



**BOARD OF SUPERVISORS AGENDA ITEM REPORT**  
**CONTRACTS / AWARDS / GRANTS**

Requested Board Meeting Date: September 15, 2015

or Procurement Director Award

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

**Project Title/Description:**

Continuum of Care - Project Advent

**Purpose:**

Amendment to change the Program from Transitional Housing to Permanent Housing: Rapid Re-housing to be consist with language now being used by Housing and Urban Development.

**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:**

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**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.

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**Amendment Information**

Document Type: GTAM Department Code: CS Contract Number (i.e., 15-123): 16-18

Amendment No.: 1 AMS Version No.: \_\_\_\_\_

Effective Date: upon execution by all parties New Termination Date: \_\_\_\_\_

Expense  Revenue  Increase  Decrease Amount This Amendment: \$ \_\_\_\_\_

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

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Cost to Pima County General Fund: \$0.00

Contact: Rise Hart

Department: Community Services, Employment and Training

Telephone: 724-5723

Department Director Signature/Date:

*Chas. S. Hart*

*9/1/15*

Deputy County Administrator Signature/Date:

*E. Dulcetbury*

County Administrator Signature/Date:

(Required for Board Agenda/Addendum Items)

*9/2/15*

Tax ID #: 86-6000543

Project Location: Pima County, Arizona

Grant Number: AZ0042L9T011407

Effective Date: 1 July 2015

DUNS #: 033738662 - 4000

## AMENDMENT TO THE CONTINUUM OF CARE GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Pima County, (the Recipient), 2797 East Ajo Way, Tucson, Arizona 85713.

### RECITALS

1. HUD and the Recipient entered into a Grant Agreement dated 26 June, 2015, having Grant No. AZ0042L9T011407 (the Grant Agreement).
2. The parties are desirous of amending the Grant Agreement to change the program component from **Transitional Housing (TH)** to **Permanent Housing (PH): Rapid Re-Housing (RRH)**.  
The program has an existing project design that assists individuals and families with or without disabilities to move quickly from the streets or emergency shelters into permanent community-based housing;  
Currently makes supportive services available to meet the needs of program participants, but generally does not require participation in services outside of case management;  
Currently allows program participants to retain the unit when the rental assistance, or leasing, and supportive services end as a transition-in-place model.

### AGREEMENTS

The Grant Agreement is hereby amended as follows:

To change the current program component from **TH** to **PH:RRH**.

This Amendment to 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

By: \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

RECIPIENT

By: \_\_\_\_\_  
(Authorized signatory)

\_\_\_\_\_  
(Typed name of authorized  
signatory)

\_\_\_\_\_  
(Date)

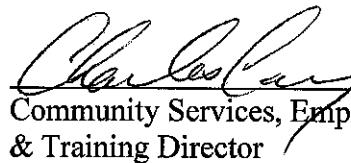
Department of Housing and Urban Development (HUD)  
Grant Number: AZ0042L9T011407  
CONTINUUM OF CARE GRANT AGREEMENT  
Amendment #1

Page 3 – SIGNATURES continued

**ATTEST**

Clerk, Board of Supervisors

**APPROVED AS TO CONTENT**

  
\_\_\_\_\_  
Community Services, Employment  
& Training Director

**APPROVED AS TO FORM**

  
\_\_\_\_\_  
TOBIN ROSEN  
\_\_\_\_\_  
Karen S. Friar, Deputy County Attorney