

File Number: 190761
(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: Senate Bill 1 Local Partnership Formulaic Fund Program
2. Department: San Francisco Public Works
3. Contact Person: Elizabeth Ramos Telephone: 415.554.4069
4. Grant Approval Status (check one):
[x] Approved by funding agency [] Not yet approved
5. Amount of Grant Funding Approved or Applied for: \$2,340,000

Grant Contract ID	Project
TBD	Sunset and Parkside Streets Pavement Renovation

6. a. Matching Funds Required:
Minimum: \$2,340,000
Actual: \$2,632,000
- b. Source(s) of matching funds (if applicable):
General Fund
7. a. Grant Source Agency:
California Transportation Commission
- b. Grant Pass-Through Agency (if applicable):
Not Applicable
8. Proposed Grant Project Summary:

Repaving of 2.5 miles of residential streets in the Sunset and Parkside neighborhoods in San Francisco. The project consists of demolition and pavement renovation, new sidewalk construction, curb ramp construction and retrofit, traffic control, and all related and incidental work within project limits.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: 07/2019 End-Date: 03/2023
10. a. Amount budgeted for contractual services:
\$3,535,714
- 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, the contract will meet our department's LBE requirement.

d. Is this likely to be a one-time or ongoing request for contracting out?
One-time request.

11. a. Does the budget include indirect costs?

Yes No

b. 1. If yes, how much?
\$614,108.78

b. 2. How was the amount calculated?
FY18/19 Indirect Cost Plan

c. 1. 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):

c. 2. If no indirect costs are included, what would have been the indirect costs?
Not Applicable

12. Any other significant grant requirements or comments:

Not Applicable

****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 type="checkbox"/> Existing Structure(s) | <input 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:

Kevin Jensen
(Name)

Disability Access Coordinator
(Title)

Date Reviewed: 6/4/2019

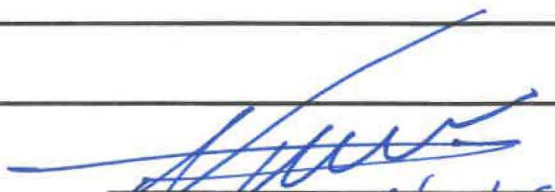

(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Mohammed Nuru
(Name)

Director, San Francisco Public Works
(Title)

Date Reviewed: _____


(Signature Required) 6/10/19

