File Number: (Provided by Clerk of Board of Supervisors)	
Grant Resolution Information Form (Effective July 2011)	
Purpose: Accompanies proposed Board of Supervisexpend grant funds.	sors resolutions authorizing a Department to accept and
The following describes the grant referred to in the	accompanying resolution:
Grant Title: Specified Grant	
2. Department: San Francisco Recreation and Par	k Department
3. Contact Person: Toni Moran Teleph	one: 415 581-2555
4. Grant Approval Status (check one):	
[X] Approved by funding agency	[] Not yet approved
5. Amount of Grant Funding Approved or Applied fo	or: \$3,500,000
Sa. Matching Funds Required: \$ Not Required b. Source(s) of matching funds (if applicable):	
7a. Grant Source Agency: California Department of b. Grant Pass-Through Agency (if applicable): N/A	
which includes a seismic upgrade, the installation eatures, hazardous materials remediation, new	nis project comprises of renovation of the Powerhouse, or of modern utility systems, the restoration of historic or circulation systems to accommodate ADA access, or, a new roof, restored windows, and a new floor with
9. Grant Project Schedule, as allowed in approval o Start-Date: January 2018	documents, or as proposed: End-Date: September 2018
10a. Amount budgeted for contractual services: \$3,6 b. Will contractual services be put out to bid? Ye c. If so, will contract services help to further the requirements? Yes d. Is this likely to be a one-time or ongoing reque	s goals of the Department's Local Business Enterprise (LBE)
11a. Does the budget include indirect costs? b1. If yes, how much? \$ 0 b2. How was the amount calculated? N/A c1. If no, why are indirect costs not included? [X] Not allowed by granting agency [] Other (please explain):	[] Yes [X] No [] To maximize use of grant funds on direct services

c2. If no indirect costs are included, what would have been the indirect costs?

Department and Division overhead associated with Project and Construction Management Services.

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) [X] Existing Structure(s) [] Existing Program(s) or Service(s) [X] Rehabilitated Site(s) [X] Rehabilitated Structure(s) [1] New Program(s) or Service(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 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: John Paul Scott (Name) Disability Access Coordinator, San Francisco Public Work (Title) Department Head or Designee Approval of Grant Information Form: (Name) General Manager, (Title) Date Reviewed: 10-16-2017 (Signature Required)

12. Any other significant grant requirements or comments: Bi-Annual Reporting Required. Audit records must

be kept on file for 5-year after final payment is received.