

Grant Routing Sheet

CC	MPLETED GRANT OVERVI	EW PROPOSAL MUST	BE ATTACHED BEFOR	E ROUTING IS INITIATED
	e Routing Initiated: May		Application Due Da	te: May 30, 2019
Origi	inating Department: Em			partment No.: 325
Subr	nitter's Name: Hui-Sha	an Walker	Direct Telephone No	_{5. (} 757 ₎ 727-1208
E-mo	nil Address: hui-shan.wal	ker@hampton.gov		
Gran	HMGP DR-4	411-VA-009 G	enerators for 2	Pump Stations
	or Participating Departments at routing sheet attached for May 15, 2019 routing.	. Public Work	S	
BEFC	RE COMPLETING AN APP	LICATION:		
1.	READ THE GENERAL INSTR	UCTIONS.	HW (Submitte	er's Initials)
2.	COMPLETE GRANT PROPO	SAL OVERVIEW.	HW (Submitte	er's Initials)
3.	DEPARTMENT HEAD	Hui-Shan Walker		5/15/19
	ORIGINATING DEPT.	Print Name	Signo	iture Date
4.	VIOLOTALIAL CILL	Steven Bor	nd	5/16/19 email
	MANAGER	Print Name	Signo	ature Date
BEFO	RE SUBMITTING AN APPLIC	CATION TO THE AWA	RDING AGENCY:	
5.	PREPARE INITIAL DOCUMI ELECTRONIC): ALL DOC	ENTATION PACKAGE F UMENTS RELATED TO MENTS, EXHIBITS, (OR REVIEW TO INCLUD	IG, BUT NOT LIMITED TO
6.	COMPLETE APPLICATION E	XCEPT NECESSARY SIG	ENATURES. HW	(Submitter's Initials)
7.	CITY ATTORNEY	Tim Drewry		5/23/19 email
		Print Name	Signat	ure Date
8.	BUDGET DIVISION	Lori Green		5/20/19 email
		_Print Name	Signat	ure Date
9.	HUMAN RESOURCES	N/A grant originated May 20	019	
		Print Name	Signat	ure Date

10. FINANCE DEPARTMENT	Veronica Kmetz		5/16/19 email
	Print Name	Signature	Date
11. RISK MANAGEMENT	N/A grant originated May 2019		
2 1000 00000000000000000000000000000000	Print Name	Signature	Date

AFTER GRANT IS AWARDED:

- ✓ After the grant award has been received, and if there no changes to the application or condition(s), the grant may now be placed in Granicus for City Council action.
- ✓ Reference "Quick Tips for Submitting Grants City Council Agenda"



If there are <u>ANY</u> changes to <u>ANY</u> component of the grant, consult with your department's City Attorney for advice on whether to re-route the grant for second approval or continue with the placement of the grant on the Council agenda.



Grant Routing Sheet [Form #2]

PLEASE NOTE:

Completed "GRANT PROPOSAL OVERVIEW" Form must accompany Grant Routing Sheet.

Date Routing Initiated: May	15, 2019		n Due Date: May (30, 2019
Originating Department: Eme	ergency Manag	ement	_ Department No.	325
	n Walker	Direct Tele	phone No. (<u>757</u>) <u>7</u>	27-1208
E-mail Address: hui-shan.wall	ker@hampton.gov			
	101-4411: Gen		or 2 Pump Sta	tions
Other Participating Departments	Public Works	2 **		, « , »
BEFORE COMPLETING AN APP	LICATION:			
1. READ THE GENERAL INSTR	UCTIONS.	-HW	(Submitter's Initials)	
2. COMPLETE GRANT PROPO	SAL OVERVIEW.	HW	(Submitter's Initials)	1 1
3. DEPARTMENT HEAD ORIGINATING DEPT.	Hui-Shan Walke	er	Signature	5/15/19 Date
	Steven Bond	1.	mail attached)	5/16/19
4. ASSISTANT CITY MANAGER	Print Name	<u>le</u>	Signature	Date
BEFORE SUBMITTING AN APPLI	CATION TO THE AWA	RDING AGE	NCY:	
5. PREPARE INITIAL DOCUME ELECTRONIC) OF ALL DO INSTRUCTIONS, ATTACHM	CUMENTS RELATED TO	THE GRANT	, INCLUDING, BUT NO	T LIMITED TO,
6. COMPLETE APPLICATION	EXCEPT NECESSARY SIG	SNATURES.	NW (Subm	itter's Initials)
7. BUDGET DIVISION	Lori Green/Brian DePre	ofrio (en	all attached)	5/20/19
202021 211101011	Print Name		Signature	Date
8. FINANCE DEPARTMENT	Karl Daughtrey/Jacky G	reen (e	mail attached)	8/16/19
8	Print Name		Signature	Date
9. CITY ATTORNEY	Tim Drewry	<	3	5/23/19
	Print Name		Signature	* Daté
10. SIGN & SUBMIT APPLICATION	ON. NN	Submitter's li	nitials)	

AFTER GRANT AWARDED:

11. ADD AWARD LETTER TO DO	CUMENTATION.	(Submitter's Initials)	
12. ORIGINATING DEPT. (Approval as to Content)	Print Name	Signature	
13. RISK MANAGEMENT	Print Name	Signature	 Date
14. HUMAN RESOURCES	Print Name	Signature	Date
15. BUDGET DIVISION	Print Name	Signature	 Date
16. FINANCE DEPARTMENT			
17. CITY ATTORNEY	Print Name	Signature	Date
18. CITY COUNCIL	Print Name GRANICUS FILE NO.	Signature	Date
CREATE GRANICUS FILE	Print Name	Signature	 Date
ATTACH GRANT DOCUMENTS	Print Name	Signature	
ROUTE FOR APPROVAL	Print Name	Signature	Date
19. ADD SIGNED RESOLUTION T		(Submitter's Initi	
20. OBTAIN SIGNATURES	Print Name	Signature	 Date
21. ORGINATING DEPARTMENT	TO RETAIN ORIGINAL DOCU		itter's Initials)
22. DISSMINATE ELECTRONIC C	OPIES TO (INITIAL WHEN DIS	•	,
CITY ATTORNEY: FINANCE: OTHER PARTICIPATING DEP.	ARTMENTS (LIST):	(Submitter's Initials) (Submitter's Initials)	
		(Submitter's Initials) (Submitter's Initials)	

Snowden, Sara

From:

Bond, Steven

Sent:

Thursday, May 16, 2019 12:14 PM

To:

Snowden, Sara; Green, Lori; DeProfio, Brian; Daughtrey, Karl; Green, Jacky; Drewry, Tim

Cc:

Spikes, Traci; Mitchell, Jason L.; Walker, Hui-Shan; Kmetz, Veronica

Subject:

RE: REQUEST FOR APPROVAL- Grant Applications

Please let this email serve as my approval for both grants.

Steven D. Bond, Esq.
Assistant City Manager
City of Hampton, VA

Phone: 757-727-6392 Fax: 757-728-3037

From: Snowden, Sara

Sent: Thursday, May 16, 2019 10:57 AM

To: Bond, Steven <sbond@hampton.gov>; Green, Lori <lgreen@hampton.gov>; DeProfio, Brian

<bdeprofio@hampton.gov>; Daughtrey, Karl <kdaughtrey@hampton.gov>; Green, Jacky <jgreen@hampton.gov>;

Drewry, Tim <tim.drewry@hampton.gov>

Cc: Spikes, Traci <tspikes@hampton.gov>; Mitchell, Jason L. <jmitchell@hampton.gov>; Walker, Hui-Shan <hui-

shan.walker@hampton.gov>; Kmetz, Veronica <veronica.kmetz@hampton.gov>

Subject: REQUEST FOR APPROVAL- Grant Applications

Importance: High

Good morning,

The Office of Emergency Management is pursuing two (2) grants through the Hazard Mitigation Grant Program (HMGP 4401-4411) on behalf of Public Works. These funds were made available through a competitive application process following the recent disasters of Hurricanes Florence and Michael. The application is due on **May 30**, **2019**. The City Manager's signature is required for submission so your assistance in expediting the routing process is appreciated.

These grants are funded at a rate of 75% Federal, 20% State and require a 5% local match.

The grants are entitled:

- 1. HMGP 4401-4411: Generators for 2 Pump Stations
- 2. HMGP 4401-4411: Manual Transfer Switches for 10 Pump Stations

Attached please find the following for your review:

- (2) Grant Routing Sheets (Routing Sheet & Overview)
- (2) Grant Proposal (Application)

Upon receiving local authorization, we will submit the grant application for funding consideration by VDEM. This is a competitive statewide process and recipients will be determined through a peer review process.

Thank you in advance for your consideration and prompt review. In your response, please signify your approval for both applications.

Please feel free to contact me if you have any questions.

Sara Snowden | Deputy Coordinator | Emergency Management 0: 757-726-0649 | C: 757-755-0434

Email: sara.snowden@hampton.gov Website: https://hampton.gov/eoc



Snowden, Sara

From: Green, Lori

Sent: Monday, May 20, 2019 10:00 AM

To: Mitchell, Jason L.

Cc: Snowden, Sara; Bond, Steven; DeProfio, Brian; Daughtrey, Karl; Green, Jacky; Drewry,

Tim; Spikes, Traci; Walker, Hui-Shan; Kmetz, Veronica; Green, Lori

Subject: Re: REQUEST FOR APPROVAL- Grant Applications

Good morning and thank you Jason. Based on this communication, the Budget Division approves these two grant applications.

Thank you. Lori Green

On May 17, 2019, at 5:51 AM, Mitchell, Jason L. < <u>jmitchell@hampton.gov</u>> wrote:

Good morning Lori,

Public Works / Wastewater Operations will cover the matching funds for these two grants. Please allow this email to serve as approval.

Thank you

Jason Mitchell City of Hampton Department of Public Works 550 N Back River Road Hampton VA 23669

From: Green, Lori < lgreen@hampton.gov>
Sent: Thursday, May 16, 2019 12:20 PM

To: Snowden, Sara; Bond, Steven; DeProfio, Brian; Daughtrey, Karl; Green, Jacky; Drewry, Tim

Cc: Spikes, Traci; Mitchell, Jason L.; Walker, Hui-Shan; Kmetz, Veronica

Subject: RE: REQUEST FOR APPROVAL- Grant Applications

Hello, the Grant Overview Forms for these two grants indicates that the match will be provided by Wastewater Management. However, I see no confirmation from Wastewater Management. As such, I cannot sign off on this grant until Wastewater Management provides written confirmation that they will fund the required matches for these two grants.

Thank you.

V/r, Lori Green Budget Manager, Interim City Manager's Office – Budget Division Email:lgreen@hampton.gov Telphone: (757) 727-6377 From: Snowden, Sara

Sent: Thursday, May 16, 2019 10:57 AM

 $\textbf{To:} \ \, \textbf{Bond, Steven} < \underline{\textbf{sbond@hampton.gov}} \textbf{>}; \ \, \textbf{Green, Lori} < \underline{\textbf{lgreen@hampton.gov}} \textbf{>}; \ \, \textbf{DeProfio, Brian}$

<<u>bdeprofio@hampton.gov</u>>; Daughtrey, Karl <<u>kdaughtrey@hampton.gov</u>>; Green, Jacky

<jgreen@hampton.gov>; Drewry, Tim <tim.drewry@hampton.gov>

Cc: Spikes, Traci < tspikes@hampton.gov >; Mitchell, Jason L. < imitchell@hampton.gov >; Walker, Hui-

Shan < hui-shan.walker@hampton.gov >; Kmetz, Veronica < veronica.kmetz@hampton.gov >

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Thank you in advance for your consideration and prompt review. In your response, please signify your approval for both applications.

Please feel free to contact me if you have any questions.

<image005.png>

Sava Snowden Deputy Coordinator | Emergency Management O: 757-726-0649 | C: 757-755-0434

Email:sara.snowden@hampton.gov Website: https://hampton.gov/eoc

<image006.jpg>

Snowden, Sara

From:

Kmetz, Veronica

Sent:

Thursday, May 16, 2019 11:58 AM

To:

Snowden, Sara; Bond, Steven; Green, Lori; DeProfio, Brian; Daughtrey, Karl; Green, Jacky;

Drewry, Tim

Cc:

Spikes, Traci; Mitchell, Jason L.; Walker, Hui-Shan

Subject:

RE: REQUEST FOR APPROVAL- Grant Applications

Finance approves.

Veronica A. Kmetz Finance Department

Phone: 757-727-6331

HAMPTON VA

From: Snowden, Sara <sara.snowden@hampton.gov>

Sent: Thursday, May 16, 2019 10:57 AM

To: Bond, Steven <sbond@hampton.gov>; Green, Lori <lgreen@hampton.gov>; DeProfio, Brian

Drewry, Tim <tim.drewry@hampton.gov>

Cc: Spikes, Traci <tspikes@hampton.gov>; Mitchell, Jason L. <jmitchell@hampton.gov>; Walker, Hui-Shan <hui-

shan.walker@hampton.gov>; Kmetz, Veronica <veronica.kmetz@hampton.gov>

Subject: REQUEST FOR APPROVAL- Grant Applications

Importance: High

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Sara Snowden | Deputy Coordinator | Emergency Management 0: 757-726-0649 | C: 757-755-0434

Email: sara.snowden@hampton.gov Website: https://hampton.gov/eoc





Grant Proposal Overview
*COMPLETED GRANT OVERVIEW PROPOSAL MUST BE ATTACHED TO THE GRANT ROUTING SHEET **BEFORE ROUTING IS INITIATED***

Gr	ant Title: HMGP DR 4411-VA-009 Generators for 2 Pump Stations
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 or ■ in the future fiscal year(s) of FY2021-2022
3.	PREVIOUS APPLICATIONS: (Not including the current application) This grant was previously applied for during FY2017 fiscal year(s); and was previously awarded during FY2018 fiscal year(s).
	If previously awarded, provide all prior agenda items numbers and dates of Council approval.
	Resolution 18-0370 December 12, 2018
4.	BACKGROUND/PURPOSE:
	HMGP DR 4411-VA-009 Tropical Storm Michael grant funding application to install fixed generators at two (2) critical pump stations.

■ Cash Amou	int \$ 154,875	☐ Non-Cash (Describe):
	al Obligations: This grant v	vill \blacksquare will not \square require matching funds/contributions. ne amount and whether the match is cash or in-kind, or
□ Required	l Match – CASH	■ Required Match – IN KIND
Amount: C	Cash \$	*Value of In-Kind \$ 7,375
* Description:	the Virginia Department of Emergen	install generators at two pump stations in the City with a budget of \$154,875. Of ency Management Agency (FEMA) will provide \$118,000 (75%) in federal funding; cy Management (VDEM) will provide a state match of \$29,500 (20%) and the ocal match will be funded through Public Works Wastewater as an in-kind match.
Doligations for the Manager's Office-Boe attached to this	Budget Division estimating	eriod. If it will, an authority memorandum from the City
Manager's Office-Boe attached to this C. Resource Obliga ervices provided be attach to this Overv	Budget Division estimating Overview. Itions: This proposal will Expense the City. If it will, sumr	eriod. If it will, an authority memorandum from the City future matching requirements and the time period mus will not require special facilities, equipment and/or marize arrangements in a separate memorandum and
Manager's Office-Boe attached to this control of the control of th	Budget Division estimating Overview. It is proposal will by the City. If it will, sumraiew. It is and Matching Fundant	eriod. If it will, an authority memorandum from the City future matching requirements and the time period mus will not require special facilities, equipment and/or marize arrangements in a separate memorandum and seconds.
Manager's Office-Boe attached to this c. Resource Obligation ervices provided by attach to this Overvices of Graphers identify the further than the following of the second of the secon	Budget Division estimating Overview. Intions: This proposal will a py the City. If it will, sumre view. Intions of the City of the City of the City. If it will, sumre view. Intions of the City of	eriod. If it will, an authority memorandum from the City future matching requirements and the time period mus will not require special facilities, equipment and/or marize arrangements in a separate memorandum and seconds. and any required or non-required matches.
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Manager's Office-Boe attached to this C. Resource Obligatervices provided buttach to this Overv C. Sources of Grace Please identify the form of the form of the grant management of the process of the control of the	Budget Division estimating Overview. Intions: This proposal will Entry the City. If it will, summinew. Int and Matching Function Unding source of your grant grants, please provide the Feather, the grant number must the supplied by	eriod. If it will, an authority memorandum from the City future matching requirements and the time period must will not require special facilities, equipment and/or marize arrangements in a separate memorandum and and any required or non-required matches. The and any required or non-required matches. The default Catalog Number (CFDA) and the grant number. The submitting department, unless they have historically City's Matching Funds Pool or a special arrangement has
Manager's Office-Boe attached to this one attached to this one control of the con	Budget Division estimating Overview. Intions: This proposal will a py the City. If it will, summinew. International Matching Fundaments, please provide the Feathers, the grant number must take must be supplied by ontribution/match from the with the City Manager's Office of the position of the positi	eriod. If it will, an authority memorandum from the City future matching requirements and the time period must will not require special facilities, equipment and/or marize arrangements in a separate memorandum and and any required or non-required matches. The and any required or non-required matches. The derived Catalog Number (CFDA) and the grant number. The submitting department, unless they have historically City's Matching Funds Pool or a special arrangement has
Manager's Office-Boe attached to this one attached to this one control of the con	Budget Division estimating Overview. Itions: This proposal will by the City. If it will, summinew. In and Matching Function Unding source of your grant grants, please provide the Feathers, the grant number must to the supplied by ontribution/match from the with the City Manager's Office y department, other than the documentation to that effects.	and any required or non-required matches. Ederal Catalog Number (CFDA) and the grant number. be supplied. the submitting department, unless they have historically City's Matching Funds Pool or a special arrangement has ce-Budget Division.

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

Department: Public Works Wastewater		
Budget Line-Item: 09-485-350-06014	Amount: \$7,375	
Budget Line-Item:	Amount:	
Budget Line-Item:	Amount:	

8. Proposed Budget:

City Department-Match

Other Match(es)

	Grant Total	Cash	In-Kind	Cash	In-Kind
Personnel Svcs				A CONTRACTOR OF THE PROPERTY O	
Operating Exp.	147,500		7,375		
Capital Outlay			·	The state of the second	
Column Totals	147,500		7,375		

Grand Total: 154,875

9. Additional information that will be helpful to reviewers:

Public Works is seeking funding to protect pump stations from sewage backups resulting from power outages. This grant seeks funds for the purchase and installation of fixed generators at two (2) critical pump stations which are vulnerable to flooding and power outages.

Pump Station 41 is located adjacent to the Back River. Due to poor underground service in this area, this station frequently loses power for several hours at a time. This station has a roughly five (5) hour hold time before overflow will occur effecting multiple residential homes in the area.

Pump Station 102 is located near Hampton Roads. Due to the amount of flow received, it is critical that backup equipment is on site. The station has roughly a four (4) hour hold time before overflow which would result in a backup into a basement of the residential home across the street.

^{*}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.