

PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

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Meeting Date: October 7, 2008 [X] Consent [ ] Regular
[ ] Workshop [ ] Public Hearing

Department

Submitted By: Community Services

Submitted For: Community Action Program

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I. EXECUTIVE BRIEF

Motion and Title: Staff recommends to approve: Modification 001 to Contract #08EA-7B-10-60-01-023 (R2008-0502) Low Income Home Energy Assistance (LIHEAP) with the State of Florida Department of Community Affairs for the period March 1, 2008, through March 31, 2009, increasing the contract by \$34,277 for utility assistance to low-income families.

Summary: Palm Beach County received notification on July 29, 2008, that additional Low Income Home Energy Assistance (LIHEAP) funds are available under the current LIHEAP agreement, Contract #08EA-7B-10-60-01-023. The attached Modification incorporates an additional \$34,277 increase in the base allocation in the existing contract for a new grant total of \$1,186,238. The \$34,277 represents PBC Community Action's share of the increased Federal allocation. These additional funds will enable PBC Community Action to serve an additional 155 low income households. No county funds are required. (Community Action Program) Countywide (TKF)

Background and Justification: The current LIHEAP application, approved on February 4, 2008, and ratified on April 1, 2008, provided funds in the amount of \$1,151,961 enables the Community Action Program to serve an estimated 3,552 low income households with energy bills and crisis through March 31, 2009. This increase in funding will enable Community Action Program to serve a total of 3,707 households through March 31, 2007.

**Attachments:**

- 1. Modification 001 to LIHEAP Contract #08EA-7B-10-60-01-023
- 2. Department of Community Affairs Memorandum

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Recommended by: Edward J. Smith 9/24/2008
Department Director Date

Approved by: Jan 10/2/08
Assistant County Administrator Date

**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

<b>Fiscal Years</b>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	<u>34,277</u>	_____	_____	_____
External Revenues	_____	<u>(34,277)</u>	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
<b>NET FISCAL IMPACT</b>	_____	<u>0</u>	_____	_____	_____
<b># ADDITIONAL FTE POSITIONS (Cumulative)</b>	_____	_____	_____	_____	_____

Is Item Included in Current Budget? Yes X No \_\_\_\_\_  
 Budget Account No.: Fund: 1009 Agency: 145 Org: 1462 Object: \_\_\_\_\_  
 Reporting Category various

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

Federal funds through the State of Florida Department of Community Affairs.

**C. Departmental Fiscal Review:** *Realist*

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Administration Comments:**

*Adwillhitz 9.30.08*  
 9/30/08 OFMB *9/25/08*  
 Legal Sufficiency: *9/22* *SH 9/30/08* *10/1/08* *10/1/08*  
 Contract Dev. and Control

*[Signature]* 10/2/08  
 Assistant County Attorney

**This amendment complies with our review requirements.**

**C. Other Department Review:**

Department Director

MODIFICATION OF AGREEMENT  
BETWEEN  
FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS  
AND  
Palm Beach County Board of County Commissioners

This Modification is made and entered into by and between the State of Florida, Department of Community Affairs, ("Department"), and Palm Beach County Board of County Commissioners the ("Recipient") to modify DCA Contract Number 08EA-7B-10-60-01-023 ("Agreement").

WHEREAS, the Department and the Recipient have entered into the Agreement, pursuant to which the Department has provided a grant to the Recipient under the Low-Income Home Energy Assistance Program (LIHEAP) of \$ 1,151,961 and

WHEREAS, the Department and the Recipient desire to modify the Agreement.

NOW, THEREFORE, in consideration of the mutual promises of the parties contained herein, the parties agree as follows:

1. Paragraph (17)(a) and (b) Funding/Consideration is hereby modified to read as follows:

(a) This is a cost-reimbursement Agreement. The Recipient shall be reimbursed for costs incurred in the satisfactory performance of work hereunder in an amount not to exceed \$1,186,238 subject to the availability of funds and appropriate budget authority.

This revised contract amount includes:

- A. \$1,151,961 Current FY 2008-2009 LIHEAP contract allocation
- B. +\$ 34,277 Base Increase
- C. \$1,186,238 Total LIHEAP Allocation

(b) Any advance payment under this Agreement is subject to Section 216.181(16), Fla.Stat., and is contingent upon the Recipient's acceptance of the rights of the Department under Paragraph (12)(b) of this Agreement. The amount which may be advanced may not exceed the expected cash needs of the Recipient within the first three (3) months of the contract term. For a federally funded contract, any advance payment is also subject to federal OMB Circulars A-87, A-110, A-122 and the Cash Management Improvement Act of 1990. If an advance payment is requested, the budget data on which the request is based and a justification statement shall be included in this Agreement as Attachment M. Attachment M will specify the amount of advance payment needed and provide an explanation of the necessity for and proposed use of these funds.

2. Attachment A, Scope of Work, Section (5) is hereby modified to read as follows:

(5) Applicants receiving Social Security Income (SSI), Food Stamps or have applied for and are currently eligible for Weatherization Assistance Program (WAP) or Community Services Block Grant (CSBG) funds automatically qualify for LIHEAP; however, the benefit levels are the same as other qualified applicants.

3. Attachment I, Recipient Information, is hereby deleted in its entirety and replaced with Amended Attachment I, if applicable.
4. Attachment J, Budget Summary and Workplan, is hereby deleted in its entirety and replaced with Amended Attachment J.
5. Attachment K, Budget Detail, is hereby deleted in its entirety and replaced with Amended Attachment K.
6. Attachment L, Multi-County Fund Distribution, is hereby deleted in its entirety and replaced with Amended Attachment L, if applicable.
7. All provisions of the Agreement being modified and any attachments thereto in conflict with this Modification shall be and are hereby changed to conform with this Modification, effective as of the date of the last execution of this Modification by both parties.
8. All provisions not in conflict with this Modification remain in full force and effect, and are to be performed at the level specified in the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this document as of the dates set out herein.

**RECIPIENT**

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS**

BY: \_\_\_\_\_

Addie L. Greene, Chairperson  
(Type Name and Title)

Date \_\_\_\_\_

59-60000785  
Federal Identification Number

**STATE OF FLORIDA**

**DEPARTMENT OF COMMUNITY AFFAIRS**

BY: \_\_\_\_\_

Debbie Wonsch  
Operations and Management Consultant II  
Division of Housing and Community Development

Date: \_\_\_\_\_

**LIHEAP  
REVISED ATTACHMENT I - RECIPIENT INFORMATION**

FEDERAL YEAR: 08

CONTRACT PERIOD: Date of Signing to March 31, 2009

**FOR DCA USE ONLY**

DATE RECEIVED: \_\_\_\_\_ REVISION(S) RCVD: \_\_\_\_\_

I. **RECIPIENT CATEGORY:** ( ) Non-Profit (X) Local Government ( ) Tribal Government

II. **COUNTIES TO BE SERVED WITH THESE FUNDS:** Palm Beach County

III. **GENERAL ADMINISTRATIVE INFORMATION**

a. Name of Recipient: Palm Beach County Board of County Commissioners  
Community Action Program of Palm Beach County

b. Name of Executive Director or Chief Administrator: Maureen Perrault

c. Recipient Address:  
810 Datura Street  
City: West Palm Beach, FL Zip Code: 33401  
Telephone: ( 561 ) 355-4727 County: Palm Beach  
Fax: ( 561 ) 355-4192  
E-Mail Address: mperraul@co.palm-beach.fl.us

d. Mailing Address (if different from above):  
Same  
\_\_\_\_\_, FL Zip Code: \_\_\_\_\_

e. Chief Elected Official (for local governments) or President/ Chairman of Board (corporations):

Name: Addie L. Greene  
Title: Chairperson, Palm Beach County Board of County Commissioners  
Mailing Address (Home or Business other than Recipient's)  
Address: P.O. Box 1989  
City: West Palm Beach, FL Zip Code: 33401  
Telephone: ( 561 ) 355-2207

f. Official to Receive State Warrant:

Name: Sharon R. Bock  
Title: Chief Deputy Clerk of Courts/BCC  
Mailing Address: P.O. Box 4036  
City: West Palm Beach, FL Zip Code: 33402

g. Recipient Contacts:

(1) Program: Name: Maureen Perrault Title: Coordinator, PBC Community Action  
Mailing Address: 810 Datura Street  
West Palm Beach, FL Zip Code: 33401  
Telephone: ( 561 ) 355-4727  
Fax: ( 561 ) 355-4192  
E-Mail Address: mperraul@pbcgov.com

(2) Fiscal: Name: Rebecca Webb Title: Fiscal Manager II  
Mailing Address: 810 Datura Street  
West Palm Beach, FL Zip Code: 33401  
Telephone: ( 561 ) 355-4716  
Fax: ( 561 ) 355-3863  
E-Mail Address: rwebb@pbcgov.com

h. Person(s) authorized to sign fiscal reports: Rebecca Webb, Fiscal Manager II

IV. **AUDIT** Recipient Fiscal Year: From: 03/01/2008 To: 03/31/2009

Audit is due nine (9) months from the end of the recipient's fiscal year: \_\_\_\_\_

**LIHEAP  
AMENDED ATTACHMENT J  
BUDGET SUMMARY and WORKPLAN**

Recipient: Palm Beach County Community Action Program

Contract 08EA-7B-10-60-01-023

**I. BUDGET SUMMARY**

A. LIHEAP FUNDS ONLY	B. Last Approved Budget Amount	C. Adjustments to Approved Budget (Optional)	D. Increase in Base Allocation	E. SUBTOTAL Columns B+C+D	F. Leveraging	G TOTAL Modified Budget
1. TOTAL FUNDS (No Leveraging)	1,151,961		34,277	1,186,238		1,186,238
<b>ADMINISTRATIVE EXPENSE (Cell 2G cannot exceed 8% of Cell 1G)</b>						
2. Salaries incl Fringe, Rent, Utilities, Travel and Other.	92,157	-0-	2,742	94,899		94,899
<b>OUTREACH EXPENSE (Cell 3G cannot exceed cell 1E minus Cell 2E times .15)</b>						
3. Salaries incl Fringe, Rent, Utilities, Travel and Other.	158,971	-0-	4,730	163,701		163,701
<b>DIRECT CLIENT ASSISTANCE</b>						
4. Home Energy Assistance (Cell 4G must be at least 25% of Cell 1G)	387,990	-0-	26,805	414,795		414,795
5. Crisis Assistance	489,804	-0-	-0-	489,804		489,804
6. Weather Related/Supply Shortage/ Disaster (Cell 6G must be at least 2% of Cell 1G)	23,039	-0-	-0-	23,039		23,039
7. Subtotal Direct Client Assistance (Line 4 + 5 + 6)	900,833	-0-	26,805	927,638		927,638
<b>LEVERAGING FUNDS ONLY</b>						
8. Home Energy Assistance						
9. Crisis Assistance						
10. Subtotal Leveraging Assistance (Line 8 + 9)						
11. GRAND TOTALS	900,833	0.00	34,277	1,186,238		1,186,238

**II DIRECT CLIENT ASSISTANCE WORKPLAN**

Type of Assistance:	Estimated # of Households		Estimated Cost Per Household	Estimated Expenditures
	Previous	Amended		
Home Energy	2,205	2,360	175.76	414,795
Crisis	1,310	1,310	373.89	489,804
Weather Related/Supply Shortage	37	37	622.67	23,039
Total	3,552	3,707		927,638

**LEVERAGE FUNDS**

Home Energy	
Crisis Assistance	
<b>TOTAL</b>	

1 Estimated Expenditures equals the Amended Estimated Number of Households times the Estimated Cost Per Household. The amount must agree with the corresponding line in Column G above.

**LIHEAP  
ATTACHMENT K**

**III Administrative and outreach expense budget detail (Lines 2-3)**

Line Item Number	EXPENDITURE DETAIL (Round up line items to dollars. Do not use cents and decimals in totals)	LIHEAP FUNDS
1.	LIHEAP Funds	1,186,238
	Administrative Expenses	
2.	Salaries Including Fringe	
	Kathryn McNealy, CAS IV - LIHEAP Program Director	
	Salary @ 100% 44,852	
	FICA @ 6.20% 2,781	
	Medicare @ 1.45% 650	
	Retirement @ 10.85% 4,866	
	Insurance 9,100	
	Longevity <u>2,243</u>	
	64,492	
	Bettye Dillard, CAS	
	Salary @ 50% 15,259	
	FICA @ 6.20% 946	
	Medicare @ 1.45% 221	
	Retirement @ 10.85% 1,656	
	Insurance <u>1,122</u>	
	19,203	
	Total Salary Plus Fringes	83,695
	Other	
	Rent & Utilities 1,000	
	Travel 2,000	
	Mileage 2,297	
	Postage 165	
	Office Supplies 5,742	
	Total Other	11,204
	<b>TOTAL ADMINISTRATIVE EXPENSES</b>	<b>94,899</b>

**LIHEAP  
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3.	<p><b><u>Outreach Expenses</u></b></p> <p>Josephine Carey - CAS</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Salary @100%</td><td style="text-align: right;">42,922</td></tr> <tr><td>FICA @ 6.20%</td><td style="text-align: right;">2,661</td></tr> <tr><td>Medicare @ 1.45%</td><td style="text-align: right;">622</td></tr> <tr><td>Retirement @ 10.85%</td><td style="text-align: right;">4,657</td></tr> <tr><td>Insurance</td><td style="text-align: right;">9,100</td></tr> <tr><td>Longevity</td><td style="text-align: right;"><u>2,146</u></td></tr> <tr><td></td><td style="text-align: right;">62,108</td></tr> </table> <p>Cynthia Hatton - CAS</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Salary @100%</td><td style="text-align: right;">44,331</td></tr> <tr><td>FICA @6.2%</td><td style="text-align: right;">2,749</td></tr> <tr><td>Medicare @1.45%</td><td style="text-align: right;">643</td></tr> <tr><td>Retirement @10.85%</td><td style="text-align: right;">4,810</td></tr> <tr><td>Insurance</td><td style="text-align: right;">9,100</td></tr> <tr><td>Longevity</td><td style="text-align: right;"><u>2,217</u></td></tr> <tr><td></td><td style="text-align: right;">63,850</td></tr> </table> <p>Bettye Dillard, CAS</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Salary @ 50%</td><td style="text-align: right;">15,259</td></tr> <tr><td>FICA @ 6.20%</td><td style="text-align: right;">946</td></tr> <tr><td>Medicare @ 1.45%</td><td style="text-align: right;">221</td></tr> <tr><td>Retirement @ 10.85%</td><td style="text-align: right;">1,656</td></tr> <tr><td>Insurance</td><td style="text-align: right;"><u>1,122</u></td></tr> <tr><td></td><td style="text-align: right;">19,203</td></tr> </table> <p style="text-align: right; margin-right: 20px;"><b>Total Salary &amp; Fringes</b></p> <p style="text-align: right;">145,161</p> <p>Other Outreach</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Travel &amp; Registration</td><td style="text-align: right;">2,000</td></tr> <tr><td>Mileage</td><td style="text-align: right;">2,797</td></tr> <tr><td>Graphics</td><td style="text-align: right;">1,000</td></tr> <tr><td>Equipment</td><td style="text-align: right;">1,500</td></tr> <tr><td>Office Equipment Rental</td><td style="text-align: right;">1,000</td></tr> <tr><td>Postage</td><td style="text-align: right;">513</td></tr> <tr><td>Office Supplies</td><td style="text-align: right;">7,730</td></tr> <tr><td>Communication</td><td style="text-align: right;">1,000</td></tr> <tr><td>Repair &amp; Maint./Bldg.</td><td style="text-align: right;">1,000</td></tr> </table> <p style="text-align: right; margin-right: 20px;"><b>Total Other Outreach Expenses</b></p> <p style="text-align: right;">18,540</p> <p style="text-align: right; margin-right: 20px;"><b>TOTAL OUTREACH EXPENSE</b></p> <p style="text-align: right;">163,701</p>	Salary @100%	42,922	FICA @ 6.20%	2,661	Medicare @ 1.45%	622	Retirement @ 10.85%	4,657	Insurance	9,100	Longevity	<u>2,146</u>		62,108	Salary @100%	44,331	FICA @6.2%	2,749	Medicare @1.45%	643	Retirement @10.85%	4,810	Insurance	9,100	Longevity	<u>2,217</u>		63,850	Salary @ 50%	15,259	FICA @ 6.20%	946	Medicare @ 1.45%	221	Retirement @ 10.85%	1,656	Insurance	<u>1,122</u>		19,203	Travel & Registration	2,000	Mileage	2,797	Graphics	1,000	Equipment	1,500	Office Equipment Rental	1,000	Postage	513	Office Supplies	7,730	Communication	1,000	Repair & Maint./Bldg.	1,000	
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**LIHEAP  
ATTACHMENT K**

**III Administrative and outreach expense budget detail (Lines 2-3)**

<b>Line Item Number</b>	<b>EXPENDITURE DETAIL</b> (Round up line items to dollars. Do not use cents and decimals in totals)	<b>LIHEAP FUNDS</b>
	Direct Client Assistance	
4.	Home Energy Assistance	414,795
5.	Crisis Assistance	489,804
6.	Weather Related Supply	23,039
	Total Client Assistance	927,638
	<b>GRAND TOTAL</b>	<b>1,186,238</b>



STATE OF FLORIDA

# DEPARTMENT OF COMMUNITY AFFAIRS

*"Dedicated to making Florida a better place to call home"*

CHARLIE CRIST  
Governor

THOMAS G. PELHAM  
Secretary

## MEMORANDUM

TO: Low Income Home Energy Assistance Program Recipients

FROM: Paula Lemmo, Community Program Manager *HT for PL*  
Community Assistance Section *Rec. July 29, 08 JHP*

DATE: July 25, 2008

SUBJECT: Low Income Energy Assistance Program (LIHEAP) Modifications to Incorporate Increase in Base Allocation

Enclosed is a modification to your current Low Income Home Energy Assistance Program agreement. This modification will incorporate your agency's share of the LIHEAP increased base allocation and connect two omissions from the original contract.

The modification must be submitted to the Department no later than September 12, 2008. In all cases, three modification packages with original signatures must be mailed to:

Ms. Hilda Frazier, Planning Manager  
 Department of Community Affairs  
 Division of Housing and Community Development  
 Community Assistance Section  
 2555 Shumard Oak Boulevard  
 Tallahassee, Florida 32399-2100

If you have any questions, please contact your financial specialist at (850) 488-7541.

PL/sl

Enclosure

2555 SHUMARD OAK BOULEVARD TALLAHASSEE, FL 32399-2100  
 Phone: 850-488-8466 Fax: 850-921-0781 Website: [www.dca.state.fl.us](http://www.dca.state.fl.us)

COMMUNITY PLANNING  
 Phone: 850-488-2356 Fax: 850-488-3309

AREAS OF CRITICAL STATE CONCERN FIELD OFFICE  
 Phone: 305-289-2402 Fax: 305-289-2442

HOUSING AND COMMUNITY DEVELOPMENT  
 Phone: 850-488-7956 Fax: 850-922-5623