

File Number: _____
(Provided by Clerk of Board of Supervisors)

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: Esprit Park Renovation Construction Grant
- 2. Department: Recreation and Park Department
- 3. Contact Person: Nathan Tinclair, Deputy Director of Partnerships Telephone: 415-831-6842

4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$4,165,000

6a. Matching Funds Required: \$0
 b. Source(s) of matching funds (if applicable): N/A

7a. Grant Source Agency: University of California Board of Regents (UCSF)
 b. Grant Pass-Through Agency (if applicable): N/A

8. Proposed Grant Project Summary: UCSF is providing a cash grant of \$4.165 million to be used exclusively towards construction of the Esprit Park renovation project

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

Start-Date: 12/1/21 End-Date: 12/31/23

10a. Amount budgeted for contractual services: \$4,165,000
 b. Will contractual services be put out to bid? Yes
 c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? Yes
 d. Is this likely to be a one-time or ongoing request for contracting out? One-time

11a. Does the budget include indirect costs? Yes No
 b1. If yes, how much?
 b2. How was the amount calculated?
 c1. If no, why are indirect costs not included?
 Not allowed by granting agency To maximize use of grant funds on direct services
 Other (please explain):
 c2. If no indirect costs are included, what would have been the indirect costs? \$208,250

12. Any other significant grant requirements or comments: RPD will provide an update on grant expenditures on a quarterly basis from the start of construction until the project is complete; and will permit UCSF to conduct it's own independent audit of grant expenditures if it chooses.

****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 type="checkbox"/> Existing Program(s) or Service(s) |
| <input checked="" type="checkbox"/> Rehabilitated Site(s) | <input checked="" 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:

The project conceptual plan for renovation has been reviewed and approved by the Department's Disability Access Coordinator for compliance with ADA requirements.

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

Alexis Ward
(Name)

ADA Coordinator for Physical Access, Recreation and Park Department
(Title)

Date Reviewed: _____

_____/s/
(Signature Required)

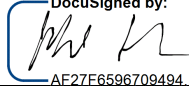
Department Head or Designee Approval of Grant Information Form:

Philip A. Ginsburg
(Name)

General Manager, Recreation and Park Department
(Title)

3/11/2021

Date Reviewed: _____

DocuSigned by:

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(Signature Required)