AGREEMENT BETWEEN THE CITY AND COUNTY OF SAN FRANCISCO AND THE COUNTY OF SOLANO FOR THE DISTRIBUTION OF FY 2018 UASI GRANT FUNDS

FIRST AMENDMENT

THIS AMENDMENT (this "Amendment") is made as of **APRIL 1, 2019**, in San Francisco, California, by and between the **COUNTY OF SOLANO** ("SOLANO") and the City and County of San Francisco, a municipal corporation ("City"), in its capacity as fiscal agent for the UASI Approval Authority, acting by and through the San Francisco Department of Emergency Management.

RECITALS

WHEREAS, City and SOLANO have entered into the Agreement (as defined below); and

WHEREAS, City and SOLANO desire to modify the Agreement on the terms and conditions set forth herein;

NOW, THEREFORE, SOLANO and the City agree as follows:

1. Definitions. The following definitions shall apply to this Amendment:

a. Agreement. The term "Agreement" shall mean the "Agreement between the City and County of San Francisco and the County of SOLANO for the Distribution of FY 2018 UASI Grant Funds" dated November 1, 2018, between SOLANO and City.

b. Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

2. Modifications to the Agreement. The Agreement is hereby modified as follows:

a. Section 3.2, Maximum Amount of Funds. Section 3.2 of the Agreement currently reads as follows:

In no event shall the amount of Grant Funds disbursed hereunder exceed **FIFTY-FIVE THOUSAND**, **FOUR HUNDRED NINETY-ONE DOLLARS** (**\$55,491**). The City will not automatically transfer Grant Funds to SOLANO upon execution of this Agreement. SOLANO must submit a Reimbursement Request under Section 3.10 of this Agreement, approved by the UASI Management Team and City, before the City will disburse Grant Funds to SOLANO.

Such section is hereby amended in its entirety to read as follows:

In no event shall the amount of Grant Funds disbursed hereunder exceed FOUR HUNDRED TWENTY-THREE THOUSAND, SEVEN HUNDRED DOLLARS (\$423,700). The City will not automatically transfer Grant Funds to SOLANO upon execution of this Agreement. SOLANO must submit a Reimbursement Request under Section 3.10 of this Agreement, approved by the UASI Management Team and City, before the City will disburse Grant Funds to SOLANO.

b. Appendix A, Authorized Expenditures and Timelines. Appendix A includes project descriptions, deliverables, not to exceed ("NTE") amounts, and deadlines for deliverables.

Such Appendix is hereby amended to reflect the following:

- i) Add the equipment funds, in the amount of \$165,000 for P25 Trunked Radio System/Regional Microwave Link Project for Project 4; and,
- Add the training funds, in the amount of \$203,209 for Training Program for Project 10.

A revised Appendix A is attached to this Amendment and incorporated by reference as though fully set forth herein. The attached Appendix A supersedes all prior versions of Appendix A.

c. Appendix C, Form of Reimbursement Request dated April 1, 2019. A revised Appendix C is attached to this Amendment and incorporated by reference as though fully set forth herein. The attached Appendix C supersedes all prior versions of Appendix C.

3. Effective Date. Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.

4. Legal Effect. Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be duly executed as of the date first specified herein.

CITY AND COUNTY OF SAN FRANCISCO:

COUNTY OF SOLANO:

SAN FRANCISCO DEPARTMENT OF EMERGENCY MANAGEMENT

By:

By:

MARY ELLEN CARROLL EXECUTIVE DIRECTOR

BIRGITTA E. CORSELLO COUNTY ADMINISTRATOR

Federal Tax ID #: 94-6000538

Approved as to Form:

Dennis J. Herrera City Attorney

By: ____

Jana Clark Deputy City Attorney Approved as to Form:

By: ____

Dennis Bunting Solano County Counsel

Appendices:

Amended Appendix A, Authorized Expenditures and Timelines, dated April 1, 2019 Amended Appendix C, Form of Reimbursement Request, dated April 1, 2019

Appendix A — Authorized Expenditures and Timelines

ENTITY: SOLANO

Total allocation to be spent on the following solution areas:

IJ Number and Title	Program Description	Due Dates	Solution Areas	<u>Amount</u>
Project Title: M-90 F	Forward Looking Infrared (FLIR)			
IJ-2: Protect Critical Infrastructure and Key Resources	Funds to purchase an M-90 Forward Looking Infrared (FLIR).	Project Completion date: 12/31/2019 Final deadline for Claim Submittal: 1/31/2020	<u>Equipment:</u> AEL# 03OE-02-TILA	PROJECT NOT TO EXCEED \$38,531
Project Title: Centri	fuge			

IJ-4: Strengthen Communications Capabilities	Funds for P25 trunked radio system for improve regional interoperable communications.	Project Completion date: 12/31/2019 Final deadline for Claim Submittal: Within 30 days of project completion	<u>Equipment:</u> AEL#: 06CP-03-MWAV	PROJECT NOT TO EXCEED \$165,000
Project Title: Traini	ng Program			
IJ-10: Training & Exercise	Funding to provide regional training in direct support of the goals and objectives pertaining to the prevention, protection, response and recovery from acts of terrorism.	Project Completion date: 12/31/2019 Final deadline for Claim Submittal: Within 30 days of project completion	Training	PROJECT NOT TO EXCEED \$203,209
		TOTAL ALLOCATION		TOTAL NOT TO EXCEED: <u>\$423,700</u>

EQUIPMENT

Reimbursement for Equipment Requires:

- An approved EHP memo, if applicable.
- A performance bond is required for any equipment item that exceeds \$250,000, or for any vehicle, aircraft, or watercraft, regardless of the cost. Failure to obtain and submit a performance bond to the UASI may result in disallowance of cost.
- As allowable under Federal guidelines, procurement of equipment must follow local policies and procedures for competitive purchasing (provided they are not in conflict with Federal regulations which supersede them). If sole source approval is needed, SOLANO must transmit the request to the UASI for request to the State.
- Prior to reimbursement, SOLANO must submit all invoices, AEL numbers, and a list of all equipment ID numbers and the deployed locations.
- SOLANO must inventory, type, organize and track all equipment purchased in order to facilitate the dispatch, deployment, and recovery of resources before, during, and after an incident.

TRAINING

Reimbursement for Training Requires:

- An approved EHP memo, if applicable.
- Training course expenses may include backfill/overtime, travel, tuition, per diem or other grant eligible expenses. Grant eligible training expenses are published in the FY 2018 Homeland Security Grant Program Guidance.
- When seeking reimbursement for grant eligible training expenses, SOLANO must submit completed ledger page indicating course title, feedback number, sub category (e.g., OT, BF, Course Development).
- Provide registration receipts and agendas.
- Provide copies of sign in sheets (must have supervisor's signature).
 - All requests for reimbursements must be submitted within 30 days of project completion, unless an earlier deadline is set in this Appendix. SOLANO should submit reimbursement requests on a quarterly basis, as applicable.
 - Authorized expenditures must fall into one of the following categories: Planning, Organization, Equipment, Training, or Exercises. Descriptions of authorized expenditures are in the following documents:
 - FY 2018 Homeland Security Grant Program Notice of Funding Opportunity: <u>https://www.fema.gov/media-library-data/1526578809767-7f08f471f36d22b2c0d8afb848048c96/FY_2018_HSGP_NOFO_FINAL_508.pdf</u>
 - California Supplement to the Federal Funding Opportunity Announcement, dated September 2018, available at http://www.caloes.ca.gov/GrantsManagementSite/Documents/FY%202018%20HSGP%20State%20Guidance.pdf as "FY 2018 Homeland Security Grant Program California Supplement to the Federal Notice of Funding Opportunity."
 - Authorized Equipment List: <u>http://www.fema.gov/authorized-equipment-list</u>
 - Cal OES Rules and Regulations, including the Recipient Handbook: <u>http://www.caloes.ca.gov/GrantsManagementSite/Documents/2018%20Subrecipient%20Handbook.pdf</u>
 - <u>Any equipment purchased under this Agreement must match the UASI 2017 Grant Application Workbook. Any</u> modification to the inventory list in that Workbook must receive prior written approval from by the Bay Area UASI <u>Program Manager.</u>
 - <u>No Management and Administration expenses are allowed, unless expressly identified and authorized in this</u> <u>Appendix.</u>
 - Sustainability requirements may apply to some or all of the grant funded projects or programs authorized in this Appendix. See Agreement, ¶3.12.
 - <u>All EHP documentation must be submitted and approved prior to any expenditure of funds requiring EHP submission.</u>

Appendix C -- Form of Reimbursement Request

REIMBURSEMENT REQUEST

_____, 2020

UASI Management Team 711 Van Ness Avenue, Suite 420 San Francisco, CA 94102

Re: FY 18 UASI Grant Reimbursement Request

Pursuant to Section 3.10 of the "Agreement between the City and County of San Francisco and the County of SOLANO for the Distribution of FY 2018 UASI Grant Funds" (the "Agreement"), dated NOVEMBER 1, 2018, and as amended by the First Amendment dated APRIL 1, 2019, between the County of SOLANO ("SOLANO") and the City and County of San Francisco, SOLANO hereby requests reimbursement as follows:

Total Amount of Reimbursement Requested in this Request:	\$
Maximum Amount of Funds Specified in Section 3.2 of the Agreement:	\$
Total of All Funds Disbursed Prior to this Request:	\$

SOLANO certifies that:

- (a) The total amount of funds requested pursuant to this Reimbursement Request will be used to reimburse SOLANO for Authorized Expenditures, which expenditures are set forth on the attached Schedule 1, to which are attached true and correct copies of all required documentation of such expenditures.
- (b) After giving effect to the disbursement requested pursuant to this Reimbursement Request, the Funds disbursed as of the date of this disbursement will not exceed the maximum amount set forth in Section 3.2 of the Agreement, or the not to exceed amounts specified in Appendix A for specific projects and programs.

- (c) The representations, warranties and certifications made in the Agreement are true and correct in all material respects as if made on the date hereof, and SOLANO is in compliance with all Grant Assurances in Appendix B of the Agreement. Furthermore, by signing this report, SOLANO certifies to the best of their knowledge and belief that the report is true, complete and accurate and expenditures, disbursements, and cash receipts are for the purpose and objectives set forth in the terms and conditions of the federal award. SOLANO is aware that any false, fictitious or fraudulent information or the omission of any material fact, may subject SOLANO to criminal civil or administrative penalties for fraud, false statements, false claims or otherwise.
- (d) No Event of Default has occurred and is continuing.
- (e) The undersigned is an officer of SOLANO authorized to execute this Reimbursement Request on behalf of SOLANO.

Signature of Authorized Agent:		
Printed Name of Authorized Agent:		
Title:	Date:	

SCHEDULE 1 TO REQUEST FOR REIMBURSEMENT

The following is an itemized list of Authorized Expenditures for which reimbursement is requested:

Project	Payee	Amount	Description	If final claim for project, check box

The following are attached as part of this Schedule 1 (Please check items that are applicable):

Planning:

Organization:

- □ Invoice/Payroll Charges
- Payroll Register
- □ Cleared Check Payment
- \Box Job Description
- □ Functional Timesheets

□ After Action Report□ EHP Approval

 \Box Overtime Authorization

□ Deliverables/Progress Reports

Equipment:

- \Box Cleared Check Payment
- □ Purchase Order
- □ Packing Slip
- □ EHP Approval
- \Box EOC Approval
- \Box Watercraft or Aviation
- \Box Sole Source
- \Box Performance Bond
- Equipment Ledger (Please submit
 - electronic copy to Grants Specialist)

Training:

Exercise:

□ Invoice

- □ Invoice
- \Box Cleared Check Payment \Box Cleared Check Payment
- □ Training Feedback Number

□ Invoice/Payroll Charges

□ Cleared Check Payment

□ Functional Timesheets

□ Deliverables/Progress Reports

□ Payroll Register

 \Box Job Description

- \Box EHP Approval
- □ Certificates/Proof of Participation
- □ Sign In Sheet
- \Box Agenda

For inquiries/questions, please contact:

Phone #:	Email:

Print Name