

City of Fayetteville Staff Review Form

2018-0228

Legistar File ID

5/1/2018

City Council Meeting Date - Agenda Item Only

N/A for Non-Agenda Item

Yolanda Fields

4/13/2018

COMMUNITY RESOURCES (642)

Submitted By

Submitted Date

Division / Department

Action Recommendation:

Staff recommends approval of the grant agreement renewals for Special Needs Assistance Programs (SNAPs) grants AR0038L6F011705 and AR0043L6F011703.

Budget Impact:

2180642.4955	2180.642.4956	CDBG - Hearth
Account Number		Fund
N/A		N/A
Project Number		Project Title
Budgeted Item?	No	Current Budget
		\$ -
		Funds Obligated
		\$ -
		Current Balance
		\$ -
Does item have a cost?	No	Item Cost
Budget Adjustment Attached?	No	Budget Adjustment
		Remaining Budget
		\$ -

V20180321

Purchase Order Number: _____

Previous Ordinance or Resolution # _____

Change Order Number: _____

Approval Date: _____

Original Contract Number: _____

Comments:



**CITY OF
FAYETTEVILLE
ARKANSAS**

CITY COUNCIL MEMO

MEETING OF MAY 1, 2018

TO: Mayor and City Council
THRU: Don Marr, Chief of Staff
FROM: Yolanda Fields, Community Resources Director
DATE: April 13, 2018
SUBJECT: Special Needs Assistance Program Renewal Grant Agreements

RECOMMENDATION:

Staff recommends approval of the Special Needs Assistance Programs (SNAPs) renewal grant agreements.

BACKGROUND:

The City of Fayetteville Hearth program has been in operation since February of 2016, and to date we have housed 79 adults and 94 children. This program is funded by four annual grants. Grant AR0038 and AR0043 will expire on May 31, 2018. Renewal grant funding will begin June 1, 2018 upon execution of attached grant agreements, which will provide seamless continuation of services to our homeless population.

DISCUSSION:

The renewal grants are: SNAPs Grant AR0038L6F011705 in the amount of \$42,042 and SNAPs Grant AR0043L6F011703 in the amount of \$186,784. The grant agreements must be executed for the continuation of funding to maintain our efforts to house the homeless.

BUDGET/STAFF IMPACT:

None.

Attachments:

Renewal Grant Agreements

Tax ID No.: 71-6018462

CoC Program Grant Number: AR0038L6F011705

Effective Date:

DUNS No.: 141310578

Component: TH

Recipient: City of Fayetteville

Official Contact Person and Title: Ms. Yolanda Fields, Community Resources Administrator

Telephone Number: (479) 575-8290

Fax Number: (479) 444-3445

E-mail Address: yfields@fayetteville-ar.gov

Operating Start Date: June 1, 2018

Project Location(s): Fayetteville, Arkansas and Northwest Arkansas CoC

SCOPE OF WORK
FY2017 COMPETITION

1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCS) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is **\$42,042** for project number **AR0038L6F011705**. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in *e-snaps* is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:
 - a. Continuum of Care planning activities \$ _____
 - b. UFA costs \$ _____
 - c. Acquisition \$ _____

d. Rehabilitation	\$ _____
e. New construction	\$ _____
f.	
g. Leasing	\$ _____
h. Rental assistance	<u>\$32,940</u>
i. Supportive services	<u>\$ 5,043</u>
j. Operating costs	\$ _____
k. Homeless Management Information System	<u>\$ 500</u>
l. Administrative costs	<u>\$ 3,559</u>
m. Relocation costs	\$ _____
n. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

4. The performance period for the project begins **6/1/2018** and ends **5/31/2019**. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's and Subrecipients' federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule. If no federally recognized indirect cost rate is listed on the Schedule for a project funded under this Agreement, no indirect costs may be charged to the project by the subrecipient carrying out that project.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

**UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development**

BY: _____

(Signature)

Clinton E. Johnson, Community Planning and Development Director
(Typed Name and Title)

(Date)

RECIPIENT

City of Fayetteville
(Name of Organization)

BY: _____

(Signature of Authorized Official)

Honorable Lioneld Jordan, Mayor
(Typed Name and Title of Authorized Official)

(Date)

Tax ID No.: 71-6018462

CoC Program Grant Number: AR0043L6F011703

Effective Date:

DUNS No.: 141310578

Component: PSH

Recipient: City of Fayetteville

Official Contact Person and Title: Ms. Yolanda Fields, Community Resources Administrator

Telephone Number: (479) 575-8290

Fax Number: (479) 444-3445

E-mail Address: yfields@fayetteville-ar.gov

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2. HUD designations of Continuums of Care as High-performing Communities (HPCS) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is **\$186,784** for project number **AR0044L6F011703**. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in *e-snaps* is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:
 - a. Continuum of Care planning activities \$ _____
 - b. UFA costs \$ _____
 - c. Acquisition \$ _____

d. Rehabilitation	\$ _____
e. New construction	\$ _____
f.	
g. Leasing	\$ _____
h. Rental assistance	<u>\$144,804</u>
i. Supportive services	<u>\$ 34,280</u>
j. Operating costs	\$ _____
k. Homeless Management Information System	<u>\$ 500</u>
l. Administrative costs	<u>\$ 7,200</u>
m. Relocation costs	\$ _____
n. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

4. The performance period for the project begins **6/1/2018** and ends **5/31/2019**. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.

5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's and Subrecipients' federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule. If no federally recognized indirect cost rate is listed on the Schedule for a project funded under this Agreement, no indirect costs may be charged to the project by the subrecipient carrying out that project.

6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

**UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development**

BY: _____

(Signature)

Clinton E. Johnson, Community Planning and Development Director
(Typed Name and Title)

(Date)

RECIPIENT

City of Fayetteville
(Name of Organization)

BY: _____

(Signature of Authorized Official)

Honorable Lioneld Jordan, Mayor
(Typed Name and Title of Authorized Official)

(Date)