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 of in-kind gifts, services and cash grant funds.

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

- 1. Grant Title: California State Library Building Forward Library Facilities Improvement Grant Award
- 2. Department: Public Library

3. Contact Person: Christine Murdoch Telephone: 557-4246

4. Grant Approval Status (check one):

[] Approved by funding agency [X] Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$6,336,363 for San Francisco Public Library Main Library Seismic Moat and Roofing Replacement projects

6a. Matching Funds Required: \$3,227,272.5 for Main Library Seismic Moat Project: 13080/22472/10009363/0014/567000 and \$3,109,090.5 for Main Library Roofing Replacement Project: 13080/22439/10032980/0001/567000

- b. Source(s) of matching funds (if applicable): Library Preservation Fund
- 7a. Grant Source Agency: California State Library
- b. Grant Pass-Through Agency (if applicable):
- 8. Proposed Grant Project Summary: The Building Forward Library Facilities Improvement Program helps create local libraries capable of meeting the 21st century needs of California's communities, with a priority for facilities that serve high poverty areas of the state. The grand award is for direct support for Main Library's Seismic Moat and Roofing Replacement projects.
- 9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: The date of execution of the Agreement by both parties End-Date: June 30, 2027

10a. Amount budgeted for contractual services: \$2,740,000 for Main Library Seismic Moat Project and \$2,532,000 for Main Library Roofing Replacement Project

- 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 [X] No
 - b1. If yes, how much? \$
 - b2. How was the amount calculated?

c1. If no, why are indirect of [] Not allowed by gra [] Other (please expl	nting agency	[X] To maxim	ize use of grant funds on projects	
c2. If no indirect costs are included, what would have been the indirect costs? There is not an indirect cost plan and we do not have an estimate of what these costs would be.				
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):				
[] Existing Site(s) [] Rehabilitated Site(s) [] New Site(s)	[] Existing Structure [] Rehabilitated Stru [] New Structure(s)		[X] Existing Program(s) or Service(s)[] New Program(s) or Service(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;				
 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:				
Maricela Leon-Barrera				
(Name)				
Access Services Manager & SFPL ADA Coordinator (Title)				
11/17/202 Date Reviewed:	3		Maricela Leon-Barrera (Signature Required)	
			(- G - ZEUAAI DAGAW44D1)	
Department Head or Designee Approval of Grant Information Form:				
Michael Lambert (Name)				
City Librarian				
(Title)				

DocuSign Envelope ID: E809E731-4026-45DA-A8F0-B0450F0B4C4C

Date Reviewed: _____

Docusigned by:

Michael Lamber

(Signature Required)