Memorandum

MIAMI-DADE COUNTY

Agenda Item No. 8(D)(1)(B)

Date: December 2, 2008

To: Honorable Chairman Bruno A. Barreiro and Members, Board of County Commissioners

From: George M. Burgess
County Manager

Subject: Resolution Ratifying the Action of the County Mayor's Designee in Applying for United States Department of Housing and Urban Development Lead Outreach Grant Program Funds

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Recommendation

It is recommended that the Board ratify the action of the County Mayor's designee in applying for Lead Outreach Grant Program funds in the amount of $299,978 through the US Department of Housing and Urban Development (HUD) and authorize the County Mayor or the County Mayor's designee to execute such agreements, to receive and expend grant funds, to apply for and expend any additional funds that may become available, and to execute any amendments to the agreement.

Scope

Lead outreach education will serve extremely low to moderate income residents throughout Miami-Dade County.

Fiscal Impact/Funding Source

This grant will provide $299,978 for lead outreach education. A voluntary matching contribution of $114,134 will be provided by the Department of Environmental Resources Management (DERM) as in-kind services for DERM staff salaries, county translation services and 311 Answer Center services.

Track Record/Monitor

The Director of DERM will monitor any grant agreements resulting from this application.

Background

Lead-based poisoning is especially dangerous for children and can lead to brain damage, IQ loss, learning disabilities and violent behavior. Lead poisoning is primarily due to exposure to lead-based paint found in homes built before 1978. The *Miami-Dade County's FY 2008-2012 Consolidated Plan and FY Action Plan, Housing Needs Summary,* estimates that 287,364 dwellings in Miami-Dade County are at high risk for lead-paint hazards. The Consolidated Plan directs Miami-Dade County to reduce lead-based paint hazards over a five year span.

Using Lead Outreach Grant Program funds, DERM will implement a countywide educational outreach initiative intended to prevent exposure to lead-based paint hazards by low to moderate income Section 8 applicants/tenants and by tenants in privately owned, project-based dwellings administered by various public housing agencies in Miami-Dade County. These tenants' low income status places them at greater risk of lead exposure and other hazards because they tend to occupy older homes potentially containing lead-based paint or they cannot afford to maintain their homes and prevent the paint from deteriorating.

This two-year outreach initiative also intends to increase the lead hazard education and inspection capacity of public housing agency personnel and developers. To implement this initiative, DERM will collaborate with the County Health Department's Childhood Lead Poisoning Prevention Program, the County Office of Community and Economic Development, the County Housing Agency, the Hialeah Housing Authority, the Housing Authority of the City of Miami Beach and the City of North Miami.

The grant application is attached. Due to the grant application deadline of July 17, 2008, this item is submitted for ratification of the County Mayor's designee's action in applying for Lead Outreach Grant Program funds.

Assistant County Manager

MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro and Members, Board of County Commissioners

DATE: December 2, 2008

FROM: R. A. Cuevas, Jr. County Attorney

SUBJECT: Agenda Item No. 8(D)(1)(B)

Please note any items checked.

_____ "4-Day Rule" ("3-Day Rule" for committees) applicable if raised

_____ 6 weeks required between first reading and public hearing

_____ 4 weeks notification to municipal officials required prior to public hearing

_____ Decreases revenues or increases expenditures without balancing budget

_____ Budget required

_____ Statement of fiscal impact required

_____ Bid waiver requiring County Manager's written recommendation

_____ Ordinance creating a new board requires detailed County Manager's report for public hearing

_____ Housekeeping item (no policy decision required)

_____ No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 8(D)(1)(B)
12-2-08

RESOLUTION NO. _____

RESOLUTION RATIFYING THE ACTION OF THE COUNTY MAYOR'S DESIGNEE IN APPLYING FOR UNITED STATES DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT LEAD OUTREACH GRANT PROGRAM FUNDS OF $299,978; AUTHORIZING THE COUNTY MAYOR OR THE COUNTY MAYOR'S DESIGNEE TO EXECUTE SUCH GRANT AGREEMENTS, TO EXPEND SUCH FUNDS AND TO EXECUTE AGREEMENTS AND AMENDMENTS AS REQUIRED

WHEREAS, this Board desires to accomplish the purpose outlined in the accompanying memorandum, a copy of which is incorporated herein by reference,

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board ratifies the action of the County Mayor's designee in applying for United States Department of Housing and Urban Development Lead Outreach Grant Program funds of $299,978; authorizes the County Mayor or the County Mayor's designee to execute such grant agreements and to receive and expend such grant funds; authorizes the County Mayor or the County Mayor's designee to apply for, receive, and expend additional funds that may become available during the term of the grant; and authorizes the County Mayor or the County Mayor's designee to execute any amendment, modification, renewal, cancellation and termination clauses of any such agreements for and on behalf of Miami-Dade County, Florida.

The foregoing resolution was offered by Commissioner , who moved its adoption. The motion was seconded by Commissioner and upon being put to a vote, the vote was as follows:

Bruno A. Barreiro, Chairman
Barbara J. Jordan, Vice-Chairwoman

Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 2nd day of December, 2008. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS

HARVEY RUVIN, CLERK

Approved by County Attorney as
to form and legal sufficiency. PST

By:_____
Deputy Clerk

Peter S. Tell

GRANTS.GOV™

Grant Application Package

Opportunity Title:	Lead Outreach Grant Program
Offering Agency:	US Department of Housing and Urban Development
CFDA Number:	14.904
CFDA Description:	Lead Outreach Grants
Opportunity Number:	FR-5200-N-15
Competition ID:	LOP-15
Opportunity Open Date:	05/04/2008
Opportunity Close Date:	07/17/2008
Agency Contact:	Jonnette G. Hawkins 202.402.7593

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

*** Application Filing Name:** Miami-Dade Lead Outreach Initiative

Mandatory Documents

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

- Application for Federal Assistance (SF-424)
- Project Narrative Attachment Form
- HUD Facsimile Transmittal

Optional Documents

Move Form to Submission List

Move Form to Delete

Optional Documents for Submission

- HUD Community Initiative Form
- Faith Based EEO Survey
- HUD Applicant-Recipient Disclosure Report
- Disclosure of Lobbying Activities (SF-LLL)
- Attachments

Instructions

1 Enter a name for the application in the Application Filing Name field.

- This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
- You can save your application at any time by clicking the "Save" button at the top of your screen.
- The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.

2 Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

- It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.

- The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".

- To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.

- All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.

3 Click the "Save & Submit" button to submit your application to Grants.gov.

- Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
- Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
- The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
- You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

5

OMB Number: 4040-0004
Expiration Date: 01/31/2009

Application for Federal Assistance SF-424

Version 02

* 1. Type of Submission:	* 2. Type of Application:	* If Revision, select appropriate letter(s):
☐ Preapplication	☒ New	
☒ Application	☐ Continuation	* Other (Specify)
☐ Changed/Corrected Application	☐ Revision	

* 3. Date Received:	4. Applicant Identifier:
07/17/2008	

5a. Federal Entity Identifier:	* 5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:	7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name: Miami-Dade County

* b. Employer/Taxpayer Identification Number (EIN/TIN):	* c. Organizational DUNS:
596000573	131910254

d. Address:

* Street1: 111 NW First Street, 29th Floor
Street2:
* City: Miami
County:
* State: FL: Florida
Province:
* Country: USA: UNITED STATES
* Zip / Postal Code: 33128-1994

e. Organizational Unit:

Department Name:	Division Name:
Environmental Resources Mgmt	OSEE

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Mr. * First Name: Herb
Middle Name:
* Last Name: Balfour
Suffix:

Title: Chief, OSEE

Organizational Affiliation:

* Telephone Number: 305-372-6422 Fax Number: 305-372-6419

* Email: BalfoH@miamidade.gov

6

OMB Number: 4040-0004
Expiration Date: 01/31/2009

Application for Federal Assistance SF-424

Version 02

9. Type of Applicant 1: Select Applicant Type:

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

US Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Number:

14.904

CFDA Title:

Lead Outreach Grants

*** 12. Funding Opportunity Number:**

FR-5200-N-15

* Title:

Lead Outreach Grant Program

13. Competition Identification Number:

LOP-15

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Entire jurisdiction of Miami-Dade County

*** 15. Descriptive Title of Applicant's Project:**

Miami-Dade Lead Outreach Initiative

Attach supporting documents as specified in agency instructions.

Add Attachments | Delete Attachments | View Attachments

OMB Number: 4040-0004
Expiration Date: 01/31/2009

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

* a. Applicant: 18
* b. Program/Project: 17 18

Attach an additional list of Program/Project Congressional Districts if needed.

congressional_districts_MDC. | Add Attachment | Delete Attachment | View Attachment

17. Proposed Project:

* a. Start Date: 11/01/2008
* b. End Date: 10/31/2010

18. Estimated Funding ($):

* a. Federal	299,978.00
* b. Applicant	114,134.00
* c. State	0.00
* d. Local	0.00
* e. Other	0.00
* f. Program Income	0.00
* g. TOTAL	414,112.00

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- [ ] a. This application was made available to the State under the Executive Order 12372 Process for review on .
- [x] b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- [ ] c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**

- [ ] Yes
- [x] No

Explanation

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

- [x] ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr.
* First Name: George
Middle Name: M.
* Last Name: Burgess
Suffix:

* Title: County Manager

* Telephone Number: 305-375-5311
Fax Number: 305-375-1262

* Email: gburgess@miamidade.gov

* Signature of Authorized Representative: Wall Dan
* Date Signed: 07/17/2008