Lee County Board Of County Commissioners Agenda Item Summary

Blue Sheet No. 20060500

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 \$387,188 for the Low Income Home Energy Assistance Program (LIHEAP); approve a budget amendment resolution.

2. WHAT ACTION ACCOMPLISHES:

Will provide a total of \$860,492 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. De	partmental Category:	05 C5A		5. Meetin	g Date: 05-02-	2006
6. Ag	enda:	7. Requirement/Purpos	e: (specify)	8. Reques	t Initiated:	
X	Consent	Statute		Commissi	oner	
	Administrative	Ordinance		Departme		
	Appeals	Admin. Code		Division	Susan Oliver, Program	uer
	Public	Other		By:	Susan Óliver, Progran	n Mgr.
	Walk-On				_	

9. Background:

The State of Florida, Department of Community Affairs has made available an additional \$387,188 for the Low Income Home Energy Assistance Program. The original grant agreement was signed by the Board of County Commissioners on January 31, 2006. This amendment brings the total grant amount to \$860,492. There is no match requirement. 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

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ĺ	10.	Reviev	for Sched	uling:								
	Del	arinacht inectar	Purchasing or Contracts	Human Resources	Other	County		Budget:	4/22		Man	County ager/P.W. irector
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RESOLUTION#

Amending the General Fund #00100 Budget to incorporate unanticipated receipts into estimated Revenues and Appropriations for Fiscal Year 2005-2006.

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 \$387,188 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		\$538,109,348
11082500100.331621.9004	LIHEAP	\$387,188
Amended Total Estimated Revenu	nes	\$538,496,536
Prior Total:	APPROPRIATIONS	\$538,109,348
Additions		\$330,103,340
11082500100.508303.106	Indigent Rent and Utilities	\$387,188
Amended Total Appropriations		\$538,496,536
accounts. Duly voted upon and adopted in Cl day of		or the Board of County Commissioners on this BOARD OF COUNTY COMMISSIONERS LEE COUNTY, FLORIDA
By:		
DEPUTY CLERK		CHAIRWOMAN
		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>06EA-3M-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 to the Recipient under the Low-Income Home Energy Assistance Program (LIHEAP) of \$473,304; and

WHEREAS, the Department and the Recipient desire to modify the Agreement.

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 (17)(a) Funding/Consideration 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 \$860,492 subject to the availability of funds and appropriate budget authority. The Recipient is authorized to incur costs in an amount not to exceed \$298,182 until further notification is received from the Department. As funds and budget authority are available, changes to the costs the Recipient may incur will be accompanied by notice from the Department to the Recipient, in the form of certified mail, return receipt requested, to the Recipient contact person identified in Attachment I, Recipient Information. The terms of the Agreement shall be considered to have been modified to allow the Recipient to incur additional costs upon the Recipient's receipt of the written notice from the Department." This revised contract amount includes:
 - 1. \$473,304 Current FFY 2006-2007 LIHEAP contract allocation
 - 2. \$387,188 Base Increase Funds
- 2. Attachment I, Recipient Information, is hereby deleted in its entirety and replaced with Amended Attachment I.

- 3. Attachment J, Budget Summary and Workplan, is hereby deleted in its entirety and replaced with Amended Attachment J.
- 4. Attachment K, Budget Detail, is hereby deleted in its entirety and replaced with Amended Attachment K.
- 5. Attachment L, Multi-County Fund Distribution, is hereby deleted in its entirety and replaced with Amended Attachment L.
- 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.
- 7. 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 DEPARTMENT OF COMMUNITY AFFAIRS
BY:	BY:
(Type Name and Title)	Kimball Love, Director Division of Housing and Community Development
Date:	
59-6000702	_
Federal Identification Number	

LIHEAP REVISED ATTACHMENT I -- RECIPIENT INFORMATION

FEDERAL YEAR: 06 CONTRACT PERIOD: Date of Signing to March 31, 2007

		FOR DCA US	E ONLY	
DAT	E RECEIVED:	REVISIO	NS RECEIVED:	
DCA	CONSULTANT:			
I.	RECIPIENT CATEGOR	RY: { } Non-Profit { X }	Local Government { }	State Agency
II.	COUNTIES TO BE SERV	VED WITH THESE FUNDS:	Lee	
III.	GENERAL ADMINISTR	ATIVE INFORMATION		
		ounty Board of County Comr		
	b. Executive Director o		aren Hawes, Departme	nt Director
	c. Recipient Address:	2440 Thompson Street		
	City: Fort Mye		p Code: 33901	2.70(0
	Telephone: (239) County Lee	E-Mail A	` ′	3-7960 eegov.com
	d. Mailing Address (if o		ddress. Onversiwi	eegov.com
	a. Planing reduces (if t			
			FL, Zip Code_	
	e. Chief Elected Offici	al (Local governments) or Pr	esident/Chairman of Bo	oard for corporations):
	Name: Tamma	ara Hall		
	Title: Chairw	voman		
		ldress and telephone number	other than Recipients N	Mailing Address:
		O. Box 398		
		ort Myers, FL Zip Code:		one: (239) 335-2226
	f. Official to Receive St		me: Barbara Ho	ll <u>is</u>
		Manager		
	Mailing Address:	2440 Thompson Street	7: 0 1	22001
	a Daniniant Cantanta	Fort Myers, FL	Zip Code:	33901
	g. Recipient Contacts: (1) Program:	Name: Susan Oliver	Title:	Program Manager
	(1) Flogram.	Mailing Address:	2440 Thompson S	
		Fort Myers, FL		33901
			7916 Fax: (239)	533-7960
		Cell:	E-mail Address:	oliversl@leegov.com
	(2) Fiscal:	Name: Marla Harve		Senior Account Clerk
	, ,	Mailing Address:	2440 Thompson S	Street
		Telephone: (239) 533	7917 Fax: (239)	533-7960
		Fort Myers, FL	Zip Code:	33901
		Cell:	E-mail Address:	harveymj@leegov.com
	i. Person(s) authorized t	o sign reports: Barbara Ho	ollis, Susan Oliver, Dia	ne Childers
			00/00/0	
V.	AUDIT: Recipient F	iscal Year: <u>10/01/05</u> t	o <u>09/30/06</u>	
a mar		as from end of the recipient's	fiscal year: 04/0	7
D: IL22	LIHEAP\BUDGETFORMS\05 in	10 Contract into 06.doc		

LIHEAP REVISED ATTACHMENT J 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. April 2006 Base Increase Funds	E. TOTAL Modified Budget
REVENUE AND FUNDING					
1. LIHEAP Funds		\$473,304	<u>\$0</u>	\$387,188	\$860,492
GRANTEE ADMINISTRATIVE EXPENSE	Cell 2E cannot exce	ed 8% of Cell 1E)			
2. Salaries including Fringe; Rent, Utilities,	ravel, Other	\$22,158	+\$23.642	\$0	\$45,800
GRANTEE OUTREACH EXPENSE (Ceil 31	cannot exceed 15%	6 of the difference be	etween Cell 1E and	d Cell 2E)	
3. Salaries including Fringe; Rent, Utilities,	ravel, Other	\$19,800	+\$14,850	\$0	\$34,650
DIRECT CLIENT ASSISTANCE					
4. Home Energy Assistance Payments	_				
(Cell 4E must be at least 25% of Cell 1E)		\$118,326	\$0	\$96,799	\$215,125
5. Crisis Benefit Payments	-	\$303,553	-\$38,492	\$282,646	\$547,707
Weather Related/Supply Shortage					
(Cell 6E must be at least 2% of Cell 1E)		\$9,467	\$0	\$7,743	\$17,210
7. DIRECT CLIENT ASSISTANCE SUBTO	AL (Lines 4+5+6)	\$431,346	-\$38,492	\$387,188	\$780,042
LEVERAGING FUNDS ONLY					
8. Home Energy Assistance		giller i de la companya de la compan			
9. Crisis Assistance	_				
10. TOTAL LEVERAGING (Lines 8+9)					
11. GRAND TOTAL (Lines 2+3+7+10)		\$473,304	-\$38,492	\$387,188	\$860,492
II. WORKPLAN					
Type of Assistance		of Households	Estimated Cost Per	(Estimated (ed Expenditures ated # of HHs x Cost Per Household)
	Previous	Amended	Household		ree with Column E above.
Home Energy	788	1,721	\$125		<u> </u>
Crisis	1011	1,825	\$300		547,707
Weather Related/Supply Shortage	31	49	\$350		\$17 <u>,21</u> 0
TOTAL	1,830	3,595			780,042

REVISED ATTACHMENT K ADMINISTRATIVE AND OUTREACH EXPENSE BUDGET DETAIL (BUDGET SUMMARY LINES 2 AND 3)

Line Item Number	EXPENDITURE DETAIL (Round up line items to dollars. Do not us decimals in totals)	se cents a		LIHEAP FUNDS
	ADMINISTRATIVE EXPENSE Average Salaries (including fringe calculated at 38%)	A Paragraphic Control of the Control	A CONTROL OF THE CONTROL OF T	
	Fiscal Support:			
	20 hous/week for 50 weeks @ avg. \$21.98.00	=	\$21,980	
	FSS Administrative Support & Secondary Case Review:			
	Counselors/Admin Specialist/Program Manager			
	18 hours/week for 50 weeks @ 26.4666	=	\$23,820	
		TOTAL		£45.000
	OUTREACH	TOTAL	wide to now a very deposit of the control of the co	\$45,800
3	Average Salaries (including fringe calculated at 38%)	1-1	des y deserver y . The property of the second	**************************************
	Human Services Staff:			
	35 hours/week for 50 weeks @ avg. \$19.8000	=	\$34,650	
All the side of a matrix of a side of a photography around a post of a side		TOTAL		34,650
4	DIRECT CLIENT ASSISTANCE Home Energy Assistance		\$215,125	
5	Crisis Assistance	=	\$547,707	
6	Weather Related Assistance	=	\$17,210	
			,	
		TOTAL		780,042
				760,042
		GRAN	TO AL	1860797-1

LIHEAP REVISED ATTACHMENT L 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.

COUNTY	ALLOCATION	% OF AGENCY'S DIRECT CLIENT ASSISTANCE DOLLARS ALLOCATED TO THIS COUNTY	BASIS FOR DISTRIBUTION/CALCULATION USED TO DETERMINE ALLOCATION
TEE	\$ 780,702	100	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
Total Budgeted Direct Client Assistance	\$ 780 , 042	100	