

# HAMPTON VA

## Grant Routing Sheet

\*COMPLETED GRANT OVERVIEW PROPOSAL MUST BE ATTACHED BEFORE ROUTING IS INITIATED\*

Date Routing Initiated: 3/5/18 Application Due Date: \_\_\_\_\_

Originating Department: PW Wastewater Department No.: 485

Submitter's Name: Traci Spikes Direct Telephone No. (757) 726-2938

E-mail Address: tspikes@hampton.gov

Grant Title: City of Hampton, Installation of Generators at 2 pumping stations FEMA-DR-4262-VA-020

Other Participating Departments: \_\_\_\_\_

### BEFORE COMPLETING AN APPLICATION:

1. READ THE GENERAL INSTRUCTIONS. \_\_\_\_\_ (Submitter's Initials)
2. COMPLETE GRANT PROPOSAL OVERVIEW. \_\_\_\_\_ (Submitter's Initials)
3. DEPARTMENT HEAD  
ORIGINATING DEPT. Lynn Ailsbrook \_\_\_\_\_  
Print Name Signature Date
4. ASSISTANT CITY  
MANAGER \_\_\_\_\_  
Print Name Signature Date

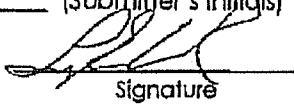
### BEFORE SUBMITTING AN APPLICATION TO THE AWARDING AGENCY:

5. PREPARE INITIAL DOCUMENTATION PACKAGE FOR REVIEW TO INCLUDE (EITHER HARD COPY OR ELECTRONIC): ALL DOCUMENTS RELATED TO THE GRANT, INCLUDING, BUT NOT LIMITED TO INSTRUCTIONS, ATTACHMENTS, EXHIBITS, GRANT DOCUMENTS, PRIMARY GRANT (IF SUBAWARDEE). \_\_\_\_\_ (Submitter's Initials)
6. COMPLETE APPLICATION EXCEPT NECESSARY SIGNATURES. \_\_\_\_\_ (Submitter's Initials)
7. BUDGET DIVISION \_\_\_\_\_  
Print Name Signature Date
8. FINANCE DEPARTMENT \_\_\_\_\_  
Print Name Signature Date
9. CITY ATTORNEY \_\_\_\_\_  
Print Name Signature Date
10. SIGN and SUBMIT APPLICATION. \_\_\_\_\_ (Submitter's Initials)

**AFTER GRANT AWARDED:**

11. ADD AWARD LETTER TO DOCUMENTATION. \_\_\_\_\_ (Submitter's Initials)
12. ORIGINATING DEPT. Lynn Allsbrook see attached 3/22/18  
(Approval as to Content) Print Name Signature Date
13. RISK MANAGEMENT Joe Sanders Joe Sanders 4-17-2018  
Print Name Signature Date
14. HUMAN RESOURCES N/A \_\_\_\_\_  
Print Name Signature Date
15. BUDGET DIVISION Lin Whitley Lori Green email 4/17/18  
Print Name Signature Date
16. FINANCE DEPARTMENT Karl Daughtry email from Veronica Kmetz 3/22/18  
Print Name Signature Date
17. CITY ATTORNEY Veronica Meade see attached 5/3/18  
Print Name Signature Date
18. CITY COUNCIL COUNCIL FILE NO.: \_\_\_\_\_
- CREATE GRANICUS FILE \_\_\_\_\_  
Print Name Signature Date
- ATTACH GRANT DOCUMENTS \_\_\_\_\_  
Print Name Signature Date
- ROUTE FOR APPROVAL \_\_\_\_\_  
Print Name Signature Date
19. ADD SIGNED RESOLUTION TO DOCUMENTATION. \_\_\_\_\_ (Submitter's Initials)
20. OBTAIN SIGNATURES \_\_\_\_\_  
Print Name Signature Date
21. ORIGINATING DEPARTMENT TO RETAIN ORIGINAL DOCUMENTATION. \_\_\_\_\_ (Submitter's Initials)
22. DISSEMINATE ELECTRONIC COPIES TO (INITIAL WHEN DISSEMINATED):
- CITY ATTORNEY: \_\_\_\_\_ (Submitter's Initials)  
FINANCE: \_\_\_\_\_ (Submitter's Initials)  
OTHER PARTICIPATING DEPARTMENTS (LIST): \_\_\_\_\_ (Submitter's Initials)  
\_\_\_\_\_ (Submitter's Initials)

**AFTER GRANT AWARDED:**

11. ADD AWARD LETTER TO DOCUMENTATION.	_____	(Submitter's Initials)	
12. ORIGINATING DEPT. (Approval as to Content)	<u>Lynn Allsbrook</u> Print Name	<u></u> Signature	<u>2/22/2018</u> Date
13. RISK MANAGEMENT	<u>Joe Sanders</u> Print Name	_____ Signature	_____ Date
14. HUMAN RESOURCES	<u>N/A</u> Print Name	_____ Signature	_____ Date
15. BUDGET DIVISION	<u>Lin Whitley</u> Print Name	_____ Signature	_____ Date
16. FINANCE DEPARTMENT	<u>Karl Daughtry</u> Print Name	_____ Signature	_____ Date
17. CITY ATTORNEY	<u>Veronica Meade</u> Print Name	_____ Signature	_____ Date
18. CITY COUNCIL	COUNCIL FILE NO.: _____		
CREATE GRANICUS FILE	_____ Print Name	_____ Signature	_____ Date
ATTACH GRANT DOCUMENTS	_____ Print Name	_____ Signature	_____ Date
ROUTE FOR APPROVAL	_____ Print Name	_____ Signature	_____ Date
19. ADD SIGNED RESOLUTION TO DOCUMENTATION.	_____	(Submitter's Initials)	
20. OBTAIN SIGNATURES	_____ Print Name	_____ Signature	_____ Date
21. ORIGINATING DEPARTMENT TO RETAIN ORIGINAL DOCUMENTATION.	_____ (Submitter's Initials)		
22. DISSEMINATE ELECTRONIC COPIES TO (INITIAL WHEN DISSEMINATED):			
CITY ATTORNEY:	_____	(Submitter's Initials)	
FINANCE:	_____	(Submitter's Initials)	
OTHER PARTICIPATING DEPARTMENTS (LIST):	_____	(Submitter's Initials)	
	_____	(Submitter's Initials)	

# HAMPTON VA

## Grant Routing Sheet

**\*COMPLETED GRANT OVERVIEW PROPOSAL MUST BE ATTACHED BEFORE ROUTING IS INITIATED\***

Date Routing Initiated: 5/3/18 Application Due Date: \_\_\_\_\_

Originating Department: PW Wastewater Department No.: 485

Submitter's Name: Traci Spikes Direct Telephone No. (757) 726-2938

E-mail Address: tspikes@hampton.gov

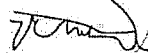
Grant Title: City of Hampton, Installation of Generators at 2 pumping stations FEMA-DR-4262-VA-020

Other Participating Departments: \_\_\_\_\_

### BEFORE COMPLETING AN APPLICATION:

1. READ THE GENERAL INSTRUCTIONS. \_\_\_\_\_ (Submitter's Initials)
2. COMPLETE GRANT PROPOSAL OVERVIEW. \_\_\_\_\_ (Submitter's Initials)
3. DEPARTMENT HEAD Lynn Allsbrook  
ORIGINATING DEPT. \_\_\_\_\_  
Print Name Signature Date
4. ASSISTANT CITY MANAGER \_\_\_\_\_  
Print Name Signature Date

### BEFORE SUBMITTING AN APPLICATION TO THE AWARDING AGENCY:

5. PREPARE INITIAL DOCUMENTATION PACKAGE FOR REVIEW TO INCLUDE (EITHER HARD COPY OR ELECTRONIC): ALL DOCUMENTS RELATED TO THE GRANT, INCLUDING, BUT NOT LIMITED TO INSTRUCTIONS, ATTACHMENTS, EXHIBITS, GRANT DOCUMENTS, PRIMARY GRANT (IF SUBAWARDEE). \_\_\_\_\_ (Submitter's Initials)
6. COMPLETE APPLICATION EXCEPT NECESSARY SIGNATURES. \_\_\_\_\_ (Submitter's Initials)
7. BUDGET DIVISION \_\_\_\_\_  
Print Name Signature Date
8. FINANCE DEPARTMENT \_\_\_\_\_  
Print Name Signature Date
9. CITY ATTORNEY Veronica Meade  
Print Name  Digitally signed by Veronica E. Meade  
Date: 2018.05.03 12:03:50  
+04'00' 05-03-2018  
Signature Date
10. SIGN and SUBMIT APPLICATION. \_\_\_\_\_ (Submitter's Initials)

## Spikes, Traci

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**From:** Kmetz, Veronica  
**Sent:** Thursday, March 22, 2018 12:03 PM  
**To:** Daughtrey, Karl; Green, Jacky; Allsbrook, Lynn; Sanders, Joe; Whitley, Lavinia (Lin); Meade, Veronica; Spikes, Traci  
**Cc:** Dobbins, Barry  
**Subject:** RE: FEMA-DR-4262-VA-020 Grant  
  
**Importance:** High

Traci,

Please accept this email as approval from Finance.

Thanks.

Veronica A. Kmetz  
Finance Department  
Phone: 757-727-6331  
HAMPTON VA

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**From:** Daughtrey, Karl  
**Sent:** Thursday, March 22, 2018 11:45 AM  
**To:** Green, Jacky; Kmetz, Veronica  
**Subject:** FW: FEMA-DR-4262-VA-020 Grant  
**Importance:** High

Good morning,

Can one of you review this grant request ? Please email your response to everyone.

Thanks,  
Karl

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**From:** Spikes, Traci  
**Sent:** Thursday, March 22, 2018 11:36 AM  
**To:** Allsbrook, Lynn <[lallsbro@hampton.gov](mailto:lallsbro@hampton.gov)>; Sanders, Joe <[jsanders@hampton.gov](mailto:jsanders@hampton.gov)>; Whitley, Lavinia (Lin) <[lavinia.whitley@hampton.gov](mailto:lavinia.whitley@hampton.gov)>; Daughtrey, Karl <[kdaughtrey@hampton.gov](mailto:kdaughtrey@hampton.gov)>; Meade, Veronica <[vmeade@hampton.gov](mailto:vmeade@hampton.gov)>  
**Cc:** Dobbins, Barry <[bdobbins@hampton.gov](mailto:bdobbins@hampton.gov)>  
**Subject:** FEMA-DR-4262-VA-020 Grant  
**Importance:** High

Good Morning Everyone,

Please see attached paperwork for our FEMA Grant for two (2) generators. If you could please review, sign off on the Routing Sheet and email back to me I would greatly appreciate it.

If you have any questions or concerns, please let me know.

Thank you,

Traci Spikes  
Administrative Service Manager  
Public Works, Wastewater Division  
757-726-2938

## Spikes, Traci

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**From:** Green, Lori  
**Sent:** Tuesday, April 17, 2018 4:34 PM  
**To:** Spikes, Traci  
**Cc:** Green, Lori; DeProfio, Brian  
**Subject:** FW: FEMA-DR-4262-VA-020 Grant  
**Attachments:** COH Installation of Generators at 2 PS approved grant.pdf; Grant Proposal Overview 3.8.18 Final.pdf; Grant Routing Sheet Final.pdf

**Importance:** High

Hello, the Budget Division approves of the FEMA DR 4262 VA 020 Grant.

Thank you.

Lori Green

**HAMPTON VA**

City Manager's Office-Budget Division  
22 Lincoln Street  
Hampton, Virginia 23669  
(757) 727-6377 (O); (757) 728-3037 (F)  
[www.hampton.gov](http://www.hampton.gov)

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**From:** Spikes, Traci  
**Sent:** Tuesday, April 17, 2018 2:34 PM  
**To:** DeProfio, Brian <[bdeprofio@hampton.gov](mailto:bdeprofio@hampton.gov)>  
**Subject:** FW: FEMA-DR-4262-VA-020 Grant  
**Importance:** High

Good Afternoon Brian,

Please see attached Grant information and routing sheet needs your signature.

Thank you,

Traci  
726-2938

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**From:** Spikes, Traci  
**Sent:** Tuesday, March 27, 2018 11:57 AM  
**To:** DeProfio, Brian <[bdeprofio@hampton.gov](mailto:bdeprofio@hampton.gov)>  
**Subject:** FW: FEMA-DR-4262-VA-020 Grant  
**Importance:** High

Good Morning Brian,

Please see attached and let me know if you have any questions. Sorry, I didn't include you in the original.

Thanks

Traci

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**From:** Spikes, Traci

**Sent:** Thursday, March 22, 2018 11:36 AM

**To:** Allsbrook, Lynn <lallsbro@hampton.gov>; Sanders, Joe <jsanders@hampton.gov>; Whitley, Lavinia (Lin) <lavinia.whitley@hampton.gov>; Daughtrey, Karl <kdaughtrey@hampton.gov>; Meade, Veronica <vmeade@hampton.gov>

**Cc:** Dobbins, Barry <bdobbins@hampton.gov>

**Subject:** FEMA-DR-4262-VA-020 Grant

**Importance:** High

Good Morning Everyone,

Please see attached paperwork for our FEMA Grant for two (2) generators. If you could please review, sign off on the Routing Sheet and email back to me I would greatly appreciate it.

If you have any questions or concerns, please let me know.

Thank you,

Traci Spikes

Administrative Service Manager

Public Works, Wastewater Division

757-726-2938



# HAMPTON VA

## Grant Proposal Overview

**\*COMPLETED GRANT OVERVIEW PROPOSAL MUST BE ATTACHED TO THE GRANT ROUTING SHEET BEFORE ROUTING IS INITIATED\***

**Grant Title:** City of Hampton, Installation of Generators at 2 pumping stations FEMA-DR-4262-VA-020

1. **PRIMARY OR SUB-AWARD:** Application will be submitted to: ☐ the agency that is the primary source of funding (City = Primary Awardee); ☒ the agency that has received the funds from another awarding agency (City = Sub-Awardee).

If the City is a Sub-Awardee, the agreement between the Primary Awardee and the agency to which the City is making application must be attached to this Overview.

2. **GRANT AWARD PERIOD:** If awarded, funds are expected to be received: ☐ in the current fiscal year only; ☒ in the current fiscal year and the future fiscal year(s) of November 13, 2020 or ☐ in the future fiscal year(s) of \_\_\_\_\_.

3. **PREVIOUS APPLICATIONS:** (Not including the current application) This grant was previously applied for during FY17 fiscal year(s); and was previously awarded during \_\_\_\_\_ fiscal year(s).

If previously awarded, provide all prior agenda items numbers and dates of Council approval.

## 4. BACKGROUND/PURPOSE:

In this environmentally sensitive area of the Chesapeake Bay this project will increase the reliability and safety for two of Hampton's critical sewer pumping stations in the event of power outages. This reliability will allow the stations to continue to pump during the outage, drastically reducing the possibility of sewer overflows. The two pump stations are Pump Station 140 and Pump Station 127. Pump Station 140 is located in the northern-central portion of the city. It serves the city's only hospital. Station 127 is located in the western portion of the city. It is located in a residential area adjacent to Interstate 64 and Mercury Blvd, the main commercial thoroughfare in the city. Together these two stations serve approximately 3000 homes and 32 businesses. Critical facilities within the two service areas include three primary schools – Burbank Elementary, Christopher Kraft Elementary and Hampton Christian Academy. Peak flows for the stations are approximately 2,245 gallons per minute. Because of the significant flows generated by these service areas, the holding times are less than 2 hours before overflowing. Due to the proximity of these stations to the Back River, wetlands and recreational waterways there is little to no chance to recover spilled sewerage before it enters the public waterways. Between the two stations, over the last 2 years there have been 24 major power outages totaling approximately 30 hours.

## 5. TYPE OF GRANT EXPECTED TO BE AWARDED:

☒ **Cash Amount** \$ 110,000.00

**Non-Cash (Describe):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 6. FINANCIAL OBLIGATIONS:

a. **Current Financial Obligations:** This grant will ☐ will not ☐ **require** matching funds/contributions. If so, please indicate in the space below the amount and whether the match is cash or in-kind, or both.

☐ **Required Match – CASH**

Amount: Cash \$ \_\_\_\_\_

☒ **Required Match – IN KIND**

\*Value of In-Kind \$ 5,500.00

\* Description:

City of Hampton, Public Works Wastewater Electricians will be performing all the electrical work for the new generators at the pump stations.

b. **Future Financial Obligations:** This proposal will ☐ will not ☒ incur commitments or financial obligations for the City beyond the grant period. If it will, an authority memorandum from the City Manager's Office-Budget Division estimating future matching requirements and the time period must be attached to this Overview.

c. **Resource Obligations:** This proposal will ☐ will not ☒ require special facilities, equipment and/or services provided by the City. If it will, summarize arrangements in a separate memorandum and attach to this Overview.

## 7. Sources of Grant and Matching Funds:

Please identify the funding source of your grant and any required or non-required matches.

- For Federal grants, please provide the Federal Catalog Number (CFDA) and the grant number.
- For State grants, the grant number must be supplied.
- All grant matches must be supplied by the submitting department, unless they have historically received a contribution/match from the City's Matching Funds Pool or a special arrangement has been made with the City Manager's Office-Budget Division.
- If another City department, other than the submitting department, will be providing a funding or in-kind match, documentation to that effect must be submitted along with this grant packet.

**Federal** \$ 82,500  
**Pass Through** \$ \_\_\_\_\_  
**State** \$ 22,000  
**Foundation** \$ \_\_\_\_\_  
**Private** \$ \_\_\_\_\_

**Federal Catalog No.** 97-039  
**Federal Grant No.** \_\_\_\_\_  
**State Grant No.** FEMA-DR-4262-VA-020

**b. Source of Matching Funds\*** (Please check all that apply.)

**Department:** Public Works - Wastewater

**Budget Line-Item:** 09-485-350-01100

**Amount:** \$5,500

**Budget Line-Item:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Budget Line-Item:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

*\*If you are listing a department funding source other than your department, the Budget Division will need written authorization of agreement to withdraw these funds.*

**8. Proposed Budget:**

**City Department-Match**

**Other Match(es)**

	<b>Grant Total</b>	<b>Cash</b>	<b>In-Kind</b>	<b>Cash</b>	<b>In-Kind</b>
Personnel Svcs	5,500		5,500		
Operating Exp.					
Capital Outlay					
<b>Column Totals</b>	5,500		5,500		

**Grand Total:** \$5,500

**9. Additional information that will be helpful to reviewers:**