

Resolution # 11-1

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 SMART wishes to apply for and accept an a grant from IDOT for the CVP program in the amount of approximately TBD; and

WHEREAS, this grant will allow SMART to provide continueing service with newer vehicles; and

WHEREAS, as documented by the approval of this resolution, the Finance Committee has approved the SMART Department's request to apply for the CVP grant and the committee recommends that the County Board approve the acceptance of this grant, if awarded by IDOT.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 11th day of April, 2022, approves the acceptance of the _____ grant, which is detailed above, if the grant is awarded to the County by IDOT.

The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

FILED

MAR 23 2022

Don / Healy
Sangamon County Clerk

ATTEST:

County Clerk

Chairman, Sangamon County Board

Approved by the Finance Committee 3/22, 2022

[Signature]
_____, Chairman

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: SMART

Grant Program Title: CVP

This request is for: a new grant renewal or extension of an existing grant

Grantor: IDOT

Brief description of the grant program and its benefits to Sangamon County:

This program is the same program that allowed SMART to receive more than 1/2 of their existing fleet. Currently 4 vehicles are over their stated useful life

Anticipated Grant Revenue Amount: TBD

Are matching funds required? Yes No

If yes, please state the amount and the source of matching funds:

[Empty box for matching funds details]

If this grant is approved, will any new personnel be hired: Yes No possible if other funding available.

If Yes, please indicate the number and cost of personnel:

Are there any indirect costs or legal requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): Yes No

If Yes, please provide details. Include attachment if needed:

[Empty box for indirect costs details]

	Current FY	Current FY + 1	Current FY + 2
Number of Employees			
Personnel Costs (in dollars)			
Fringe Benefit Cost			
Other Costs (Equipment, etc)			
Total Cost			

Requested by: Kate Downing
(Department Head Signature)

Date: 3/18/22

GRANTOR INFORMATION

Grantor Code	Grantor Description	Grantor Abbreviation
CC	City Council Resolution	CityCouncil
PL	Project Life-Aging	PL
BJA	DOJ Bureau of Justice Assitance	DOJ BJA
DDA	Downtown Development Authority	DwntwnDev
DHS	US Dept of Homeland Security	US DHS
DOE	US Department of Energy	US DOE
DOJ	US Dept of Justice	US DOJ
DOL	US Dept of Labor	US DOL
DOT	US Dept of Transportation	US DOT
HHS	US Health & Human Services	US HHS
HUD	US Housing & Urban Development	US HUD
NCA	National Childrens Alliance	NCA
SCF	Sangamon County Foundation	SCF
CPTF	Crime Prevention Task Force	CrimePrev
IATG	IL Office of the Attorney General	IL ATG
ICEO	IL Dept of Commerce & Economic Opp	IL Com Eco
ICJA	IL Criminal Justice Authority	ICJA
IDCF	IL Dept of Children & Family Services	IL DCFS
IDHS	Illinois Department of Human Services	IL DHS
IDOT	IL Department of Transportation	IL DOT
IDPH	IL Dept of Public Health	IDPH
IEPA	Illinois Environmental Protection Ag	IEPA
IHFS	IL Healthcare & Family Services	IL HFS
IOAP	IL Office of the Appellate Prosecutor	IL OAP
IPRF	IL Public Risk Fund	IPRF
JJDP	Office Juvenile Justice & Delinquency	JJDP
OPHS	Office of Public Health Services	OPHS

If grantor is not found on the above list, please fill in grantor name below and

Request for New Grantor:

Grantor: _____

Grantor: _____

Grantor: _____

Grantor: _____