

City of Fayetteville Staff Review Form

2018-0410

Legistar File ID

8/21/2018

City Council Meeting Date - Agenda Item Only
N/A for Non-Agenda Item

Yolanda Fields

8/1/2018

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 AR0044L6F011703 and AR0039L6F011704.

Budget Impact:

2180.642.4957 2180.642.4958

CDBG - Hearth

Account Number	Fund
N/A	N/A
Project Number	Project Title
Budgeted Item? <u>NA</u>	Current Budget \$ -
	Funds Obligated \$ -
	Current Balance \$ -
Does item have a cost? <u>No</u>	Item Cost
Budget Adjustment Attached? <u>No</u>	Budget Adjustment
	Remaining Budget \$ -

V20180321

Purchase Order Number: _____

Previous Ordinance or Resolution # _____

Change Order Number: _____


Approval Date: _____

Original Contract Number: _____

Comments:



MEETING OF AUGUST 21, 2018

TO: Mayor and City Council
THRU: Don Marr, Chief of Staff
FROM: Yolanda Fields, Community Resources Director 
DATE: August 2, 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 81 adults and 94 children. This program is funded by four annual grants. Grants AR0044 and AR0039 will expire on August 31, 2018. Renewal grant funding will begin September 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 AR0044L6F011703 in the amount of \$38,397 and SNAPs Grant AR0039L6F011704 in the amount of \$34,881. 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: AR0044L6F011703
Effective Date:
DUNS No.: 141310578
Component: PH
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: September 1, 2018
Project Location(s): Fayetteville, Arkansas and Northwest Arkansas CoC

EXHIBIT 1
 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 \$38,397 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. Leasing	\$ _____
g. Rental assistance	\$ <u>29,628</u>
h. Supportive services	\$ <u>6,492</u>
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ <u>2,277</u>
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

4. The performance period for the project begins **9/1/2018** and ends **8/31/2019**. 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 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.

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: AR0039L6F011704

Effective Date:

DUNS No.: 141310578

Component: PH

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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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 **\$34,881** for project number **AR0039L6F011704**. 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. Leasing	\$ _____
g. Rental assistance	\$ <u>29,628</u>
h. Supportive services	\$ <u>5,253</u>
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

4. The performance period for the project begins **9/1/2018** and ends **8/31/2019**. 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.
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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)