

Board of Chosen Freeholders County of Burlington New Jersey



Department of: COMMUNITY DEVELOPMENT

JENNIFER HIROS, CPM

Division Head

Phone: (609) 265-5072

Fax: (609) 265-5500

Physical Address:

795 Woodlane Road
Westampton, NJ 08060

Mailing Address:

P.O. Box 6000
Mount Holly, NJ 08060

November 30, 2020

Adele Gianaris, Acting Clerk
New Hanover Township
2 Hockamick Road
Cookstown, NJ 08511

Re: Burlington County Community Development
New Hanover Township
Project#0625-20: Replacement of HVAC units . Installation of bollard lights.
Architectural Barrier Removal: Provide handicapped parking stalls and
installation of ADA compliant handicapped ramp and push button
doors.
Sub-grantee Agreement

Dear Ms. Gianaris:

I am pleased to advise you on behalf of the Board of Chosen Freeholders that this office has received approval of funding requested for its project referenced above. The approved FY2020 allocation is \$78,000.

Now that approval for the above referenced project has been received, we are issuing a Sub-grantee Agreement.

Please complete the following four enclosures and return them together to the Community Development Office, PO Box 6000, Mount Holly, NJ 08060, no later than **December 14, 2020.**

1. Sub-grantee Agreement: To be executed by the Sub-grantee (2 copies)

- A. Have signature page signed by appropriate official.
- B. Attest signature.
- C. Fill in date
- D. Affix seal.

2. Scope of Services/Contract Information:

Complete form to clearly describe the "Approved Activity" based upon the submitted application. Attach an engineer's estimate for construction-type projects.
REMEMBER, vouchers will be paid based upon project scope detailed here.

3. Budget:

Complete Budget Form by listing all project costs (including engineering and administration) and all sources of funding. Be sure to complete the columns provided to show the name of the source as well as the amount of funding from sources other than CDBG.

4. Project Implementation Schedule:

Complete timetable to show all listed phases of project implementation with project completion and submission of final voucher by September 30, 2020.

Please provide a copy of your Certificate of Insurance per Item 13 of the Sub-grantee Agreement (pages 7 and 8) and list Burlington County Board of Chosen Freeholders as a Certificate Holder. Agreements returned without the Insurance Certification will not be processed until the required Insurance documentation is received.

Omniscircular 2 CFR 200 can be found at <https://www.govinfo.gov/app/details/CFR-2014-title2-vol1/CFR-2014-title2-vol1-part200> and should be downloaded and attached to this Sub-grantee Agreement. Please retain this circular and make it part of the Sub-grantee Agreement when it has been executed by the County and returned to you.

A County Policies Handbook is enclosed. References to this Handbook are made in the Sub-grantee Agreement. Please be alerted to the Penalties for Late Project Completion described in this Handbook.

REMEMBER THAT NO WORK CAN BEGIN AND NO CONTRACTS CAN BE AWARDED UNTIL THE COUNTY HAS EXECUTED THE AGREEMENT AND YOU RECEIVE AUTHORIZATION TO PROCEED BY SEPARATE LETTER.

The Sub-grantee is strongly urged, however, to now complete all necessary preparatory work (design plans, permits, other sources of funding, bid documents, etc.) so that the FY2020 activity supported by CDBG funds can begin as soon as the Agreement has been executed.

IMPORTANT NOTES

1. All construction activity must conform to Labor Standards and Contract Compliance Regulations. Contact Jennifer Hiros at 609-265-5072 for information.
2. Method of payment will be on a reimbursement basis unless other arrangements have been specified in a written agreement.
3. Sub-grantee Agreement expires on September 30, 2021. Failure to complete project and submit the final voucher by that date will result in penalties imposed on future funding.
4. A Labor Standards Handbook and Voucher Payment Process Handbook will be sent along with your copy of the executed Sub-grantee Agreement. Please follow the procedures detailed in those handbooks closely to avoid compliance problems.

Effective communication between you and the Community Development Office will help to guarantee that all program regulations are addressed; please contact Jennifer Hiros at 609-265-5072 if you have any questions or problems during the course of the project.

Sincerely,
Jennifer Hiros

Jennifer Hiros, Division Head
Community Development Program

cc: Eve Cullinan, County Administrator

Enclosures: Sub-grantee Agreement (2 copies)
Scope of Services/Contract Information Form
Budget Form
Project Implementation Schedule
County Policies Handbook

1. Sub-grantee: _____
2. Address: _____
3. Sub-grantee Contact Person: _____
Phone: _____ Fax: _____
4. Sub-grantee DUNS# _____ EIN/TIN# _____
5. Project Engineer: _____
6. Address: _____
7. Engineer Contact Person: _____
Phone: _____ Fax: _____
8. The Sub-grantee authorizes the Community Development program staff to exchange information directly with the above indicated project engineer:
YES _____ NO _____ INITIALS _____
9. Project Description Narrative:
 - a. Describe project activity: _____

[illegible]

- b: Project Location – i.e.: street address(es), census tract(s) and/or block group(s). Indicate nearest main road/street intersection: (Please specify Street, Avenue, Lane, Drive, etc.)

Census Tract: _____ Block Group: _____

Census Tract: _____ Block Group: _____

- c: Provide measurable units of accomplishments (e.g. 2000 lf of paving; 20 rehabilitated dwelling units; 200 lower income residents benefiting from recreational facility):

10. a. Area Benefit Activity:

_____ % Low/Mod Population; or

- b. Direct Benefit Activity:

% Persons or Households who are Low Income: _____; OR

Specify the Presumed Benefit Category: _____

11. Starting and Ending Dates of Project:

12. Construction Project: Attach Engineer's Estimate of Project Costs.

SCOPE OF SERVICES/CONTRACT INFORMATION
TOTAL PROJECT BUDGET*
BURLINGTON COUNTY COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
FY 2020

Sub-grantee: _____

Project #: _____

A Budget Categories (Itemize All Project Costs)	B Community Development Share (CDBG Funds per this Agreement)	C Name of Other Sources of Funds	D Amount of Funds from Other Sources	E Total Program Budget
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Column A: List all project costs (including engineering and administration).

Column B: List amount of CDBG funding.

Column C: List all funding sources by name other than CDBG (including funds from agency/municipality, budget and other public or private sources) to be used to support project costs itemized in Column A. Other funds listed in Columns C and D must be available as needed for the project to meet the Implementation Schedule.

Column D: List amount of funding from sources listed in Column C.

Column E: Totals

SCOPE OF SERVICES/CONTRACT INFORMATION
BURLINGTON COUNTY COMMUNITY DEVELOPMENT BLACK GRANT PROGRAM
PROJECT IMPLEMENTATION SCHEDULE
FY 2020

Sub-grantee: _____

Project Activity Title: _____

Phase of Project Activity	2020 Aug	2020 Sept	Oct	Nov	Dec	2021 Jan	Feb	Mar	Apr	May	June	July	Aug	Sept

NOTE: Sub-grantees must adhere to this schedule in order to be in compliance with this Agreement. Adherence to this schedule is to be reported on monthly progress reports to be provided. Advance approval from the Community Development Office is required for deviation from this schedule. Final Voucher for reimbursement of costs must be submitted within 30 days after project completion. All project work must be completed and final vouchers submitted by September 30, 2021.