal audit staff? Please attach brief bios of the current staff. |  |  |
| Is the internal audit function carried out independently and objectively in the execution of its duties? To whom does the internal audit staff report? Are actions taken on internal audit findings? |  |  |
| Is the internal audit function carried out in accordance with internationally recognized standards, such as those prescribed by the Institute of Internal Auditors (IIA)? Please explain. |  |  |
| Will the internal audit department work include review of financial and operational aspects of the project to be financed with the Cities Alliance grant? Please explain what their role will be. |  |  |
| 1. **External Audit** | Are annual financial statements audited by an external audit firm? Please provide the name and contact of the external auditors. |  |  |
| Provide copies of the two most recent audited financial reports ensuring that the reports submitted are complete (the reports should include an audit opinion, audited financial statements, and notes to the financial statements). |  |  |
| Are the audit reports made public and/or published on the website? If so please provide the link. |  |  |
| Provide details on the standards that govern external auditing in your country of operations (name such standards). If Cities Alliance grant funds will be spent in a different country other than that of Recipient, please explain how the external audit of such funds will be accomplished and applicable standards. |  |  |
| Do the external auditors issue a management letter to the Recipient? A management letter provides information on any accounting and internal control deficiencies that the auditors observe during their examination and includes management’s response to resolve such deficiencies. Please attach the two latest management letters issued by the auditors. |  |  |
| 1. **Funds Flow & Disbursements** | Is the Recipient authorized to operate bank accounts on its own and receive international donor funds? |  |  |
| In what bank (s) does the Recipient hold its funds? How are payments made from the bank account? Please attach a funds flow chart. |  |  |
| Will the recipient open a separate bank account for funds received from Cities Alliance? Please provide the name of the bank, the location and currency of the bank account to be opened. If not, please indicate the controls that will be adopted by the Recipient to ensure that Cities Alliance grant funds are accurately recorded, accounted for and reported. |  |  |
| Does the Recipient have prior experience in the management of disbursements from Cities Alliance? Have there been any major problems receiving funds in the past. Please describe such problems and actions taken to resolve them. |  |  |
| Does the Recipient spend funds in a currency other than US Dollars? If so, how does the Recipient account for foreign exchange differences? Please note that Cities Alliance funds are transferred and accounted for in US Dollars. |  |  |
| Does the Recipient earn interest on funds received from donors? How is the earned interest from such funds recorded and utilized? |  |  |
| Provide names, titles/functions of current staff that are authorized to deposit and withdraw funds (including authorized signatories on bank accounts). Please indicate the relevant thresholds (monetary value) for the approval of payments for new expenditures if applicable. |  |  |
| 1. **Procurement** | Does the Recipient have in place specific policies and procedures that promote transparency, economy and efficiency in procurement? Are these policies and procedures written in a Procurement Manual? (If yes, please attach a complete copy of the Manual. If no, please describe the policy and procedures in place to govern procurement of consultants, goods and services. |  |  |
| Does the Recipient Manual (or equivalent) describe procedures for procuring of Consultants, Goods and Services? |  |  |
| Please briefly explain the process involved in hiring Consultants (international/national) and procuring Goods and Services. |  |  |
| Please explain the experience of the Recipient in complying with internationally accepted procurement standards. |  |  |
| Does the Recipient monitor procurement performance in projects at periodic intervals, and are processes in place to respond to issues when they are identified? |  |  |
| Does the internal audit function, if any, include audits of procurement procedures and activities? If there is no internal audit function in the organization, please describe how compliance with procurement policies and procedures is ascertained. |  |  |
| Does the Recipients employees understand all of its procurement policies and procedures? Please explain how the organization ensures that staff have the necessary skills to carry out tasks in procurement in accordance with agreed policies and procedures. |  |  |

**B. Social and Environmental Risks (as assessed by the Grant Recipient)**

| **Area/Item** | **Type of Activity and potential issues and/or impacts** | **Status** | **Recipient Explanations if any YES box is marked in Section B** |
| --- | --- | --- | --- |
| 1. **Will the Project activities include/involve any of the following potential issues and/or impacts** | 1. Building rehabilitation 2. Site specific vehicular traffic and pedestrian safety 3. Increase in dust and noise from demolition and/or construction 4. Construction waste 5. Site in a populated area | [] Yes [] No |  |
| 1. New building construction 2. Excavation impacts and soil erosion 3. Increase sediment loads in receiving waters 4. Site specific vehicular traffic and pedestrian safety 5. Increase in dust and noise from demolition and/or construction 6. Construction waste 7. Site in a populated area | [] Yes [] No |  |
| 1. Individual wastewater treatment system 2. Effluent and / or discharges into receiving waters | [] Yes [] No |  |
| 1. Historic building(s) and districts 2. Risk of damage to known/unknown historical or archaeological sites | [] Yes [] No |  |
| 1. Land use planning 2. Land use planning with direct investment in implementation 3. Investment during implementation with potential displacement or restrictions to access to parks or protected area but undefined scope 4. Investment during implementation and clear scope of affected parties/scope of resettlement | [] Yes [] No |  |
| 1. Acquisition of land[[1]](#footnote-1) 2. Involuntary taking of land resulting in:  * Relocation or loss of shelter * Lost assets or access to assets * Loss of income sources or means of livelihood, whether or not the affected persons must move to another location; or  1. The involuntary restriction of access to legally designated parks and protected areas resulting in adverse impacts on the livelihoods of the displaced persons | [] Yes [] No |  |
| 1. Hazardous or toxic materials[[2]](#footnote-2) 2. Removal and disposal of toxic and/or hazardous demolition and / or construction waste 3. Storage of machine oils and lubricants 4. Use of pesticides | [] Yes [] No |  |
| 1. Handling / management of medical waste 2. Clinical waste, sharps, pharmaceutical products (cytoxic and hazardous chemical waste), radioactive waste, organic domestic waste, non-organic domestic waste 3. On site or off-site disposal of medical waste | [] Yes [] No |  |
| 9. Social and Gender Impact   1. Human Rights 2. Children’s Rights 3. Gender Equality | [] Yes [] No |  |

1. Land acquisition includes displacement of people, change of livelihood, encroachment on private property. This refers to land that is purchased/transferred and affects people who are living and/or squatters and/or operate a business (kiosks) on land that is being acquired. [↑](#footnote-ref-1)
2. Toxic / hazardous material includes and is not limited to asbestos, toxic paints, removal of lead paint, etc. [↑](#footnote-ref-2)