Resolution # 24-1

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Community Resources wishes to ap	ply
or and accept an a grant from Illinois Department of Commerce & Economic Opportunity	
For the Weatherization program in the amount	t of
approximately \$286,495.00; and	
WHEREAS, this grant will allow Community Resources to prov	ide
weatherization services to homes in Sangamon and Macon Counties ; as	nd
WHEREAS, as documented by the approval of this resolution, Community Resources Oversight	
	the
•	the
DCEO Weatherization Grant #25-251038 grant and the committees recommend that	the
County Board approve the acceptance of this grant, if awarded	by
Ilinois Department of Commerce & Economic Opportunity	
day of August, Lozy, approves the acceptance of DCEO Weatherization Grant #25-251038 grant, which is detailed above, if the grant warded to the County by Illinois Department of Commerce & Economic Opportunity The County Administrator is authorized to sign required grant documents to execute agreement for this grant. ATTEST:	•
County Clerk Chairman, Sangamon County Board	
Approved by the Community Resources Oversight Committee July 23, 202	1
lery L. lut, Chairma	an
Approved by the Finance Committee August 13, 2024	
AUG 0 9 2024, Chairma	an

SANGAMON COUNTY - GRANT APPROVAL FORM

Weatherization services for low inco	ome clients that live in Sangamo	n and Macon Counties.	
Anticipated Grant Revenue Amount::	\$286,495.00		
Are matching funds required?	Yes 🗷 No		
If yes, please state the amount and the	ne source of matching funds:		
15.17		F	
If this grant is approved, will any new p	ersonnel be hired: Yes	K No	
		[<u>k</u>] NO	
		<u>⊬</u> No	
	d cost of personnel:		on pulating stoff
If Yes, please indicate the number an Are there any <i>indirect</i> costs or <i>legal</i> req	d cost of personnel:		on existing staff,
If Yes, please indicate the number an Are there any indirect costs or legal requirements to continue specific progr	d cost of personnel: quirements associated with this grams after grant periods, etc.):	ant (i.e., increased workload	on existing staff,
If Yes, please indicate the number an Are there any indirect costs or legal requirements to continue specific progr	d cost of personnel: quirements associated with this grams after grant periods, etc.):	ant (i.e., increased workload	on existing staff,
If Yes, please indicate the number an Are there any indirect costs or legal requirements to continue specific progr	d cost of personnel: quirements associated with this grams after grant periods, etc.):	ant (i.e., increased workload	on existing staff, Current FY + 2
If Yes, please indicate the number an Are there any <i>indirect</i> costs or <i>legal</i> requirements to continue specific progress, please provide details. Include	d cost of personnel: guirements associated with this grams after grant periods, etc.): e attachment if needed:	ant (i.e., increased workload ☐ Yes ☑ No	
If Yes, please indicate the number an Are there any indirect costs or legal requirements to continue specific programments, please provide details. Include Number of Employees	d cost of personnel: guirements associated with this grams after grant periods, etc.): e attachment if needed: Current FY	ant (i.e., increased workload ☐ Yes ☑ No	
If Yes, please indicate the number an Are there any indirect costs or legal requirements to continue specific programments, please provide details. Include Number of Employees Personnel Costs (in dollars)	d cost of personnel: quirements associated with this grams after grant periods, etc.): e attachment if needed: Current FY 4	ant (i.e., increased workload ☐ Yes ☑ No	
If this grant is approved, will any new point Yes, please indicate the number and Are there any indirect costs or legal requirements to continue specific programments, please provide details. Include Number of Employees Personnel Costs (in dollars) Fringe Benefit Cost Other Costs (Equipment, etc)	quirements associated with this grams after grant periods, etc.): e attachment if needed: Current FY 4 \$44,559.00	ant (i.e., increased workload ☐ Yes ☑ No	