



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Requested Board Meeting Date: 4/19/16

or Procurement Director Award ☐

Contractor/Vendor Name (DBA): U.S. Department of Housing and Urban Development

Project Title/Description:
Continuum of Care - CASA

Purpose:

Amendment is to extend term date to 6/30/16 to allow to use any unspent funds remaining in the grant account.

Procurement Method:

Program Goals/Predicted Outcomes:

Housing stability and full-time employment opportunities for homeless people in Pima County.

Public Benefit:

Homeless population in Pima County will be reduced.

Metrics Available to Measure Performance:

Annual performance report generated through the Homeless Management Information System database.

Retroactive:

Original Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

☐ Expense Amount: \$ _____ ☐ Revenue Amount: \$ _____

Funding Source(s): _____

Cost to Pima County General Fund: _____

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No ☐ Not Applicable to Grant Awards

Were insurance or indemnity clauses modified? ☐ Yes ☐ No ☐ Not Applicable to Grant Awards

Vendor is using a Social Security Number? ☐ Yes ☐ No ☐ Not Applicable to Grant Awards

If Yes, attach the required form per Administrative Procedure 22-73.

Amendment Information

Document Type: GTAM Department Code: CS Contract Number (i.e., 15-123): 16-62

Amendment No.: 2 AMS Version No.: 1

Effective Date: upon execution by all parties New Termination Date: 6/30/16

☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____

Funding Source(s): U.S. Department of Housing and Urban Development

Cost to Pima County General Fund: \$0.00

Contact: Rise Hart

Department: Community Services, Employment and Training

Telephone: 724-5723

Department Director Signature/Date:

Charles L. Can...

4/8/16

Deputy County Administrator Signature/Date:

[Signature]

4/12/16

County Administrator Signature/Date:

C. R. ...

4/13/16

(Required for Board Agenda/Addendum Items)

ATTACHMENT

AMENDMENT EXTENDING THE TERM OF THE CONTINUUM OF CARE PROGRAM GRANT AGREEMENT AND/OR MOVING FUNDS

This Amendment is made by and between the United States Department of Housing and Urban Development (HUD) and Pima County, (the Recipient), whose business address is 2797 E Ajo Way, Tucson AZ and whose Tax ID number is 86-6000543, for Project Number AZ0027L9T011407, located at Pima County.

RECITALS

1. HUD and the Recipient entered into a—Grant Agreement dated 1 May, 2015, Grant No. AZ00227L9T011407, which expires 30 April, 2016 (the Grant Agreement).
2. At expiration of the Grant Agreement, Recipient expects to have unspent funds remaining in its grant account. HUD and the Recipient are desirous of allowing the Recipient to retain those funds and to continue to use them for eligible project expenditures.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

1. The term of the Grant Agreement is extended through 30 June, 2016.
2. As of 30 April, 2016, the following amounts remain

for Supportive Service costs	<u>\$47,462.99</u>
for Operating costs	<u>\$0.00</u>
for Leasing costs	<u>\$0.00</u>
for Rental Assistance costs	<u>\$13,517.81</u>
for HMIS costs	<u>\$0.00</u>
for Administrative costs	<u>\$7,811.69</u>

ATTACHMENT

We agree that for the extended term of this grant the grant funds will be reprogrammed as follows:

\$ 18,708.00 will be moved from Supportive Services to Rental Assistance

\$ will be moved from to

\$ will be moved from to

\$ will be moved from to

This is a temporary reprogramming of funds for the term of the extension only. It will not be the basis for calculating renewal grant awards.

1. This Amendment of the Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.

The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

UNITED STATES OF AMERICA
Department of Housing and Urban Development
By: The Secretary

ATTEST

BY: _____
(Signature)

(Title)

(Date)

RECIPIENT

By: _____
(Authorized Signatory)

(Type in name of authorized signatory)

(Date)

Clerk, Board of Supervisors

APPROVED AS TO CONTENT



Community Services, Employment
& Training Director

APPROVED AS TO FORM



Karen S. Friar, Deputy County Attorney