#13334 STATE HOUSING INITIATIVES PARTNERSHIP (SHIP) HOME REPAIR PROGRAM PROVIDER AGREEMENT BETWEEN ALACHUA COUNTY AND NEIGHBORHOOD HOUSING AND DEVELOPMENT CORPORATION

THIS AGREEMENT is by and between Alachua County, a charter county, and political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as "County", and Neighborhood Housing and Development Corporation, a not-for-profit corporation existing under the laws of the State of Florida, whose address is 633 NW 8th Avenue, Gainesville, Fl. 32601 hereinafter referred to as "Provider".

WITNESSETH

WHEREAS, the County has been awarded State Housing Initiatives Partnership (SHIP) Program funds for State Fiscal Year 2021-2022 according to §420.907 et seq., Florida Statutes, as amended (the "Act"), which provides for the implementation of projects designed to address the affordable housing needs of very low, low and moderate-income households; and,

WHEREAS, the County has adopted a Local Housing Assistance Plan (LHAP), for State Fiscal Years 2021-2024, in accordance Rule 67-37, Florida Administrative Code, which provides for the creation of a Home Repair Program; and

WHEREAS, said Act provides that the County may contract with sub-recipient organizations to administer and implement a project as outlined in said LHAPs; and,

WHEREAS it is in the interest of the County to enter into this agreement with the Provider to implement the project set forth herein for the benefit of low and very low-income residents of Alachua County;

- **NOW, THEREFORE**, in consideration of these mutual promises and covenants, the parties hereto agree as outlined in the following sections of this Agreement.
- **Section 1. TERM:** This Agreement shall commence on the date signed by the Chair of the Board of County Commissioners through May 31, 2023, unless earlier terminated, as provided herein. The Parties may mutually agree to extend the term of this Agreement for an additional one-year period.
- **Section 2. PROVIDER**: The Provider is Neighborhood Housing and Development Corporation., a not-for-profit corporation, existing under the laws of the State of Florida whose address is 633 NW 8th Avenue, Gainesville, FL 32601.
- Section 3. DOCUMENTS/ATTACHMENTS INCORPORATED: The following

documents are incorporated herein included and made a part hereof:

Attachment 1: Scope and Schedule of Services

Attachment 2: Project Budget

Attachment 3: SHIP Financial Report Attachment 4: Activity Status Report

Attachment 5: Program Summary and Guidelines

Attachment 6: Annual Report Household Data Summary

Attachment 7: File Checklist

Attachment 8: Insurance Requirements

Section 4. COORDINATION: The Provider agrees to carry out the specified project under the general coordination of the County's Department of Community Support Services. The Director of the Department of Community Support Services, or designee, is the County's representative.

Section 5. NOTICES: Except as otherwise provided in this Agreement any notice of default or termination from either party to the other party must be in writing and sent by certified mail, return receipt requested, or by personal delivery with receipt. All notices are deemed delivered two (2) business days after mailing unless delivery is by personal delivery in which case delivery is deemed to occur upon actual receipt by the other party. For purposes of all notices, the representatives for the County and Provider are:

County:

Alachua County Department of Community Support Services Stephen Weeks, Housing Program Manager SHIP Program 218 SE 24th St. Gainesville, FL 32641

Provider:

Corey Harris, Executive Director Neighborhood Housing and Development Corporation. 633 NW 8th Avenue Gainesville, FL 32601

A copy of any notice hereunder must also be sent to:

Clerk of the Circuit Court Attn: Finance and Accounting 12 SE 1st Street Gainesville, FL 32601 And to:

Purchasing Division Attn: Contracts 12 SE 1st Street Gainesville, FL 32601

Section 6. SCOPE AND SCHEDULE OF SERVICES: The Provider agrees to implement the project as described in ATTACHMENT 1, Scope and Schedule of Services, for the principal benefit of eligible very low-income and low-income persons, as defined in ATTACHMENT 5, Program Summary and Guidelines, residing in Alachua County outside the incorporated limits of the City of Gainesville at the time services are rendered.

Section 7. FUNDING AND PAYMENT PROCEDURES:

- 7.1 The County agrees to disburse grant funds to the Provider for the specified project during the period of this Agreement in the maximum amount of Two Hundred Thousand Dollars, (\$200,000.00), unless the maximum amount is increased by mutual written agreement of all Parties to this Agreement, executed with the same formalities as this Agreement. The Provider may only spend the funds distributed pursuant to this Agreement in strict accordance with the authorized distribution of funds, as detailed in ATTACHMENT 2, Project Budget. If the maximum amount of funds issued pursuant to this Agreement is increased, such additional funds must be spent by the Provider in strict accordance with the authorized distribution of funds, as detailed in an accompanying amendment to ATTACHMENT 2. Such expenditures must be made in the manner and for the purposes described in ATTACHMENT 2.
- 7.2 Only direct costs for the specified project as described in **ATTACHMENT 2** Project Budget are eligible for funding.

7.3 Budget Amendment:

- 7.3.1 The Provider may from time to time amend line items of **ATTACHMENT 2**, Project Budget, provided the total amount of such amendments does not exceed ten percent (10%) of the budget, total program delivery costs (soft costs) do not exceed ten percent (10%) of total project costs, and the total contract amount does not change. The Provider shall promptly notify the County of such amendments in writing as they occur.
- 7.3.2 Budget amendments not meeting the above guidelines, but not changing the total contract amount, may be made only upon prior written approval of the Alachua County Manager, or designee.
- 7.3.3 Budget amendments changing the total contract amount may only be made consistent with the requirements of Section 22 of this Agreement.

- 7.4 The County will make payments to the Provider following the procedures listed below:
 - 7.4.1 The County will reimburse the Provider monthly for each properly invoiced request under this Agreement based on actual expenditures that are properly documented as eligible costs. Payments will be contingent upon the submission of monthly expenditure reports, along with required source documentation, beginning with the first month of this Agreement. It is fully and expressly agreed that the County's determination as to the acceptability of the subject Financial Report, as well as all supporting documentation for same, shall be conclusive.
 - 7.4.2 Monthly expenditure reports must be received by the County within 20 calendar days of the close of the month for which payment is requested and must be submitted according to the format established in **ATTACHMENT 3**, SHIP Financial Report. The Financial Report form must contain a certification that these amounts have not been submitted to, or reimbursed by, the County under any other contract or by any other agency and must be signed by the Provider's Chief Executive Officer.
 - 7.4.3 Invoices, monthly SHIP Financial Reports, and accompanying support documentation must be sent to:

Alachua County Department of Community Support Services Stephen Weeks, Housing Director 218 SE 24 St Gainesville, FL 32641

The name and address of the official payee to whom the County makes payments under this agreement are:

Neighborhood Housing and Development Corporation 633 NW 8th Avenue Gainesville, FL 32601

7.4.4 The Provider must submit the final request for payment and SHIP Financial Report to the County by no later than June 15, 2023; the final payment request shall be denied if not received by the County on, or before, June 15, 2023. If the Provider fails to do so, all rights to payment are forfeited. The County may not honor any request submitted after June 15, 2023. Any payment due the Provider under the terms of this Agreement may be withheld until all reports due from the Provider, and necessary adjustment(s) thereto, have been approved by the County

7.4.5 Payments for all sums properly invoiced must be made under the provisions of Chapter 218, Part VII Florida Statutes ("Local Government Prompt Payment Act").

- 7.5 All costs must be incurred and all work must be completed by May 31, 2023. The final payment request must be submitted to the County by June 15, 2023, in accordance with paragraph 7.4.4, to be eligible for reimbursement. The County shall process and pay all complete and properly documented invoices that are received by the County by no later than June 15, 2023.
- 7.6 The County retains any unused or residual funds remaining at the termination of this Agreement.

Section 8. REPORTING

- 8.1 No later than the 20th day of the month following the end of each monthly period of this Agreement, the Provider shall furnish the County with a SHIP Activity Status Report. ATTACHMENT 4 The Activity Status Report must document the Provider's performance in implementing the project described in ATTACHMENT 1, Scope and Schedule of Services. The Activity Status Report must also accompany project beneficiary data as requested by the County. Failure to submit a timely Activity Status Report and accompanying information required in said Attachments may result in delay or forfeiture of payment under this Agreement.
- 8.2 The final Activity Status Report and accompanying ATTACHMENT 6, Annual Report Household Data Summary shall be submitted by the Provider to the County by no later than June 15, 2023.
- 8.3 The Provider shall document compliance with applicable local, state, and federal nondiscrimination and affirmative action regulations
- 8.4 The Provider shall submit to the County additional project and financial data, including beneficiary identifiable data, as may be requested by the County for inclusion in the County's SHIP Annual Report.

Section 9. AGREEMENT DURATION, EXTENSION, AND TERMINATION:

- 9.1 This Agreement shall be effective under Section 1. Term from the date executed by the Chair of the Board of County Commissioners, unless extended by written agreement or terminated sooner under this Section. The Board of County Commissioners may extend this Agreement for a term of one additional year. However, the grant disbursement is contingent upon obtaining all applicable permits and development orders from the appropriate regulatory agencies including, but not limited to, Alachua County
- 9.2 In the event the County determines based on a review of the Provider's performance that the requirements of this Agreement have not been met, the County may take one or more of the actions authorized in Paragraphs 9.4 and 9.5 of this Section. In each instance,

the action taken will be designed to, first, prevent a continuance of the deficiency (lack of progress, non-conformance, non-compliance, lack of continuing capacity); second, mitigate any adverse effects or consequences of the deficiency to the extent possible under the circumstances; and third, prevent a recurrence of the same or similar deficiencies.

- 9.3 If the County determines that the Provider has not met or satisfied the requirements of this Agreement, it may take one or more of the following actions, as appropriate to the circumstance:
 - 9.3.1 Request the Provider to submit additional information:
 - Concerning the administrative, planning, budgeting, management, and evaluation functions to determine any reasons for lack of progress,
 - Explaining any actions being taken to correct or remove the causes for delay,
 - Documenting those activities undertaken were in conformance with this Agreement or in compliance with applicable laws or regulations,
 - Demonstrating that the Provider has a continuing capacity to carry out the approved project promptly, or
 - As may be appropriate.
 - 9.3.2 Require the Provider to submit revised progress schedules for completing required activities.
 - 9.3.3 Issue a letter of warning that advises the Provider of the deficiency and puts the Provider on notice that further sanctions, including those listed in Sections 9.4 and 9.5 of this Agreement, will be taken if the deficiency is not corrected or is repeated.
- 9.4 If the County determines that the Provider has materially failed to comply with the requirements of this Agreement, the County may take one or more of the following actions, as appropriate to the circumstance:
 - 9.4.1 Require the Provider to suspend, discontinue, or not incur costs on current or future activity under the Agreement,
 - 9.4.2 Require the Provider to reimburse the County for any amount improperly expended,
 - 9.4.3 Temporarily withhold payments pending correction of the deficiency by the Provider or more severe enforcement action by the County,
 - 9.4.4 Disallow all or part of the cost of the activity or action not in compliance,

- 9.4.5 Terminate the Agreement under Sections 9.5 or 9.6,
- 9.4.6 Withhold further agreements with the Provider, or
- 9.4.7 Take other remedies that may be legally available.
- 9.5 If the County determines that it is necessary to suspend or terminate this Agreement, it may do so by giving prior written notice to the Provider of such suspension or termination and specifying the effective date thereof, at least 10 business days before the effective date of such suspension or termination. Upon such suspension or termination, the Provider shall be entitled to payment of such amount as reasonably determined by the County for work satisfactorily performed before the suspension or termination date; provided, however, that no allowance may be made for suspension or termination expenses.

If funds to finance this Agreement become unavailable, the County may terminate the Agreement with no less than 24 hours' written notice to the Provider. The County will be the final authority as to the availability of funds. The County will pay the Provider for all work completed before any notice of termination.

9.6 This Agreement may be terminated by any party, without cause, upon prior written notification to the other parties, specifying the termination date, which in no event shall be less than 60 calendar days from the date such notice is given, setting forth the reason(s) for such termination. In the event of such termination, the County shall pay Provider such amount as required to compensate for work satisfactorily performed before the termination date. The County will, in its sole discretion, determine the value of such amount, and all costs shall be subject to prior approval by the County. Termination under this paragraph may not give rise to any claim for causes of action against the County, its employees, agents, or officers, including, but not limited to, causes of action in contract or tort or for damages or compensation in addition to that provided hereunder.

Section 10. ACCOUNTABILITY:

10.1 The Provider agrees to maintain such property, personnel, financial, and other records and accounts as are necessary to properly account for all funds expended in the performance of this Agreement and to allow for the audit of SHIP funds by the County, State Department of Economic Opportunity, Florida Housing Finance Corporation (FHFC), State Comptroller, and/or their designees. Funds provided by the County for the SHIP Special Needs Housing Program must be accounted for in a separate fund with a set of accounts that are independent of other program accounts. The Provider shall comply with the applicable policies, guidelines, and requirements of Office of Management and

Budget (OMB) Circulars A-110 and A-122, incorporated by reference into this Agreement, as they relate to the receipt and use of SHIP funds.

10.2 All records and accounts related to this Agreement must be retained for, and be subject to, inspection, review, or audit by the County and State for 6 years following the date of submission of the County's Annual Report to the State in which the project under this Agreement is reported. Such review shall be during the regular working hours of the Provider following reasonable notice. Upon request, the Provider shall transfer copies of these records and accounts to the custody of the County to ensure their accountability for such a period.

10.3 Project Records:

- 10.3.1 Any document submitted to the County may be a public record and is open for inspection or copying, by any person or entity. "Public records" are defined as all documents, papers, letters, maps, books, tapes, photographs, films, sound recordings, data processing software, or other material, regardless of the physical form, characteristics, or means of transmission, made or received according to law or ordinance or in connection with the transaction of official business by any agency per Section 119:011(11), Florida Statutes. Any document is subject to inspection and copying unless exempt or confidential under Chapter 119, Florida Statutes, or as otherwise provided by law
- 10.3.2 Under Section 119.0701, Florida Statutes, the Provider, when acting on behalf of the County, as provided under 119.011(2), Florida Statutes, shall keep and maintain public records as required by law and retain them as provided by the General Record Schedule established by the Department of State. Upon request from the County's custodian of public records, provide the County with a copy of the requested records or allow the records to be inspected or copied within a reasonable time unless exempted under Chapter 119, Florida Statutes, or as otherwise provided by law. Additionally, the Provider shall provide the public records at a cost that does not exceed the cost provided by law.
- 10.3.3 Provider shall ensure that public records that are exempt or confidential from public records disclosure requirements are not disclosed except as authorized by law for the duration of this Agreement and following completion of this Agreement if the Professional does not transfer the records to the County.
- 10.3.4 During the term of this Agreement or license, the Provider may claim that some or all of Provider's information, including, but not limited to, software documentation, manuals, written methodologies and processes, pricing, discounts, or other considerations (hereafter collectively referred to as "Confidential Information"), is, or has been treated as confidential and proprietary by Provider per Section 812.081,

Florida Statutes, or other law, and is exempt from disclosure under the Public Record Act. Provider shall identify and mark Confidential Information as "Confidential Information" or "CI" and the County shall use its best efforts to maintain the confidentiality of the information properly identified by the Provider as "Confidential Information" or "CI."

10.3.5 The County shall promptly notify the Provider in writing of any request received by the County for disclosure of Provider's Confidential Information and the Provider may assert any exemption from disclosure available under applicable law or seek a protective order against disclosure from a court of competent jurisdiction. Provider shall protect, defend, indemnify, and hold the County, its officers, employees, and agents free and harmless from and against any claims or judgments arising out of a request for disclosure of Confidential Information. Provider shall investigate, handle, respond to, and defend, using counsel chosen by the County, at Provider's sole cost and expense, any such claim, even if any such claim is groundless, false, or fraudulent. Provider shall pay for all costs and expenses related to such claim, including, but not limited to, payment of attorney fees, court costs, and expert witness fees and expenses. Upon completion or termination of this Agreement, the provisions of this paragraph shall continue to survive. Provider releases County from claims or damages related to disclosure by County.

10.3.6 Project Completion: Upon completion, or termination, of this Agreement, the Provider, when acting on behalf of the County as provided under 119.011(2), Florida Statutes, shall transfer, at no cost, to the County all public records in possession of the Provider or keep and maintain public records required by the County to perform the service. If the Provider transfers all public records to the County upon completion or termination of the agreement, it must destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Provider keeps and maintains public records upon the completion or termination of this Agreement, the Provider shall continue to meet all applicable requirements for retaining public records. All records stored electronically shall be provided to the County, upon request from the County's custodian of public records, in a format that is compatible with the information technology systems of the County.

- 10.3.7 If the Provider does not comply with the County's request for records, the County shall enforce the contract provisions under this contract
- 10.3.8 A Provider who fails to provide the public records to the County within a reasonable time may be subject to penalties under s. 119.10, Florida Statutes.

IF THE PROVIDER OR CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE COUNTY HOUSING DIRECTOR AT E-MAIL housing@alachuacounty.us PHONE (352) 337-6240, OR U.S. MAIL AT 218 SE 24TH ST, GAINESVILLE, FL 32641

Section 11. AUDIT

- 11.1 The Provider agrees to have an annual audit of financial statements performed in accordance with the Government Auditing Standards developed by the Comptroller General of the United States. Such audit shall comply with current OMB Circular A-133, incorporated herein by reference. The audit shall be performed annually for the Provider's entire organization, shall cover the Provider's fiscal year, and shall include a specific review of the SHIP Program. It shall be performed by auditors who meet the independence standards specified in OMB Circular A-133.
- 11.2 The Provider shall ensure that audit work papers and reports are retained for a minimum of six (6) years from the date of the audit report unless the Provider is notified in writing by the County to extend the retention period. The Provider shall also ensure that audit work papers are made available upon request to the County or its designees.
- 11.3 Two (2) copies of the audit report shall be submitted to the County's Department of Community Support Services within 30 calendar days after the completion of the audit, but in no case should the audit be completed, and the report submitted later than 120 calendar days after the end of the Provider's fiscal year. If a management letter or any other reports or correspondence relating to audit findings or recommendations are issued in connection with the audit, copies of such letters or reports must accompany the audit report.
- **Section 12. EMPLOYMENT OF RELATIVES:** The Provider agrees to regulate the employment of persons related to its officials or employees. No person may be employed by Provider when he or she is related to a person where one should be in a supervisory or administrative capacity over the other. The term "related" means brothers, sisters, children, husbands, and wives. The term "employed" means to hire the person to carry out specific job responsibilities.
- **Section 13. CONFLICT OF INTEREST:** No person who is an employee, agent, consultant, officer, or elected official or appointed official of the County or the Provider who exercises or has exercised any functions or responsibilities with respect to activities assisted with SHIP funds or who is in a position to participate in a decision-making process or gain inside information concerning these activities, may obtain a financial interest or benefit from a SHIP-assisted activity,

or have a financial interest in any contract, subcontract or agreement with respect thereto, or the proceeds thereunder, either for themselves or those with whom they have family or business ties, as defined in Chapter 112, Part III, Florida Statutes, during their tenure or for one year thereafter.

Section 14. LOBBYING:

- 14.1 The Provider may not use funds under this Agreement to directly or indirectly support, defeat or influence:
 - 14.1.1 The outcome of any Federal, State, or local election, referendum, initiative, or similar procedure, or
 - 14.1.2 The introduction, enactment, or modification of any pending Federal, State, or local legislation.

14.2 The Provider also certifies that:

- 14.2.1 No State appropriated funds have been paid or will be paid, by or on behalf of the Provider, to any person for influencing or attempting to influence an officer or employee of the Florida State Legislature or an employee of a Member of the Legislature in connection with the awarding of any state or local contract, the making of any state or local grant, the making of any state loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any state contract, grant, loan, or cooperative agreement.
- 14.2.2 If any funds other than State appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of the Florida State Legislature, an officer or employee of the Legislature, or an employee of a Member of Legislature in connection with this Agreement, the Provider shall complete and submit to the County Standard Form-LLL, "Disclosure Form to Report Lobbying," following its instructions.
- Section 15. INDEPENDENT CONTRACTOR: In the performance of this Agreement, the Provider will be acting in the capacity of an independent contractor and not as an agent, employee, partner, joint venture, or associate of the County. The Provider shall be solely responsible for the means, method, techniques, sequences, and procedures utilized by the Provider in the full performance of the Agreement. Neither the Provider nor any of its employees, officers, agents, or any other individual directed to act on behalf of the Provider for any act related to this Agreement shall represent, act, and purport to act or be deemed to be the agent, representative, employee, or servant of the County.

Section 16. INDEMNIFICATION:

- The Provider shall be required to indemnify, protect, defend, and hold the County 16.1 and its respective officers, employees, and agents free and harmless from and against all losses, penalties, damages, settlements, costs, charges, professional fees, or other expenses or liabilities of every kind and character arising out of or directly or indirectly relating to all claims, liens, demands, obligations, or actions, proceedings or causes of action of every kind and character in connection with or arising directly or indirectly out of this Agreement and/or the performance hereof. Without limiting the generality of the foregoing, all such claims, etc., including but not limited to personal injury, death, damage to property (including destruction), defects in materials or workmanship, or any actual or alleged violation of any applicable statute, ordinance, administrative order, rule or regulation or decree of any court, shall be included in the indemnity hereunder. The Provider further agrees to investigate, handle, respond to, provide a defense (including payment of attorney fees up to and including any appeal) for and defend any such claim at its sole cost and expense and agrees to bear all other costs and expenses related thereto, even if they (claims, etc.) are groundless, false, or fraudulent. The Provider agrees that its indemnification of the County shall extend to all work performed by the Provider, its subcontractors, employees, agents, servants, or assigns.
- 16.2 This obligation shall in no way be limited in any nature whatsoever by any limitation on the amount or type of Provider's insurance coverage. The indemnification provisions in Section 16 of this Agreement shall survive the expiration or termination of the Agreement between the County and the Provider.
- 16.3 In all claims against the County or any of its respective agents or employees by any employee of the Provider, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation under this Section 16 shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefits payable by or for the Provider or any subcontractor under worker's compensation acts, disability benefit acts or employee benefit acts.
- 16.4 The parties agree that nothing in this Agreement shall be interpreted as a waiver of the County's sovereign immunity under Section 768.28, Florida Statutes.

Section 17. INSURANCE:

17.1 Public Liability Insurance. Before commencing services under this Agreement and without limiting its liability under this Agreement, the Provider shall maintain insurance coverage of the types and in the amounts identified in **ATTACHMENT 8**, Insurance Required. A copy of current Certificate of Insurance showing coverage in the amounts and types required is attached hereto to **ATTACHMENT 8**.

17.2 Fidelity Insurance. In addition, Provider shall procure and maintain fidelity insurance covering all officers, employees, and agents of the Provider authorized to handle funds received or disbursed under this Agreement in an amount equal to the funding provided through this Agreement.

Section 18. COMPLIANCE WITH FEDERAL, STATE, AND LOCAL RULES, REGULATIONS, AND LAWS:

- 18.1 The Provider shall comply with all applicable laws, orders, and regulations of the Federal, State, and local governments as they pertain to this Agreement. These include but are not limited to provisions of Section 420.907 .9079, Florida Statutes, Rule Chapter 67-37, Florida Administrative Code, the County's Local Housing Assistance Plans, respectively, the Alachua County Housing Initiatives Partnership Ordinance 93-11, as well as other applicable State and Federal laws and regulations.
- 18.2 Nothing in this grant agreement entitles or vests the Provider with any right or entitlement to any building, zoning, development order, or land development code approvals without separate application and review by Alachua County. Any required development orders or other permits must be applied for and received by the Provider before the disbursement of grant funds.
- **Section 19. SHIP FUNDING RECOGNITION:** The Provider shall include in all advertisements, newsletters, and/or promotions that refer specifically to the project assisted hereunder, a statement that the project is funded in whole or in part by Alachua County State Housing Initiatives Partnership Program.
- **Section 20. FINANCIAL OBLIGATION OF THE COUNTY:** This Agreement is not a general obligation of the County, nor does it constitute a pledge of the full faith and credit of the County but shall be a commitment only as to the County's State Housing Initiatives Partnership funds for State Fiscal Year 2021-2022. In the event there are insufficient monies available in the Housing Assistance Trust Fund to meet the commitments of the County created by this Agreement, the County will have no further commitments under this Agreement and shall not be considered in breach thereof.
- **Section 21. ASSIGNMENT BY PROVIDER:** The Provider shall not assign, transfer, convey, pledge, or otherwise dispose of this Agreement or any interest in this Agreement without the prior written consent of the County.
- **Section 22.** CHANGES/AMENDMENTS: The County or Provider may, from time to time, request changes in the scope and schedule of services to be performed hereunder. Changes in line-item budgeted amounts are permissible as provided in Section 7.3 of this Agreement and an extension of the Agreement is permissible as provided in Section 9.1 of this Agreement.

However, any increase or decrease in the total amount of funding or any other change or amendment must be negotiated by the County and Provider, and if mutually agreeable, must be incorporated as written amendments to this Agreement and must be executed with the same formalities as this Agreement.

- **Section 23.** LAW AND VENUE: This Agreement must be governed in accordance with the laws of the State of Florida. Venue is in Alachua County.
- Section 24. NO THIRD-PARTY BENEFICIARIES: Nothing contained herein shall create any relationship, contractual or otherwise, with, or any rights in favor of, any third party.
- **Section 25. SEVERABILITY:** Paragraph 16 is an essential and indivisible provision of this Agreement and must be interpreted to provide the broadest protection to the County. If paragraph 16 is declared to be void by a court of law, then the entire Agreement is void. If any other provisions of this Agreement are declared void by court of law, all other provisions will remain in full force and effect.
- **Section 26. NON-DISCRIMINATION:** By full execution of this Agreement, Provider hereby agrees to abide by and conduct its programs and provide its services in compliance with the provisions of the Civil Rights Act of 1866, Civil Rights Act of 1871, Equal Pay Act of 1963, Civil Rights Act of 1964, Age Discrimination and Employment Acts of 1967, Rehabilitation Act of 1973, 1990 Americans with Disabilities Act, 1991 Federal Civil Rights Act, 1992 Florida Civil Rights Act, and all other applicable ordinances, statutes, laws, and amendments thereto.
- **Section 27. ENTIRE AGREEMENT:** This Agreement constitutes the entire agreement between the parties hereto pertaining to the Scope of Services and all other Attachments hereunder. All negotiations and oral agreements are included herein.

IN WITNESS WHEREOF, the parties have hereto set their hands and seals on the day and year below written.

ALACHUA COUNTY, FLORIDA

	By:	Marikelen Wheeler
		Marihelen Wheeler
		Chair, Board of County Commission
ATTEST:		APPROVED AS TO FORM
Allesi:		
Jun Jos		Dana Johnson
J. K. "Jess" Irby, Esq., Clerk		Alachua County Attorney
(SEAL)		

Neighborhood Housing and Development Corporation. 633 NW 8th Avenue, Gainesville, Fl. 32601

Corey Harris, Executive Director

Corporate Secretary

ATTEST:

(SEAL)

ATTACHMENT 1

SCOPE AND SCHEDULE OF SERVICES

Project outcome and estimated number of households to be served will be adjusted based on the award amount of \$200,000.00.

Name of Agency/Organization Street Address 633 NW 8th Avenue Mailing Address (if different) City, Zipcode Main Telephone Number Facsimile Number Facsimile Number Federal ID Number Seare as above Corporation (352) 380-9119 Facsimile Number Federal ID Number Telephone Corey Harris Telephone Corey Harris Telephone Chief Financial Officer Cheryl Beardsley Telephone Corey Harris Cheryl Beardsley Chief Financial Officer Telephone Cheryl Beardsley Telephone Corey Harris Cheryl Beardsley Chief Financial Officer Telephone Corey Harris Charris@gnhdc.org Chief Financial Officer Cheryl Beardsley Telephone Corey Harris Charris@gnhdc.org Chief Financial Officer Cheryl Beardsley Cheardsley@gnhdc.org Froject Contact Name Janice Crews Street Address Gainesville, FL 32601 Telephone (352) 380-9119 E-mail Address jcrews@gnhdc.org Beartiched Sea attached Sea attached Sea dittional pages as needed. SHIP funds requested: S200,000	,000.00.		
Mailing Address (if different) City, Zipcode Gainesville, FL 32601 Main Telephone Number (352) 380-9119 Facsimile Number (352) 380-9170 Federal ID Number 59-2203965 DUNS Number 17-181-9212 Executive Director (name) Corey Harris Telephone (352) 380-9119 E-mail Address charris@gnhdc.org Chief Financial Officer Cheryl Beardsley Telephone (352) 380-9119 E-mail Address cheardsley@gnhdc.org Project Contact Name Street Address 633 NW 8th Avenue City and Zip Code Gainesville, FL 32601 Telephone (352) 380-9119 E-mail Address See attached See attached			
City, Zipcode Main Telephone Number (352) 380-9119 Facsimile Number (352) 380-9170 Federal ID Number 59-2203965 DUNS Number 17-181-9212 Executive Director (name) Corey Harris Telephone (352) 380-9119 E-mail Address charris@gnhdc.org Chief Financial Officer Cheryl Beardsley Telephone (352) 380-9119 E-mail Address cheardsley@gnhdc.org Project Contact Name Street Address City and Zip Code Telephone (352) 380-9119 E-mail Address Street Address Gainesville, FL 32601 Telephone (352) 380-9119 E-mail Address See attached	ress 633 NV	V 8th Avenue	
Main Telephone Number Facsimile Number (352) 380-9170 Federal ID Number 59-2203965 DUNS Number 17-181-9212 Executive Director (name) Corey Harris Telephone (352) 380-9119 E-mail Address charris@gnhdc.org Chief Financial Officer Telephone (352) 380-9119 E-mail Address charris@gnhdc.org Cheryl Beardsley Telephone (352) 380-9119 E-mail Address cheardsley@gnhdc.org Project Contact Name Street Address 633 NW 8th Avenue City and Zip Code Gainesville, FL 32601 Telephone (352) 380-9119 E-mail Address Describe the proposed project, use additional pages as needed.	ldress (if different) Same ε	ns above	
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Telephone (352) 380-9119 E-mail Address cbeardsley@gnhdc.org Project Contact Name Janice Crews Street Address 633 NW 8th Avenue City and Zip Code Gainesville, FL 32601 Telephone (352) 380-9119 E-mail Address icrews@gnhdc.org Describe the proposed project, use additional pages as needed. See attached	dress <u>charris</u>	s@gnhdc.org	
E-mail Address City and Zip Code Telephone E-mail Address City and Zip Code City and	ncial Officer Cheryl	Beardsley	
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Telephone (352) 380-9119 E-mail Address <u>jcrews@gnhdc.org</u> Describe the proposed project, use additional pages as needed. See attached	ip Code Gaines	ville, FL 32601	
Describe the proposed project, use additional pages as needed.	(352) 3	80-9119	
additional pages as needed.	dress jcrews	@gnhdc.org	
		ached	
,		00	
Leveraged Funds: \$69.500	Funds: \$69.500	0	
Estimated number of Household to be served	number of Household to be served		
Very Low Income 12	Income 12		
Low Income			
Total 12	12		
The time period of Proposed Project	eriod of Proposed Project		
From: 2/1/2022	2/1/202	2	
To: 5/31/2023	5/31/20	23	

Description of Project¹:

Below is the data submitted with the application the figure has changed to reflect the funds that will be disbursed under this project.

State Housing Initiatives Partnership Program (SHIP) Application for Funding SY 2021-2022 Description of Project4: NHDC is proposing to provide home repair services for 12 very low income (<50% AMI) residents residing in Alachua County. The funding will be used to mitigate those very serious housing conditions that adversely affect the health, safety and well-being of the homeowners. NHDC will work with Alachua County Growth Management and other partners to select clients. NHDC is fully aware of the 20% requirement to serve persons with special needs. The organization will reach out to Meridian Behavioral Healthcare, Center for Independent Living & ARC to identify potential recipients. Once clients have been identified, NHDC will request a listing of documents to ensure eligibility which includes proof of income and owners documents. Once eligibility is verified, the Real Estate Development Director will assess the home and prioritize the most critical repairs. NHDC will complete a work write up and review with the client proposed repairs. Then NHDC will bid out the work and award the contract. Upon project completion, the property is inspected by the county. Then NHDC will bill the county once all checks have cleared. Each recipient will have access to up to \$25,000 to complete repairs. If NHDC determines \$25,000 isn't enough to repair and secure the home, NHDC will work with the county to determine if the homeowner is eligible for another program or request additional funding to assist the client. In the event the repair cost is less than the \$25,000, NHDC will pool the surplus funds to serve additional homeowners. Although NHDC estimates the cost to operate the program is \$49,500 or 15%, the organization is requesting a 10% developer's fee or \$30,000 which is the maximum set for the program; NHDC will use unrestricted NeighborWorks money to offset the additional administrative expense to operate the program. The remaining 90% or \$300,000 will be used for direct program cost. NHDC proposes to focus on the following areas and systems: roofing, plumbing, electrical, HVAC and alleviate accessibility constraints but request the liberty to move beyond this scope as the agency deems appropriate. Check if continued on additional page(s) ⁴ Describe all activities to be undertaken and the projected cost, without regard to the funding source or whether such funding will be counted for leverage Check if continued on additional page(s)

¹ Describe all activities to be undertaken and the projected cost, without regard to the funding source or whether such funding will be counted for leverage

TAB 2

Time Schedule:

Projected time for completing vital activities needed to complete the proposed project including but not limited to client selection including income verification and income certification; Home inspections & Work write-ups; Bidding & awarding contracts; Unit construction start; Submittal for the request for payment; Number of unit completion, etc.

State Housing Initiatives Partnership Program (SHIP)
Application for Funding SY 2021-2022
TAB II
Time Schedule:
Projected time for completing vital activities needed to complete the proposed project including but not limited to client selection including income verification and income certification; Home inspections & Work write-ups; Bidding & awarding contracts; Unit construction start; Submittal for the payment request; Number of unit completion, etc.
NHDC will work with the County to secure client applications and work on client income certification within the first 30 days of contract execution. It is imperative for the County to provide clients information in a timely fashion to ensure the success of this program.
The home will be inspected and work write-ups will be completed within 45 days of the client selections process.
The work write-up is sent to the County for review within a week of the inspection.
Once the work write-up is approved by the County, NHDC will complete a walkthrough with potential contractors and give contractors 2 weeks to bid.
The bid will be reviewed and qualified with County assistance within 7 days.
NHDC signs contract with contractor and the contractor typically has 90 days to complete the work.
Once the job is complete, NHDC and the County will complete a walkthrough. The client will approve the repairs and sign documents.
□ Check if continued on additional page(s)

ATTACHMENT 2

PROJECT BUDGET

EXPENDITURES BY CATEGORY HOME REPAIRX SPECIAL NEEDS _ X BOTH	CURRENT YEAR BUDGET PROPOSAL
PROGRAM COSTS:	
1. Construction costs: Material and labor used in the performance of eligible repair activities on assisted eligible units; construction soft costs such as engineering costs and construction, rehabilitation, repair, and relocation costs associated with the rehabilitation of the residence usually occupied by a homeowner.	\$180,000.00
2. Developer Fee (10% MAX.) ² A. Amount of developer fee to be charged per home repaired.	Avg. \$2,500 per home or 10%
B. Number of homes to be repaired.	8
C. Total Development Fee (Multiple Developer fee by the number of homes to be repaired and enter total amount).	\$20,000.00
TOTAL PROGRAM BUDGET: [Sum of Construction costs and Developer fees; (Line 1+ Line 2C)]	\$200,000.00
TOTAL	\$200,000.00

² DEVELOPER FEE is a lump sum amount, a Sub recipient may claim on completing eligible program activities on an eligible property of an eligible recipient. Developer fee shall cover costs of Inspection, Income Certification, Title search, Recording fees, Homeowner's insurance if any etc. Developer fee will be paid based on per unit completion, and the amount must be counted toward the maximum SHIP award amount per client. A completed unit is one for which all repair, rehabilitation and replacement works have been fully completed per contract and an approved Final Certificate of Completion or a Certificate of Occupancy has been issued by the Building Official and submitted along with the final request for payment.

ATTACHMENT 3

ALACHUA COUNTY SHIP PROVIDERS FINANCIAL REPORT

3. Reporting Period:				
C. Program Revenues:	Approved Budget	Current Period	Cumulative To- Date	Available Balance
Alachua County/SHIP Funds				\$ -
Provider/Matching Contribution				\$ -
Total Cash Received	\$ -	\$ -	\$ -	s -
). Program Expenditures:	Approved Budget	Current Period	Cumulative To-	Available Balance
Program Costs	Dunger			0
Pogram Costs Developer Fee (not to exceed 1,500.00 paid per unit completed)				0
Project Delivery Cost (PDC)				0
Total Expenditures				
Total Expenditures		\$ -	\$	
E. SHIP cash balance at end of this SHIP funds now requested: \$	reporting period: EST OF MY KNO NTS REPORTED ORIDA STATUTES EVE BEEN SUBMI	S WLEDGE, THE HEREIN HAVE, AND THAT NO	E DATA REPOR' E BEEN SPENT ONE OF THESE P REIMBURSED E	FOR A PUBLIC AYMENTS, NOR BY ANY OTHER

ATTACHMENT 4 ACTIVITY STATUS REPORT

SHIP ACTIVITY STATUS	Reporting Period: PART II	Page of
PROVIDER ORGANIZATION:	NHDC	
REPORT AS A	APPROPRIATE - Activity Status	s/Accomplishment

ATTACHMENT 5

ALACHUA COUNTY SHIP PROGRAM HOME REPAIR GUIDELINES

I. PROJECT AREA and PURPOSE:

The SHIP Home Repair Program is available to provide emergency repairs/rehabilitation of substandard housing, housing rehabilitation, and demolition/reconstruction of eligible existing homes to eligible low and very low-income homeowners residing in Alachua County outside the incorporated limits of the City of Gainesville. Funding will be made available through eligible Providers who will be awarded funds on a competitive basis to implement the Program. An eligible Provider is a private or public for-profit or not-for-profit entity that applies for an award under the Program to provide eligible housing for eligible persons, as defined in these guidelines and the applicable rules and regulations of the Florida Housing Finance Corporation (FHFC). Preference will be given to eligible Providers that provide employment opportunities to clients of the State Work Development Initiative (WDI) and the Welfare Transition Program. This Program shall be operated per all applicable rules and regulations of the County, the State of Florida, and Florida Housing Finance Corporation.

II. FUNDING:

The Alachua County SHIP Program provides funding through eligible providers for these projects to eligible recipients. In the case of home repairs/rehabilitations, funding shall be provided in the form of a zero-interest, fifteen (15) year, forgivable, deferred payment loan. Each year the owner resides in the assisted unit, the loan principal shall be reduced by 10%. At the end of the ten-year term, the agreement shall expire of its own accord. Providers will be required to execute a contract with Alachua County before receiving any approved funds and provide the County with a certificate of insurance in a form acceptable to the County.

The funding sources shall be the Alachua County SHIP State Fiscal Year 2021-2022.

Funds from the Home Repair Program may <u>not</u> be used in conjunction with funds from the Down Payment Assistance Program.

III. ELIGIBLE PROGRAM ACTIVITIES:

Eligible activities include: Emergency Repair/Rehabilitation of substandard housing Housing Rehabilitation

ELIGIBLE PROGRAM RECIPIENTS:

An eligible recipient must meet the following eligibility criteria to participate:

1. Must own and occupy (either before repairs in the case of rehabilitation or after if the funds are being used to construct a replacement home) the home in which he/she resides as a principal residence.

- 2. In no case shall any household served to have an annual gross income that exceeds eighty percent (80%) of the median income for the area for his/her household size.
- 3. Must reside in Alachua County outside the City limits of Gainesville.
- 4. No assistance will be provided to any property owner who is in arrears in local property taxes.
- 5. Recipient applicants must be willing to execute all necessary documents on a timely basis.
- 6. Recipient selection will be on a first-come, first-served basis unless otherwise specified by the Provider in its application.
- 7. No recipient who has received home repairs under the Home Repair Program shall be eligible to re-apply for assistance for five (5) years from the date the repairs have been completed.
- 8. A minimum of twenty percent (20%) of the funding will be utilized to serve persons with special needs as defined in 420.0004 Florida Statutes. Additionally, the priority is to serve homeowners with developmental disabilities by providing home modifications, including technological enhancements and devices which will allow homeowners to remain independent in their homes.

IV. ELIGIBLE PROPERTY:

- Any existing owner-occupied unit, located within Alachua County outside the incorporated limits of the City of Gainesville is eligible for assistance.

 Manufactured buildings meeting the requirements of Florida Statutes 553 are eligible. Mobile homes that are two years old or less are eligible for assistance.
- The maximum property value for existing single-family properties after rehabilitation or construction shall not exceed the value allowed by Alachua County SHIP, currently \$250,000 for both replacement and existing homes.
- No rental properties may be repaired /rehabilitated or purchased under this program.
- Each unit must meet and may exceed the minimum housing code except for emergency repairs.

VI. PROPERTY STANDARDS

The property must meet and may exceed the minimum housing code requirements following the repairs, except where the Applicant is applying for Emergency Repair funding. To be designated as an Emergency Repair Project, the unit must be the dwelling of a household receiving less than 50% of the Area Median Income, adjusted for family size; OR be the dwelling of a disabled person as defined by the Social Security Act, AND be in a severely distressed state such as a dwelling where continued habitation would put the owner at serious physical risk.

VII. FORM OF OWNERSHIP

Ownership types include the following:

- o Fee simple title in a single-family attached or detached unit; **OR**
- Ownership of share(s) in a cooperative corporation with a proprietary lease in a residential cooperative unit; OR
- Life estate for the life of the recipient in a single-family attached or detached unit;
 OR
- Real estate/Construction Contract showing the purchase price and method of financing.

VIII. ELIGIBLE COSTS

Eligible Program Costs include the following:

<u>Construction Costs</u>: Material and labor used in the performance of eligible construction, rehabilitation, or repairs on assisted eligible units; other professional costs related to construction, rehabilitation, or repair of assisted eligible units.

Developer Fee

Developer Fee is a lump sum amount a Provider may claim on completing eligible program activities on an eligible property of an eligible recipient. The developer fee shall cover all costs of completing each unit for activities such as Inspection, Income Certification, Title search, Recording fees, Home owner's insurance if any, etc. The developer fee will be paid based on per unit completion, and the amount must be counted toward the maximum SHIP award amount per client. A completed unit is one for which all repair, rehabilitation, and replacement works have been fully completed per contract and an approved Final Inspection or a Certificate of Completion has been issued and submitted with the final request for payment.

IX. DISBURSEMENT OF FUNDS

Funds shall be disbursed by Alachua County directly to program Providers either on a **Reimbursement basis** or disbursed directly by Alachua County through the **Purchase Order (PO) process** upon receipt of appropriate documentation of eligible expenditures and client eligibility information as listed below.

By Reimbursement process: The County requires documentation of all expenditures for which reimbursement is requested. Construction/repair costs must be substantiated by invoices, copies of paid, canceled checks (copies front and back), or other forms of backup as approved by the County Finance and Accounting Department. Developer fees must be documented by the receipt of a Final Inspection or Certificate of Occupancy.

By Purchase Order process: Individual Purchase Order will be issued to qualified contractors by the County Purchasing per County's competitive bidding process for each repair, rehabilitation, or replacement housing job. The property owner shall execute a

construction contract with the contractor to complete the job within a certain time frame. The Provider will submit a request for reimbursement certifying percentage of job completion and by paragraphs (A) (B) and (C) below through the County SHIP office with evidence of job completion, along with backup documents for eligible expenditures per the Provider agreement and Program guidelines. A check will be issued by F&A directly to the contractor.

<u>Final payment</u>: The final payment approval requires acceptance of all work by the Owner, approved Final Certificate of Completion/ Certificate of Occupancy from the Building Official, submission of all manufactures' and other warranties to the owner, contractor's warranty covering the entire job for one year, waiver of liens from all subcontractors, from all parties who were not paid when the contractor received partial payments, an affidavit from the contractor stating that all bills have been paid and there are no claims for subcontracted jobs or materials or any outstanding Notice to Owner.

<u>Documentation of eligible expenditures and client eligibility includes but is not limited to the following:</u>

- Completed SHIP Home Repair Program Household Application (To be included in the first request for reimbursement on a recipient's unit).
- o Income Certification with verification of all income and assets (*To be submitted as soon as the certification is executed and before expending any SHIP funds for an applicant*).
- o SHIP Commitment Letter.
- o Proof of Ownership of eligible property located within Alachua County outside the incorporated limits of the City of Gainesville.
- o Inspection report.
- Copy of property appraisal or other evidence of the current market value of the eligible property. (For the final request for reimbursement on a recipient's unit).
- o Executed SHIP Mortgage.
- o SHIP Promissory Note.
- File Checklist **ATTACHMENT** 7: Annual Report Household Data Summary (For the final request for reimbursement on a recipient's unit).
- X. MAXIMUM AWARD: \$50,000 per household, including developer fee.

ATTACHMENT 6 ANNUAL REPORT HOUSEHOLD DATA SUMMARY

Name of Client: Click or tap here to enter text.
Street address: Click or tap here to enter text.
City name: Click or tap here to enter text. Zip Code: Click or tap here to enter text.
Yes: □ No □ Unincorporated area
Age of head of household: Click or tap here to enter text. Number of persons in household: Click or tap here to enter
text.
Race (White, Black, Hispanic, Asian, American Indian, Other):Click or tap here to enter text.
Special Needs (Farm Worker, Developmentally Disabled, Homeless, Elderly, Other-explain)Click or tap here to
enter text.
Type of repair assistance (Minimum Housing Code Repairs or Emergency Repairs) Attach Work Write-up
Total gross household income: Click or tap here to enter text.
VERY LOW INCOME: □ OR LOW INCOME: □
Total amount of funds expended (sum of draws): Click or tap here to enter text.
Date of client award (or commitment) letter: Click or tap here to enter text.
Expenditure date (date funds are fully expended and unit is occupied.)
SHIP loan amount: Click or tap here to enter text.
Amount of other public funds in unit/project: Click or tap here to enter text.
Amount of private funds in unit/project: Click or tap here to enter text.
Owner contribution: Click or tap here to enter text.
Sales price or value: Click or tap here to enter text.

ATTACHMENT 7 FILE CHECKLIST

Required Documents for S.H.I.P. Home

Repair Program File Eligibility

Documents

1.	SHIP Program Application:
2.	Income verification documents on file in Housing office: \Box
3.	Asset verification documents on file in Housing office: □
4.	SHIP Program Income Certification on file Housing office: □
5.	Mortgage Agreement and Promissory Note prepare for signature by Housing office: \Box
6.	Proof of ownership: \square
7.	Property Value Determination: □
8.	Insurance: □
The fo	llowing documents are provided by the Alachua County Housing Program
9.	Commitment Letter to client for SHIP funds: □
10.	Signed lien / Mortgage Agreement: □
11.	All relevant correspondence: \square
12.	Work Write-Up & Cost Estimate: □
13.	Contractor bids: □
14.	Construction contract: □
15.	Contractor Payment Requests: □
16.	Inspection Reports:
17.	Release of liens: □
18.	Contractor warranties/notice: □
	Final Inspection:
20.	Documentation of Interim/ Final Payments: □

ATTACHMENT 8 INSURANCE REQUIREMENTS TYPE "A" INSURANCE REQUIREMENTS "ARTISAN CONTRACTORS / SERVICE CONTACTS"

The Contractor shall procure and maintain for the duration of this contract insurance against claims for injuries to persons or damages to property, which may arise from or in connection with the performance of the work hereunder by the contractor/vendor, his agents, representatives, employees or subcontractors.

COMMERCIAL GENERAL LIABILITY

Coverage must be afforded under a per occurrence form policy for limits not less than \$1,000,000 General Aggregate, \$1,000,000 Products / Completed Operations Aggregate, \$1,000,000 Personal and Advertising Injury Liability, \$1,000,000 each Occurrence, \$50,000 Fire Damage Liability and \$5,000 Medical Expense.

AUTOMOBILE LIABILITY

Coverage must be afforded including coverage for all Owned vehicles, Hired, and Non-Owned vehicles for Bodily Injury and Property Damage of not less than \$1,000,000 combined single limit each accident.

WORKERS COMPENSATION AND EMPLOYER'S LIABILITY

Coverage to apply for all employees at STATUTORY Limits in compliance with applicable state and federal laws; if any operations are to be undertaken on or about navigable waters, coverage must be included for the USA Longshoremen & Harbor Workers Act.

Employer's Liability limits for not less than \$100,000 each accident; \$500,000 disease policy limit and \$100,000 disease each employee must be included.

BUILDER'S RISK / INSTALLATION FLOATERS (when applicable)

When this contract or agreement includes the construction of and/or the addition to a permanent structure or building; including the installation of machinery and/or equipment, the following insurance coverage must be afforded:

Coverage Form: Completed Value, All Risk in an amount equal to 100% of the value upon completion or value of the equipment to be installed.

When applicable: Waiver of Occupancy Clause or Cessation of Insurance clause. Flood Insurance is available under the

National Flood Insurance Program.

EMPLOYEE FIDELITY COVERAGE (only applicable to vendors whose employees handle funds) Employee Dishonesty coverage must be afforded for not less than \$500,000 Blanket all employees ISO Form

OTHER INSURANCE PROVISIONS

The policies are to contain, or be endorsed to contain, the following provisions:

- I Commercial General Liability and Automobile Liability Coverages
- a. The Alachua County Board of County Commissioners, its officials, employees, and volunteers are to be covered as an Additional Insured as respects: Liability arising out of activities performed by or on behalf of the Contractor/Vendor; to include Products and/or Completed Operations of the Contractor/Vendor; Automobiles owned, leased, hired or borrowed by the Contractor.
- b. The Contractor's insurance coverage shall be considered primary insurance as respects the County, its officials, employees, and volunteers. Any insurance or self-insurance maintained by the County, its officials, employees, or volunteers shall be excess of Contractor/Vendor's insurance and shall be non-contributory.

II All Coverages

The Contractor/Vendor shall provide a Certificate of Insurance to the County with a notice of cancellation. The certificate shall indicate if the cover is provided under a "claims made" or "per occurrence" form. If any cover is provided under claims made from the certificate will show a retroactive date, which should be the same date of the contract (original if contact is renewed) or prior.

SUBCONTRACTORS

The Contractor/Vendor shall be responsible for all subcontractors working on their behalf as a condition of this agreement. All subcontractors of the Contractor/Vendor shall be subject to the same coverage requirements stated herein.

CERTIFICATE HOLDER: Alachua County Board of County Commissioners

MAIL, EMAIL or FAX CERTIFICATES Risk Management 12 SE 1st Street, 3rd Floor Gainesville, FL 32601 dryon@alachuacounty.us Phone: 352-374-5297

Fax: 352-381-0168 Attn: Darlene Ryon Item #19, 22-0215

Final Audit Report 2022-06-02

Created: 2022-06-02

By: Steve Donahey (asd@alachuaclerk.org)

Status: Signed

Transaction ID: CBJCHBCAABAAN-ps7xqPGVKDKyVbvsDQtHwQaddyfqu4

"Item #19, 22-0215" History

- Document digitally presigned by DocuSign\, Inc. (enterprisesupport@docusign.com) 2022-05-10 5:49:05 PM GMT- IP address: 216.194.144.254
- Document created by Steve Donahey (asd@alachuaclerk.org) 2022-06-02 4:26:50 PM GMT- IP address: 216.194.144.254
- Document emailed to Marihelen Haddock Wheeler (boccchairsignature@alachuacounty.us) for signature 2022-06-02 4:27:27 PM GMT
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- Document e-signed by Marihelen Haddock Wheeler (boccchairsignature@alachuacounty.us)

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- Document emailed to J.K. "Jess" Irby, Esq. (jki@alachuaclerk.org) for signature 2022-06-02 5:57:51 PM GMT
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- Document e-signed by J.K. "Jess" Irby, Esq. (jki@alachuaclerk.org)

 Signature Date: 2022-06-02 6:21:07 PM GMT Time Source: server- IP address: 216.194.144.254
- Agreement completed. 2022-06-02 6:21:07 PM GMT