SUBJECT: INFORMING THE ASSEMBLY OF A GRANT AMENDMENT THE BOROUGH MANAGER WILL BE ASKED TO SIGN RELATING TO RESPONSE TO

THE COVID-19 PANDEMIC.

AGENDA OF: MARCH 2, 2021

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Presented to the assembly. KBJ 03.02.21

MANAGER RECOMMENDATION: For information only.

APPROVED BY MICHAEL BROWN, BOROUGH MANAGER:

Route To:	Department/Individual	Initials	Remarks
	Originator	FIN/EP	
	Finance Director	Ox	
	Borough Attorney	15	
	Borough Clerk	BOTA HO	IRM

ATTACHMENT(S):

PW20 Amendment No. 1 COVID Response Time Extension (2pp)

SUMMARY STATEMENT: In 2020, COVID-19 created an immediate threat to the health and safety of the general public requiring emergency response and protective measures. A state and federal disaster declaration was issued on April 9, 2020. As part of the Public Assistance Program, allowed costs are eligible for 75% federal (Federal Emergency Management Agency-FEMA) and 25% state (Alaska Division of Homeland Security and Emergency Management-DHS&EM) funding assistance.

Eligible costs from July 1 through Sept 30, 2020 have been documented and approved by the state and federal agencies in the amount of \$60,524.26.

The Borough Manager will be asked to sign the attached time extension amendment which will allow time to complete and submit the required closeout documentation.



DEPARTMENT OF MILITARY AND VETERANS AFFAIRS DIVISION OF HOMELAND SECURITY

AND EMERGENCY MANAGEMENT

Obligating Award Document for Disaster - Public Assistance Presidentially Declared

FAIN: (Disaster Number) DR-4533-AK

CFDA No. 97.036 Date of Disaster Declaration 04/09/2020

1.Project Worksheet #	2.Category	3. DUNS #	4. Award [Amendment [5. Employer Tax ID #				
0020	В	081482960	Amend	ment Number	1	92-0030816				
6. Subrecipient Name		S	7. Issuing Office and Address							
Matanuska Susitna B	Borough			Department of Mi	ilitary and V	eterans Affairs				
350 E. Dahlia Ave.				Division of Homela	nd Security	and Emergency				
Palmer, AK 99645			Management PO Box 5750 JBER, AK 99505–5750							
O DIM OLIV					v.ready.alas					
8. PW Obligation Date	12/07/202	0	Agenc	v: Endoral Emoran						
9. Purpose of Award/A			Agenc	y. rederal Emerger	icy Manage	ment Agency (FEMA)				
10 Crowt Assert	nenamen	t to Reflect Ex	xtension	of Period of P	erforma	ince				
10. Grant Award and Te	erms and C	onditions: (see atta	ached Grant T	erms and Conditions))					
Tota	l Approved al Awarded	Amount:		\$ 60,524.26						
70.		ral Share:		\$ 60,524.26						
		ate Share:		45,393.20						
		ent Share:	\$ 15,131.06 \$ 0.00							
See attached: Approv	ed PAGP P	roject Worksheet		(A) -						
		, of our worksheet	Gianti	eriormance Peri	oa: 04/09/2	020 through 04/08/2021				
The acceptance of a grant from the United States creates a legal duty on the part of the grantee to use the funds or property made available in accordance with the conditions of the grant. (GAO Accounting Principles and Standards for Federal Agencies, Chapter 2, Section 16.8[c]). Federal awarding agency is the Federal Emergency Management Agency (FEMA). [2. Project Award Title: COVID response 07.01.20 - 09.30.20										
13. Recipient is required t	o sign and re	oturn one (1) conv	onse ur.ui.z	0 - 09.30.20						
13. Recipient is required to address in Block 6, within	30 days from	n the date in Block	or this docur : 17.	nent with the terms	and condi	tions to the issuing				
14. DHS&EM Project Mana	ager			Phone: (90	7) 420 707	70				
Defeate 111		Fax: (907)	428-7009							
Printed Name of SPAO: Mariano D. Mata				Email: Ma	Email: Mariano.Mata@Alaska.gov					
15. Signature of Jurisdi		Phone: (90)								
Delete I N				Fax: (907) 861-8014						
Printed Name: Casey Cook				15		MatSugov us				
6. Signature of Jurisdiction Chief Financial Officer					Email: Casey.Cook@MatSugov.us Phone: (907) 861-8630					
Driptod Nove Channel		Fax: (907) 8								
Printed Name: Cheyenne				del@MatSugov.us						
7. Signature of Jurisdiction Signatory Official				Date:		aci@matougov.us				
				Phone: (907) 861-8689						
Duint 111				Fax: (907) 86						
Printed Name and Title:										
8. DHS&EM Signatory (Email: Mike.Brown@MatSugov.us Date: 2 - 5 - 2 (
Que Ad "				4.4.1						
William A. Dennis		Phone: (907)								
Alternate Governor's Au		Fax: (907) 428		11/4						
		Email: Bill.De	ennis@Alas	ska.gov						

Grant Award Instructions

As a subrecipient, you are only entitled to costs that are eligible. All eligible work must conform to the Scope of Work as specified in the applicable Project Worksheet (PW). Do not assume all costs or changes will be allowed at project completion. Any change request must contain justification for the eligibility of additional costs or work.

All Emergency Work PWs (Category A and B: "Emergency Work") must be complete six months from the date of the Disaster Declaration. All Permanent Work PWs (Categories C-G, "Permanent Work") must be complete 18 months from the date of the Disaster Declaration. If more time is required, contact your Division Representative before the associated deadline to request a Time Extension. Ample justification is required for approval of any Time Extension Request.

Please carefully review the Damage Description and Dimensions, Scope of Work, and Cost Estimate. If you do not agree with the PW as written, or determinations regarding project eligibility, Scope of Work, time limits, funding, or other determinations, an appeal process is available. This process requires written correspondence identifying the action under appeal with an appropriate justification within 60 days of receipt of this Award. Please attach all pertinent documentation supporting your appeal and mail to:

Paul L. Nelson, Director Division of Homeland Security and Emergency Management PO Box 5750 JBER, AK 99505

Failure to follow these guidelines will jeopardize project funds and may impact future disaster assistance. Additional PWs pending approval will be transmitted in future correspondence. Please review all PWs and ask us about pending PWs to ensure all damaged sites or facilities are identified.

As the Authorized Representative of the <u>Matar</u> I have reviewed these instructions and acknowledge our appublic Assistance Program.	nuska Susitna Borough ppeal rights and responsibilities under the
Michael Brown, Borough Manager Printed Name and Title of Authorized Representative	
Signature	2/12/21 Date

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