Resolution # 23-\

WHEREAS, County policies and procedures require both the assigned oversithe Finance Committee to approve all requests to apply for grants from Federal as well as grants from all other entities; and,	
WHEREAS, County policies and procedures require that the acceptance of granter must be approved by the full County Board;	rants of \$30,000 or
WHEREAS, the Department of SMART	wishes to apply
for and accept an a grant from Illinois Department of Transportation	
for the Section 5311 Grant program	m in the amount of
approximately \$132,109; and	
WHEREAS, this grant will allow SMART	to provide
rural public transportation	
the Section 5311 grant and the committee the County Board approve the acceptance of this grant, is sufficiently sufficient	request to apply for e recommends that if awarded by awarded by rd, in session this plance of the
The County Administrator is authorized to sign required grant document agreement for this grant.	ts to execute the
ATTEST:	
County Clerk Chairman, Sangamon C	County Board
Approved by the Finance Committee April 12th , 2021	

_____, Chairman

Sangamon County Clerk

APR 06 2021

03-2

SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: SMART			
Grant Program Title: 5311 Grant			
This request is for: a new grant 🗷	renewal or extension of an exi	isting grant	
Grantor: Illinois Department of Transp			
Brief description of the grant program a	nd its benefits to Sangamon Co	ounty:	
Providing rural public transportation f ADA (American with Disabilities) accurors, shopping. Currently rides incluvaccine sites.	essibility to services and goo	ds. Rides include, but are r	ot restricted to medical.
Anticipated Grant Revenue Amount::	\$132,109.00		
Are matching funds required?	Yes No		
If yes, please state the amount and the	source of matching funds:		
Matching funds come from the DOAP gra	nt for operating and administration	on, ICR, fares and possibility o	f contracted rides.
If this grant is approved, will any new per if Yes, please indicate the number and These are positions that were included with pandemic.	cost of personnel: h last year's budget and position		
Are there any <i>indirect</i> costs or <i>legal</i> requirements to continue specific progra	ms after grant periods, etc.):	grant (i.e., increased workload	on existing staff,
f Yes, please provide details. Include attachment if needed: There is the possibility of match should expenses exceed projected amount of all staff being hired and DOAP, 5311, fares and ICR funds being			
	Current FY	Current FY + 1	Current FY + 2
Number of Employees	10		
Personnel Costs (in dollars)	\$58,855.00		
ringe Benefit Cost	\$23,884.00		
Other Costs (Equipment, etc)	\$49,370.00		
otal Cost	\$132,109.00		
Requested by:	(Department Head Signature)		Date: