

File Number: \_\_\_\_\_  
(Provided by Clerk of Board of Supervisors)

APPLY FOR

**Apply for Grant Resolution Information Form**  
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: Biodiversity Planning
2. Department: Department of the Environment
3. Contact Person: Rachel Buerkle Telephone: 415-355-3704
4. Grant Approval Status (check one):  
 Approved by funding agency  Not yet approved
5. Amount of Grant Funding Approved or Applied for: \$250,000
- 6a. Matching Funds Required? No  
b. Source(s) of matching funds (if applicable):
- 7a. Grant Source Agency: California Strategic Growth Council  
b. Grant Pass-Through Agency (if applicable): ):

8. Proposed Grant Project Summary:  
To create a Biodiversity Action Plan for San Francisco which will enable San Francisco's Biodiversity Program to advance coordination for lands preservation, biodiversity policy development, interagency conservation planning, sustainable natural areas management, restoration and stewardship, and public awareness of our living natural heritage

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: July 1, 2014 End-Date: June 30, 2015

- 10a. Amount budgeted for contractual services: \$-0-
  - b. Will contractual services be put out to bid?
  - c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements?
  - d. Is this likely to be a one-time or ongoing request for contracting out?
- 11a. Does the budget include indirect costs?  Yes  No
  - b1. If yes, how much? 5% of total
  - b2. How was the amount calculated? Amount allowed by funding source
  - c1. If no, why are indirect costs not included?.

Not allowed by granting agency  
 Other (please explain):

To maximize use of grant funds on direct services

c2. If no indirect costs are included, what would have been the indirect costs? N/A

12. Any other significant grant requirements or comments:

**\*\*Disability Access Checklist\*\* (Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

<input checked="" type="checkbox"/> Existing Site(s)	<input checked="" type="checkbox"/> Existing Structure(s)	<input checked="" type="checkbox"/> Existing Program(s) or Service(s)
<input type="checkbox"/> Rehabilitated Site(s)	<input type="checkbox"/> Rehabilitated Structure(s)	<input type="checkbox"/> New Program(s) or Service(s)
<input type="checkbox"/> New Site(s)	<input type="checkbox"/> New Structure(s)	

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Claudia Molina, Departmental ADA Coordinator, Payroll Personnel Clerk

Date Reviewed: \_\_\_\_\_

\_\_\_\_\_  
(Signature Required)

**Department Head or Designee Approval of Grant Information Form:**

Melanie Nutter, Director, Department of the Environment\_\_\_\_\_

Date Reviewed: \_\_\_\_\_

\_\_\_\_\_  
(Signature Required)