## **Grant Information Form**

File Number:	(Provided by Clerk of Board of Supervisors)					
Purpose: Accompani	es proposed Board of Supervisors resolutions authorizing a department to accept and expend grant funds.					
The following describ	pes the grant referred to in the accompanying resolution:					
1. Grant Title: No	be Valley Town Square Restroom Donation					
2. Department: Re	ecreation and Park Department					
3. Contact Person:	Daliah Khoury, Deputy Director of Development, Telephone: (415) 831-6897					
4. Grant Approval S	tatus (check one):					
[X] Approved by f	unding agency [ ] Not yet approved					
5. Amount of Grant	Funding Applied for: \$425,000 (in-kind)					
6a. Matching Funds	Required: No.					
b. Source(s) of mate	ching funds (if applicable):					
7a. Grant Source Ag	ency: Volumetric Building Companies & Public Restroom Company					
b. Grant Pass-Thro	ugh Agency (if applicable): N/A					
8. Proposed Grant F	Project Summary:					
_	Companies and Public Restroom Company have offered to contribute a prefabricated modular restroom that has been and its installation at Noe Valley Town Square, valued at approximately \$425,000.					
	edule, as allowed in approval documents, or as proposed:  January 2023 End-Date: October 2023					
10. Number of new p	ositions created and funded: 0					
11. If new positions a	re created, explain the disposition of employees once the grant ends? N/A					
12a. Amount of Gran	t 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 DBE requirements?						
d. Is this likely to be a one-time or ongoing request for contracting out?						

13a. Does the Grant budget include indirect costs?			[]Yes	[X] No		
b1. I	f yes, how much?					
b2. How was the amount calculated?						
c. If	no, why are indirect costs not included?	in-kind grant	t			
	[] Not allowed by granting agency	[] To max	imize use of grant funds on di	rect services		
[] Othe	er (please explain):					
14. Any	other significant grant requirements or	comments: N	No			
**Disab	oility Access Checklist***					
15. This Grant is intended for activities at (check all that apply):						
[X]	Existing Site(s)	[]	Existing Structure(s)			
[]	Existing Program(s) or Service(s)	[]	Rehabilitated Site(s)			
[]	Rehabilitated Structure(s)	[]	New Program(s) or Service(	s)		
[]	New Site(s)	[]	New Structure(s)			
con	ppliance with the Americans with Disabi	lities Act and	all other Federal, State and lo	cluded that the project as proposed will be in acal access laws and regulations and will allow the full as described in the comments section:		
RPD will provide reasonable accommodation to children with disabilities to participate in our programs. Special needs children applying for accommodation should provide their IEP report, which includes the stated accommodation(s) to be provided.						
Children with disabilities should have specific written accommodation in their Individualized Education Program (IEP). A child's IEP report will qualify the child to receive inclusion services corresponding to the appropriate benefit level through the San Francisco Unified School District (SFUSD) in collaboration with the San Francisco Recreation and Park Department (RPD).						
ADA C	oordinator for Programmatic Access:	Lucas To	obin, ADA Coordinator for Pro	grammatic Access		
(Signat	rure/Date)	Lucas Tol	/IL A24D6	2/28/2023		
Depart	ment Approval:			Recreation and Park Department		
(Signature/Date)			<u></u>	2/28/2023		