



BOARD OF SUPERVISORS AGENDA ITEM REPORT  
AWARDS / CONTRACTS / GRANTS

Award  Contract  Grant

Requested Board Meeting Date: 01/07/2025

\* = Mandatory, information must be provided

or Procurement Director Award:

**\*Contractor/Vendor Name/Grantor (DBA):**

State of Arizona Department of Housing (ADOH)

**\*Project Title/Description:**

Department of Health and Human Services, Low-Income Weatherization Assistance Program (LIHEAP)

**\*Purpose:**

The Low Income Home Energy Assistance Program (LIHEAP WAP) award will be comprised of Department of Health & Human Services funding. Funds will allow Pima County to provide installation/repair and energy efficiency measures to dwellings occupied by low-income households in Pima County, Arizona excluding the city limits of the City of Tucson. This item is to accept additional funding for grant ID #81168; original agreement and amendment were received at the same time from ADOH. This amendment is increasing the amount of LIHEAP funding in the Pima County budget from \$276,072.00 to \$566,252.00.

Indirect Costs: ADOH does not allow indirect costs.

Attachment: ADOH 229-24, Amendment 1

**\*Procurement Method:**

The grant award was reviewed and signed by PCAO.

**\*Program Goals/Predicted Outcomes:**

Installation or repairs of energy-efficiency measures to qualified low-income, owner-occupied households in Pima County outside of the City of Tucson city limits.

**\*Public Benefit:**

The benefit of the program is qualifying low-income households will be assisted with home energy-efficiency, and health & safety installations or repairs will lower utility costs and make their homes safe, decent, and affordable, which will improve the overall housing stock in Pima County.

**\*Metrics Available to Measure Performance:**

Monthly performance reports will be submitted to ADOH.

**\*Retroactive:**

No

GM approves  
12/17/24  
KAO

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_  
Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_  
 Expense Amount \$ \_\_\_\_\_ \*  Revenue Amount: \$ \_\_\_\_\_

**\*Funding Source(s) required:** \_\_\_\_\_

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Contract is fully or partially funded with Federal Funds?  Yes  No

If Yes, is the Contract to a vendor or subrecipient? \_\_\_\_\_

Were insurance or indemnity clauses modified?  Yes  No  
If Yes, attach Risk's approval.

Vendor is using a Social Security Number?  Yes  No  
If Yes, attach the required form per Administrative Procedure 22-10.

**Amendment / Revised Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_  
Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_  
Commencement Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_  
Prior Contract No. (Synergen/CMS): \_\_\_\_\_

Expense  Revenue  Increase  Decrease

Amount This Amendment: \$ \_\_\_\_\_

Is there revenue included?  Yes  No If Yes \$ \_\_\_\_\_

**\*Funding Source(s) required:** \_\_\_\_\_

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**Grant/Amendment Information** (for grants acceptance and awards)

Award  Amendment

Document Type: Grant Amendment Department Code: CWD Grant Number (i.e., 15-123): 81168  
Commencement Date: 07/01/2024 Termination Date: 06/30/2025 Amendment Number: 01

Match Amount: \$ \_\_\_\_\_  Revenue Amount: \$ 290,180.00

**\*All Funding Source(s) required:** United States Department of Health and Human Services via ADOH WAP (pass-through)

**\*Match funding from General Fund?**  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Match funding from other sources?**  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Funding Source:** \_\_\_\_\_

**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**  
Pass through

Contact: Joel Gastelum/Joel Viers

Department: CWD

Telephone: 724-6750/724-6767

Department Director Signature: 

Date: 12-12-24

Deputy County Administrator Signature: 

Date: 18 Dec 2024

County Administrator Signature: \_\_\_\_\_

Date: 12/18/2024

Contract No.: 229-24  
Termination Date: 06/30/2025  
Amendment No.: 001

**AMENDMENT TO A  
FUNDING AGREEMENT  
Between  
ARIZONA DEPARTMENT OF HOUSING  
And  
Pima County**

This **Agreement** is made and entered into by and between the **Arizona Department of Housing (ADOH)**, and *Pima County*, (**Recipient**).

**RECITALS**

- 1) **ADOH** and **Recipient** have entered into a Contract, stipulating to an award through the State Housing Fund Program or Community Development Block Grant Programs by **ADOH** to **Recipient** for the purpose as outlined in the above referenced Funding Agreement; and
- 2) A revision to said Agreement is necessary, and;
- 3) **ADOH** and **Recipient** agree that the revision is in the best interest of all parties, including beneficiary low-income households; **ADOH** and **Recipient** hereby agree to amend the subject agreement as follows:

**AGREEMENT**

*Pima County has been awarded additional LIHEAP funding in the amount of \$290,180. Please refer to the Attachment C for new budget line item amounts and totals. Pima County will be required to assist an additional 13 units with LIHEAP funding for a total of 45 LIHEAP units.*

The agreement incorporates the Recital paragraphs set forth above.

**The Following Attachments are amended and attached hereto:**

- A**      **Scope of Work**
- B**      **Performance Report/Schedule of Completion**
- C.**     **Budget**
- D.**     **Request for Payment**

Any and all portions of subject Agreement that are not herein specifically amended shall remain unchanged.

In Witness Whereof, **ADOH** and **Recipient** have executed this Amendment that shall become effective when signed by ADOH.

**THE STATE OF ARIZONA,  
DEPARTMENT OF HOUSING**

**Pima County  
RECIPIENT**

BY: \_\_\_\_\_  
Joan Serviss

BY: \_\_\_\_\_  
Adelita S. Grijalva

TITLE: Director

TITLE: Chair, Board of Supervisors

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_

APPROVED AS TO FORM:

Kyle Johnson  
Deputy County Attorney

Manager's Approval: KB

**ATTACHMENT A  
SCOPE OF WORK  
REVISED 11/8/2024**

The Arizona Department of Housing Weatherization Assistance Program (ADOH WAP) award will be comprised of Department of Energy (DOE) and Low Income Home Energy Assistance Program (LIHEAP) funds. Funding will allow Pima County, Workforce and Community Development Department (**recipient**) to provide installation/repair of energy efficiency measures to dwellings occupied by low-income households in Pima County, Arizona EXCLUDING units located within the city limits of the City of Tucson.

**This contract award is contingent upon:**

- A. Assistance is reserved for the following incomes:
  - 1) DOE funds: 200% or below of Federal Poverty Guidelines as published annually or WPN 23-3 HUD means tested 80% or below of Area Median Income; and
  - 2) LIHEAP funds: 200% or below of Federal Poverty Guidelines as published annually.
- B. The program will prioritize services to the following populations:
  - 1) Elderly, at or above the age of sixty (60) years;
  - 2) Persons with Disabilities; and
  - 3) Families with children at or below the age of five (5) years.
- C. DOE WAP funds require adherence to the following provisions as revised:
  - 1) 10 CFR Part 440 as revised;
  - 2) The Arizona Weatherization Assistance Program State Plan (State Plan);
  - 3) Health and Safety Plan (HSD Plan);
  - 4) The Arizona Weatherization Policies and Procedures Handbook;
  - 5) Arizona Weatherization Assistance Program Field Guide;
  - 6) Standard Work Specifications; and
  - 7) DOE WPN 22-4 Quality Work Plan.”
    - a. All energy audits performed will meet or exceed the requirements set forth in WPN 19-4;
    - b. The ADOH Receipt of Field Guide Verification form must be completed and signed by all appropriate representatives on an annual basis.
  - 8) Pima County must ensure all items 1) through 7) are included in contracts with their contractors/vendors.
- D. LIHEAP WAP funding requires adherence to the Arizona Weatherization Assistance Program State Plan (State Plan), Health and Safety Plan (HSD Plan); Arizona Weatherization Policies and Procedures Handbook, Arizona Weatherization Assistance Program Field Guide; Standard Work Specifications; and WAP Memorandum 22-4 Quality Work Plan. Units that do not receive DOE funds will not be required to pass a QCI inspection.
- E. Weatherization Readiness Funds WPN 22-6 (WRF) measures and administration expenditures will be tracked separately from other DOE funding and will not be subject to the DOE Average Cost Per Unit (ACPU) or Health and Safety caps. A waiver must be submitted to ADOH and approved prior to project commencement. Allowable measures include but are not limited to the following:
  - 1) Roof repair;
  - 2) Wall repair (interior or exterior);
  - 3) Ceiling repair;
  - 4) Floor repair;
  - 5) Foundation or subspace repair;
  - 6) Exterior drainage repairs (e.g. landscaping or gutters);
  - 7) Plumbing repairs;
  - 8) Electrical repair; and
  - 9) Clean-up or remediation beyond typical scope of WAP preventing WAP work.
- F. Maximum investment per unit is as follows:

**Funding Agreement with  
State of Arizona, Department of Housing**

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- 1) DOE: ACPU investment over Program Year 2024 (July 1, 2024 to June 30, 2025) is \$8,497;
  - 2) DOE WRF: maximum per unit investment over Program Year 2024 (July 1, 2024 to June 30, 2025) is \$10,000; and
  - 3) LIHEAP: Average per unit investment over Program Year 2024 (July 1, 2024 to June 30, 2025) is \$20,000.
- G. Satisfactory SHPO requirements if applicable must be completed prior to any construction activity or any expenditure of funds.
- H. Pima County will be expected to fully expend awarded funds and complete the following number of units for each funding source:
- 1) DOE: ten (10) completed units passing Quality Control Inspection and ADOH WAP monitoring; and
  - 2) LIHEAP: forty-five (45) completed units passing final inspection and ADOH WAP monitoring.
- I. Pima County must submit the LIHEAP Data Collection Report on the form provided by AzDES by the 15<sup>th</sup> of each month for the previous month's activity.
- J. Pima County must submit copies of all completed Sub-grantee Oversight of Contractors Forms quarterly per ADOH WAP Technical Bulletin 21.3.
- K. Pima County shall make timely payments to vendors per the AZ WAP Policies and Procedures Handbook Section 3.5 Vendor Payments.



**ADOH PERFORMANCE REPORT/SCHEDULE OF COMPLETION** Page 1 of 1

Recipient	Pima County		Date		
Contract No	229-24 Contract Period: from 7/1/2024 to 6/30/2025		Revision #		
Activity	Weatherization Assistance Program				
Recipient Address	Comm. Dev. & Neigh. Cons.Dept - 2797 E. Ajo Way, 3rd Floor		City	Tucson	
Contact Person	Phyllis Ravago		Zip Code	85713	
Phone	520-724-7705	Email	<a href="mailto:Phyllis.Ravago@pima.gov">Phyllis.Ravago@pima.gov</a>	Fax	520-243-7997
Program Specialist	Gloria Castro	Email	<a href="mailto:gloria.castro@azhousing.gov">gloria.castro@azhousing.gov</a>	County	Pima

**Indicate adherence to contract or schedule changes. Due by the 15th of each month for the previous month's activities.**

Contract Schedule	Contract Date	Complete Yes/No	Modification Date
Contract Execution	7/1/2024		
Completion of 2 DOE and 5 LIHEAP Units	9/30/2024		
Completion of 4 DOE and 10 LIHEAP Units (all numbers cumulative)	12/30/2024		
Completion of 7 DOE and 23 LIHEAP Units (all numbers cumulative)	3/31/2025		
Completion of 10 DOE and 45 LIHEAP Units (all numbers cumulative)	6/30/2025		
Project Complete-Contract Close Out	7/31/2025		

**Please provide a brief description of activities performed this three month period. Include occurrences that caused variation from schedule changes to plans, unforeseen circumstances, etc. Please be specific. Finally, answer questions at narrative section A. through H.**

A. # of DOE units 100% complete & QCI Passed?		E. # of LIHEAP units 100% complete?	
B. # of DOE units complete but need QCI?		F. # of LIHEAP units under construction?	
C. # of DOE units under construction?		G. # of LIHEAP Units out to bid?	
D. # of DOE units out to bid?		H.	

Recipient Authorized Signature	Date	Title
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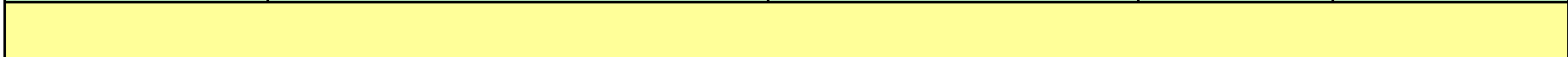
Arizona  
Department  
of Housing

WEATHERIZATION

REVISED 11/8/2024

Attachment C

Budget						
Recipient	Pima County				Date	
Contract No./File No.	229-24 Contract Period: from 7/1/2024 to 6/30/2025			Revision No.		
Activity	Weatherization Assistance Program					
Recipient Address	Comm. Dev. & Neigh. Cons.Dept - 2797 E. Ajo Way, 3rd Floor				City	Tucson
Contact Person	Phyllis Ravago			Zip Code	85713	
Phone	520-724-7705	Email	<a href="mailto:Phyllis.Ravago@pima.gov">Phyllis.Ravago@pima.gov</a>		Fax	520-243-7997
Program Specialist	Gloria Castro	Email	<a href="mailto:gloria.castro@azhousing.gov">gloria.castro@azhousing.gov</a>		County	Pima



a	c	d	e	f	g	h
Budget Line Item or Activity No.	DOE FFY2024	DOE WRF FFY2024	LIHEAP FFY2024	Source Program Year	Source Program Year	GRAND TOTAL ALL SOURCES
Administration Costs	\$ 16,082.00					
Training & Technical Assistance	\$ 17,004.00					
Program Operations	\$ 84,128.00					
Health and Safety	\$ 10,515.00					
Financial Audit	\$ -					
Liability Insurance	\$ -					
DOE WRF Program Operations		\$40,891.00				
LIHEAP Administration			\$ 46,273.00			
LIHEAP Training/TA			\$ 2,876.00			
LIHEAP Program Operations			\$ 517,103.00			
Total	\$127,729.00	\$40,891.00	\$566,252.00			\$734,872.00



**ARIZONA DEPARTMENT OF HOUSING REQUEST FOR PAYMENT SUMMARY SHEET PAGE 1 OF 2**

Recipient	Pima County	Date	
Contract No	229-24 Contract Period: from 7/1/2024 to 6/30/2025	Pay Req. No/Mo	
Activity	Weatherization Assistance Program	Direct Wire Dep	Yes No
Recipient Address	Comm. Dev. & Neigh. Cons.Dept - 2797 E. Ajo Way, 3rd Floor	City	Tucson
Contact Person	Phyllis Ravago	ZIP	85713
Phone	520-724-7705	Email	Phyllis.Ravago@pima.gov
Program Specialist	Gloria Castro	Fax	520-243-7997
		Email	gloria.castro@azhousing.gov
		County	Pima

**Itemized Payment Statement (Sheet 2 of 2) must accompany this form. Include copies of invoices, cashed checks, and other back-up documentation. SIGNATURES are required for processing.**

a	b	c	d	d	e	f	g	h
Budget Line Item or Activity No.	ASAP No.	DOE FFY2024	DOE WRF FY2024	LIHEAP FFY2024	Total Amount Req. to Date	Balance in Account	Amount of this Request	New Balance
1. DOE Administration		\$ 16,082.00			\$ -	\$ 16,082.00		\$ 16,082.00
2. DOE Training & TA		\$ 17,004.00			\$ -	\$ 17,004.00		\$ 17,004.00
3. DOE Program Ops		\$ 84,128.00			\$ -	\$ 84,128.00		\$ 84,128.00
4. DOE Health & Safety		\$ 10,515.00			\$ -	\$ 10,515.00		\$ 10,515.00
5. DOE Financial Audit		\$ -			\$ -	\$ -		\$ -
6. DOE Liability Ins		\$ -			\$ -	\$ -		\$ -
<b>7. DOE Total Draw</b>					<b>\$ -</b>	<b>\$ 127,729.00</b>	<b>\$ -</b>	<b>\$ 127,729.00</b>
8. DOE WRF Prg. Ops.			\$40,891.00		\$ -	\$ 40,891.00		\$ 40,891.00
9. DOE WRF Total Draw					<b>\$ -</b>	<b>\$ 40,891.00</b>	<b>\$ -</b>	<b>\$ 40,891.00</b>
10. LIHEAP Admin.				\$ 46,273.00	\$ -	\$ 46,273.00		\$ 46,273.00
11. LIHEAP Training/TA				\$ 2,876.00	\$ -	\$ 2,876.00		\$ 2,876.00
12. LIHEAP Program Ops				\$ 517,103.00	\$ -	\$ 517,103.00		\$ 517,103.00
<b>13. LIHEAP Total Draw</b>					<b>\$ -</b>	<b>\$ 566,252.00</b>	<b>\$ -</b>	<b>\$ 566,252.00</b>
<b>Total</b>		<b>\$ 127,729.00</b>	<b>\$ 40,891.00</b>	<b>\$ 566,252.00</b>	<b>\$ -</b>	<b>\$ 734,872.00</b>	<b>\$ -</b>	<b>\$ 734,872.00</b>

Recipient Authorized Signature	Date	Title
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**Recipient Authorized Signatory certifies that all activities undertaken by the contractor with funds provided under this contract have been carried out in accordance with the contract. Attach wiring information if not previously submitted. Attach alternate mailing address if necessary.**

Performance Reports	Current <input type="checkbox"/>	Not Current <input type="checkbox"/>	For ADOH Use Only
ADOH Program Specialist Approval	Date		
			ADOH Program Administrator Appr
			Date