



Stanislaus Regional Housing Authority

ALPINE | AMADOR | CALAVERAS | INYO | MARIPOSA
MONO | STANISLAUS | TUOLUMNE COUNTIES

DATE: December 5, 2024

TO: Board of Commissioners

FROM: Jim Kruse, Executive Director

SUBJECT: **Action Item #1: A RESOLUTION APPROVING A PROJECT INTAKE FORM FOR FUNDING AND THE EXECUTION OF A GRANT AGREEMENT AND ANY AMENDMENTS THERETO FROM THE 2023 CDBG-DR MIGRANT RESILIENCY CENTER PROGRAM**

PREPARED BY: Kim Ryan, Deputy Executive Director

RESOLUTION NO: **23-24-40**

SUMMARY

The State of California (the “State”) Department of Community Development (HCD) has a current contractual relationship with Stanislaus Regional Housing Authority (the “Authority”) through its Office of Migrant Services Program (OMS) for the purpose of managing and maintaining the OMS Buena Vista Migrant Center.

The Authority was notified by OMS of funding available through the Community Development Block Grant – Disaster Recovery (CDBG – DR) appropriation, allocated by HUD for capital improvement projects to address resiliency, habitability, and health and safety issues, as well as improvements that help mitigate future disasters and may allow the Migrant Center to be used as temporary shelter during disasters. The amount of CDBG-DR funding that would be allocated for this purpose is \$3,668,715.96.

OMS worked with Staff to identify various improvement projects that address the required funding uses of the CDBG-DR program. Staff and OMS continue to work on prioritizing the scope of work for the following approved projects:

- ADA Accessibility
- Replace Water Lines to Well
- Unit Insulation
- Community Facility
- Recreational/Tot Lot Facility
- Sceptic Tank Replacement
- Water Well Generator/Electrical Panel
- Drainage/Asphalt Improvements
- Design/Permitting





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RECOMMENDTION:

Staff recommends the Board of Commissioners approve the Executive Director to execute the necessary documents and accept the award of the 2023 CDBG-DR funds not to exceed amount of \$3,668,715.96.

FISCAL IMPACT:

Funding resources for the project will come from the CDBG-DR program. No Housing Authority funding will be used.

ATTACHMENTS:

Resolution. Note: HCD requires the use of HCD Resolution form.





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Resolution of the Governing Body

Applicants are required to use this Resolution in content and form.

RESOLUTION NO. __ 23-24-40

**A RESOLUTION APPROVING A PROJECT INTAKE FORM FOR FUNDING
AND THE EXECUTION OF A GRANT AGREEMENT AND ANY
AMENDMENTS THERETO FROM THE
2023 CDBG-DR MIGRANT RESILIENCY CENTER PROGRAM**

- A. WHEREAS the State of California (the "State"), Department of Housing and Community Development ("Department") has a current contractual relationship with the _____, through its Office of Migrant Services Program (OMS) ("Program") for the purposes of managing and maintaining the OMS _____.
- B. WHEREAS the _____ commits to facilitate the rehabilitation and improvements at the _____ and agrees to provide direct project management and oversight to the work performed in accordance with all OMS Program requirements, all applicable state and federal rules and laws, and in a manner consistent and in compliance with the Standard Agreement between the _____ and the Department.

BE IT RESOLVED by the [Agency Name] as follows:

SECTION 1:

The _____ has reviewed and hereby approves the submission to the State of California of one or more project intake form(s) in the aggregate amount, not to exceed, of \$ _____ for the following CDBG-DR activities, pursuant to the 2023 CDBG-DR Migrant Resiliency Center Program:

List activities and amounts (*activity totals should include Activity Delivery Costs and General Administration associated with the activity*)

Activity (Infrastructure Project)	Dollar Amount Being Requested for the Activity
	\$
	\$
	\$



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SECTION 2:

The _____ acknowledges compliance with all state and federal public participation requirements in the development of its project intake form(s).

SECTION 3:

The _____ hereby authorizes and directs the _____, or designee*, to execute and deliver all project intake forms and act on the _____'s behalf in all matters pertaining to all such project intake forms.

SECTION 4:

If a project intake form is approved, the _____, or designee*, is authorized to enter into, execute and deliver the grant agreement (*i.e.*, Standard Agreement) and any and all subsequent amendments thereto with the State of California for the purposes of the grant.

Note: New Language: For city jurisdiction applicants, pursuant to [California Government Code sections 40601 and 40602](#), the Mayor or Mayor pro tempore must be the Designated Official, unless the city has an ordinance in effect that expressly authorizes delegation to a third party. In the event of such ordinance, the city must attach the ordinance to this Authorizing Resolution and the City must indicated the third party Designated Official in this Authorizing Resolution to match what is in the ordinance.

SECTION 5:

If a project intake form is approved, the _____, or designee, is authorized to sign and submit Funds Requests and all required reporting forms and other documentation as may be required by the State of California from time to time in connection with the grant.

*** Important Note:**

If the designee is signing any project intake form, agreement, or any other document on behalf of the designated official of the City/County, written proof of designee authority to sign on behalf of such designated official must be included with the Resolution, otherwise the Resolution will be deemed deficient and rejected. Additionally, do not add



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limitations or conditions on the ability of the signatory or signatories to sign documents, or the Resolution may not be accepted. If more than one party's approval is required, list them as a signatory. The only exception is for county counsel or city attorney to approve as to form or legality or both, IF such approval is already part of the standard city/county signature block as evidenced by the signed Resolution itself. Inclusions of additional limitations or conditions on the authority of the signer will result in the Resolution being rejected and will require your entity to issue a corrected Resolution prior to the Department issuing a Standard Agreement.

PASSED AND ADOPTED at a regular meeting of the _____ of the _____ held on _____ by the following vote:

Instruction: Fill in all four vote-count fields below. If none, indicate "0" for that field.

AYES: _____
ABSENT: _____

NOES: _____
ABSTAIN: _____

Signature and Title

STATE OF CALIFORNIA

City/County of _____

I, _____, Chairperson, **Choose an item.** of [Agency Name], State of California, do hereby attest and certify the foregoing Resolution to be a full, true and correct copy of a resolution duly passed and adopted on the date stated thereon and that said Resolution has not been amended, modified, repealed, or rescinded since the date of adoption and is in full force and effect as of this ___ day of _____, 20____.

Name, Clerk of the _____, for _____, State of California



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By: _____
Signature and Title

Note: The attesting officer cannot be the person identified in the Resolution as the authorized signer.