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: Golden Gate Park, seating area at the intersection of Arguello Blvd. and Conservatory Drive		
Department: Recreation and Park Department		
3. Contact Person: Abigail Maher, Deputy Director of Partnerships Telephone: 415-831-2790		
4. Grant Approval Status (check one):		
[X] Approved by funding agency [] Not yet approved		
5. Amount of Grant Funding Approved or Applied for: up to \$500,000		
6a. Matching Funds Required: \$0 b. Source(s) of matching funds (if applicable): N/A		
7a. Grant Source Agency: Bay Area Young Survivors (BAYS) b. Grant Pass-Through Agency (if applicable): N/A		
8. Proposed Grant Project Summary: BAYS is proposing a combination of cash and in-kind grant funding to the Department for the design and construction of the renovated seating area with memorial elements. The initial cost estimate for the project is \$330,000.00, which includes \$35,000.00 for the Rec Park Capital Project Management fee. If there are additional costs, BAYS has offered to donate up to \$500,000 to cover the full cost of the improvement project.		
9. Grant Project Schedule, as allowed in approval documents, or as proposed:		
Start-Date: upon approval by the Board of Supervisors End-Date: upon notice of substantial completion		
<ul> <li>10a. Amount budgeted for contractual services: \$0</li> <li>b. Will contractual services be put out to bid? No</li> <li>c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? N/A</li> <li>d. Is this likely to be a one-time or ongoing request for contracting out? N/A</li> </ul>		
11a. Does the budget include indirect costs? [] Yes [X] 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 [X] 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?		
12. Any other significant grant requirements or comments:		

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**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):	
[X] Existing Site(s) [] Rehabilitated Site(s) [] New Site(s) [] 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 reasonab	le modifications in policies, practices and procedures;	
2. Having auxiliary aids and services available in	a timely manner in order to ensure communication access;	
, , , , , , , , , , , , , , , , , , ,	cilities open to the public are architecturally accessible and ccess Compliance Officer or the Mayor's Office on	
If such access would be technically infeasible, this is	s described in the comments section below:	
Comments: Mayor's Office of Disability reviewed the concept plan and requested minor revisions to the cover sheet and 2 sheets of the plan. The architect will make the revisions and re-submit the plans.		
Departmental ADA Coordinator or Mayor's Office of	Disability Reviewer: Mira Lee	
Alexis Ward (Name)		
ADA Coordinator for Physical Access, Recreation at (Title)	nd Park Department	
1/19/2023 Date Reviewed:	Docusigned by:  Mark  A730963EB6154A5  (Signature Required)	
Department Head or Designee Approval of Grant Information Form:		
Philip A. Ginsburg (Name)	Information Form:	
General Manager, Recreation and Park Department (Title)		
1/19/2023	DocuSigned by:  AF27F6596709494	
Date Reviewed:	(Signature Required)	