# Lee County Board Of County Commissioners Agenda Item Summary

Blue Sheet No. 2005 1230

FORWARDED TO:

Forwarded To

# 1. ACTION REQUESTED/PURPOSE:

Amend a contract between the State of Florida Department of Community Affairs and the Board of County Commissioners to receive an additional \$43,826 for the Low Income Home Energy Assistance Program (LIHEAP); approve a budget amendment resolution.

## 2. WHAT ACTION ACCOMPLISHES:

Will provide a total of \$485,302 in grant funds for assistance with energy costs to qualified Lee County households

### 3. MANAGEMENT RECOMMENDATION:

Approve and sign a Modification of Agreement between Florida Department of Community Affairs and Lee County Board of County Commissioners to receive additional Low Income Home Energy Program funds; approve a budget amendment resolution.

4. Departmental Category:	05 C 5A	5. Meeting Date: 09-13-2005					
6. Agenda:	7. Requirement/Purpose: (specify)	8. Request Initiated:					
X Consent	Statute	Commissioner					
Administrative	Ordinance	<b>Department</b> Human Services					
Appeals	Admin. Code	Division					
Public	Other	By: Susan Oliver, Program Mgr.					
Walk-On		Dean alimen					

# 9. Background:

The State of Florida, Department of Community Affairs has made available an additional \$43,826 for the Low Income Home Energy Assistance Program. The original grant agreement was signed by the Board of County Commissioners on February 8, 2005. This amendment brings the total grant amount to \$485,302. Approximately eighteen percent (\$89,162) will be retained by the Department of Human Services for administrative and outreach expense. This program provides utility assistance for qualifying low-income households, with priority given to the elderly, disabled and households with small children.

Attachments: Modification Agreement (3 originals)
Budget Amendment Resolution

10. Review for Sched	ulino:				· .		
Department Porchasing Or Director Contracts	Human Resources	Other	County Attorney		Budget Services		County Manager/P.W. Director
Bart N/A	N/A	N/A	July 3	Analyst RK331	Risk Grants	131/05	War Sand
Commission Act Approve Deferred Denied	d				Rec. by CoAtty	RE	CEIVED BY UNITY ADMIN:

# RESOLUTION#

Amending the General Fund #00100 Budget to incorporate unanticipated receipts into estimated Revenues and Appropriations for Fiscal Year 2004-2005.

WHEREAS, in compliance with the Florida Statutes 129.06(2), it is the desire of the Board of County Commissioners of Lee County, Florida, to amend the General Fund #00100 budget for \$43,826 of the additional revenue from the Low Income Home Energy Assistance Program (LIHEAP) Grant and an appropriation of a like amount for indigent rent and utilities;

**ESTIMATED REVENUES** 

WHEREAS, the General Fund #00100 budget shall be amended to include the following amounts which were previously not included.

Prior Total: Additions		\$389,160,058
11078700100.331621.9004	LIHEAP	\$43,826
Amended Total Estimated Reve	nues	\$389,203,884
Prior Total: Additions	APPROPRIATIONS	\$389,160,058
11078700100.508303.106	Indigent Rent and Utilities	\$43,826
Amended Total Appropriations		\$389,203,884
accounts.  Duly voted upon and adopted in, 200  Attest: Charlie Green, Ex-Officio Clerk	5.	by the Board of County Commissioners on this  BOARD OF COUNTY COMMISSIONERS  LEE COUNTY, FLORIDA
BY:		
DEPUTY CLERK		CHAIRMAN
		APPROVED AS TO FORM
DOC TYPE YA LEDGER TYPE BA		OFFICE OF COUNTY ATTORNEY

# MODIFICATION OF AGREEMENT BETWEEN FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS AND LEE COUNTY BOARD OF COUNTY COMMISSIONERS

This Modification is made and entered into by and between the State of Florida, Department of Community Affairs, ("the Department"), and <u>LEE COUNTY BOARD OF COUNTY COMMISSIONERS</u> the ("Recipient") to modify DCA Contract Number <u>05EA-5K-09-46-01-015</u> ("the Agreement").

WHEREAS, the Department and the Recipient have entered into the Agreement, pursuant to which the Department has provided a grant of \$441,476 Recipient; and

WHEREAS, additional funds have become available to increase the amount of the funding granted to the Recipient.

NOW, THEREFORE, in consideration of the mutual promises of the parties contained herein, the parties agree as follows:

1. Paragraph (16)(a) <u>Funding/Consideration</u> is hereby modified to read as follows:

"This is a cost-reimbursement Agreement. The Recipient shall be reimbursed for costs incurred in the satisfactory performance of work hereunder in an amount not to exceed \$485,302 subject to the availability of funds and appropriate budget authority." This revised contract amount includes:

- 1. \$\frac{441,476}{2005-2006} LIHEAP contract allocation
- 2 +\$42,796 Increase in Base Allocation
- 3. +\$1,030 FFY 2004 Leveraging Funds
- 2. Attachment H (Budget Summary and Workplan) is hereby deleted in its entirety and replaced with Amended Attachment H.
- 3. Attachment I (Budget Detail) is hereby deleted in its entirety and replaced with Amended Attachment I.
- 4. Attachment J (Multi-County Fund Distribution) is hereby deleted in its entirety and replaced with Amended Attachment J.
- 5. All provisions of the Agreement being modified and any attachments thereto in conflict with this Modification shall be and are hereby changed to conform with this Modification, effective as of the date of the last execution of this Modification by both parties.
- 6. All provisions not in conflict with this Modification remain in full force and effect, and are to be performed at the level specified in the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this document as of the dates set out herein.

RECIPIENT	STATE OF FLORIDA
By:	Ву:
(Title)	Janice Browning, Director Division of Housing and Community Development
Date:	Date:
59-6000702	
Federal Identification Number	

# LIHEAP REVISED ATTACHMENT G RECIPIENT INFORMATION

FEDERAL YEAR: 05 CONTRACT PERIOD: Date of Signing to March 31, 2006

I.	<u>R</u>	ECIPIENT CA	TEGOR	<u>Y:</u> { } Non-P	rofit {	X } Loc	al Gove	rnment				
II.	CC	OUNTIES TO E	BE SER	VED WITH THE	SE FUNI	os: Le	e					
III.	GE	NERAL ADM	NISTR	ATIVE INFORMA	ATION							
		Name of Rec		Lee Count		of Coun	ty Comn	nissione	ers			
	þ.	Name of Exe	cutive D	irector or Chief A	or or Chief Administrator:			Hawes,	Department Director			
	C.	Recipient Fis	cal Yea	r: From	10/0	1/04	to 09/30/05					
		Street Addre	ss:	2440 Th	2440 Thompson Street			_				
		City: Fo	rt Myers	s, FL	Zip Code:			33901				
		Telephone: (	533-7930		C	ounty:	Lee					
	Fa	x (239) 533-	7960 <sup>—</sup>	E	-Mail Ad	dress:	oliver	sl@leeg	gov.com			
	e.	Mailing Addre	ess (if d	fferent from abov	ve):		Same	)				
	f.			(For local govern	nments)	or Presi	dent/Cha	airman d	of Board			
		(for corporation Name:	•	St Corny								
				St. Cerny								
		Title: Chairman  Home of business address and telephone number other than Recipients Mailing Address:										
		Address:		Box 398	none na	TIDE! OU	ici titali	·	itto Maning Address.			
		Addicas.		lyers, FL					)2			
		Telephone: (		335-2227				0000				
	g.		, —				****					
	Э.	Name:		ra Hollis								
		Title:		Manager	•				***			
		Mailing Addre			0 Thompson Street							
				Fort Myers, FL			Code:	339	01			
	h.	Contact Pers	on:	···········		_ '						
		Name:		Oliver								
		Title:	Progra	ım Manager								
		Mailing Add		2440 Thompso	n Street							
		· ·		Fort Myers, FL	•		Code:	339	01			
		Telephone	: (239)	533-7916		_						
		Fax: (239)	533-	7960								
		E-Mail Add	ress:	oliversl@leego	v.com							
	i.	Person(s) auth	horized	to sign reports:	-							
		Name:		Barbara Hollis	٦	Γitle:	Fiscal	Manage	er			
		Name:		Susan Oliver		Γitle:	Progra	m Man	ager			
		Name:		Diana Childers	7	Γitle:	Fiscal	Officer				
IV.	ΔII	DIT DUE DAT	·F									
		scal Year:	_=	10/01/04			to	09/30	/05			
_	-		of agen	cy fiscal year:	C	04/06	_					

### LIHEAP REVISED ATTACHMENT H BUDGET SUMMARY AND WORKPLAN

RECIPIENT: LEE COUNTY BOARD OF COUNTY COMMISSIONERS

# I. BUDGET SUMMARY

A.  BUDGET CATEGORY		B. Last Approved Budget Amount	C. Adjustments to Last Budget (Optional)	D. Increase in Base Allocation	E. Leveraging	F TOTAL Modified Budget
REVENUE AND FUNDING						
1, LIHEAP Funds (No Leveraging Funds)		\$441,476		\$42,796		\$484,272
GRANTEE ADMINISTRATIVE EXPENSE (C	Cell 2F cannot exce	ed 7.5% of Cell 1F)				
2. Salaries including Fringe; Rent, Utilities, T.	ravel, Other	\$31,320		\$0		\$31,320
GRANTEE OUTREACH EXPENSE (Cell 3F	cannot exceed 15%	of the difference be	tween Cell 1FE mi	nus Cell 2F)	an gallis and galliser	
3. Salaries including Fringe; Rent, Utilities, T	ravel, Other	\$57,942		\$0		\$57,942
DIRECT CLIENT ASSISTANCE						
4. Home Energy Assistance Payments						
(Ceil 4F must be at least 25% of Cell 1F)		\$110,375		\$10,693	_	\$121,068
5. Crisis Benefit Payments		\$233,009		\$31,247		\$264,256
6. Weather Related/Supply Shortage (Cell 6F	must be					
at least 2% of Cell 1F)		\$8,830		\$856		\$9,686
7. DIRECT CLIENT ASSISTANCE SUBTOT	AL (Lines 4+5+6)	\$352,214		\$42,796	\$0	\$395,010
LEVERAGING FUNDS ONLY						
8. Home Energy Assistance						
9. Crisis Assistance					\$1,030	\$1,030
10. TOTAL LEVERAGING (Lines 8+9)					\$1,030	\$1,030
11. <b>GRAND TOTAL</b> (Lines 2+3+7+10)		<b>\$441,476</b>		\$42,796	\$1,030	\$485,302
II. WORKPLAN						D (E-timeted #
Type of Assistance	Estimated #	of Households Amended		Estimated Cost Per Household	of HHs x Estir	nditures (Estimated # nated Cost Per HH) se with Column F abov
IHEAP WOUT LEVERAGING						
Home Energy	1103	1,210		\$100	\$121,068	
Crisis				\$200_	\$264,256	
Weather Related/Supply Shortage	44	48		\$200		9,685
TOTAL	2,312	2,579			WASTER	11.00
EVERAGING		147 - 141 - 176 - 174 Henrick <u>I</u> 47 - 184 - 184				
Home Energy						
Crisis		4		\$257	;	1,030
TOTAL		4				

# LIHEAP ATTACHMENT I

# III. ADMINISTRATIVE AND OUTREACH EXPENSE BUDGET DETAIL (Lines 2-3)

Line Item Number	EXPENDITURE DETAIL (Round up line Items to dollars. Do n decimals in totals)	ot use cents	and	LIHEAP FUNDS
2	ADMINISTRATIVE EXPENSE Average Salaries (including fringe calculated at 3	8%)		
	Fiscal Support:			
	12 hous/week for 40 weeks @ \$19.7600	=	\$9,485	
	FSS Administrative Support & Secondary Case Review:			
	Counselor/Admin Specialist/Program Manager			
	12 hours/week for 40 weeks @ 26.8200	=	\$12,874	
	Clerical and Administrative Support:			
	14 hours/week for 40 weeks @ 16.0017	=	\$8,961	
		TOT	AL	\$31,320
3	OUTREACH Average Salaries (including fringe calculated at 3	8%)		
	Human Services Staff:			
	70 hours/week for 40 weeks @ \$20.6935	=	\$57,942	
		TOT.	AL	57,942
4	DIRECT CLIENT ASSISTANCE Home Energy Assistance	######################################	\$121,068	OBCHROOK) PORKE BASINDER SO
5	Crisis Assistance	=	\$264,256	
6	Weather Related Assistance	=	\$9,686	
9	Crisis Leveraging	=	\$1,030	
		TOT	AL	396,040
allasii salahiiga liila kada		⊕	NDI(O)(AL	\$485,302

# LIHEAP REVISED ATTACHMENT J MULTI-COUNTY FUND DISTRIBUTION

In the form below, describe upon what basis you plan to equitably allocate LIHEAP resources to each of the counties you serve. This plan must be at least in part based on the 150% poverty population of each county. Provide reasoning and numeric justification for distribution plan.

BASIS FOR DISTRIBUTION/CALCULATION USED TO DETERMINE ALLOCATION											
% OF AGENCY'S DIRECT CLIENT ASSISTANCE DOLLARS ALLOCATED TO THIS COUNTY	100%	%	%	0/0	9/6	o/a	0/0	%	%	0%	400%
ALLOCATION	\$485,302										\$ 485,302
COUNTY	Pee										Total Budgeted Direct Client Assistance