

RESOLUTION NO. 2-2009

RESOLUTION OF THE
CLARK COUNTY BOARD OF COMMISSIONERS, INDIANA
AUTHORIZING THE APPROVAL OF THE UNDERWOOD SANITARY SEWER FEASIBILITY
STUDY PLANNING GRANT REPORT
TO THE INDIANA OFFICE OF COMMUNITY AND RURAL AFFAIRS
AND ADDRESSING RELATED MATTERS

WHEREAS, the Clark County Board of Commissioners recognizes the need to stimulate growth and to maintain a sound economy within its corporate limits; and

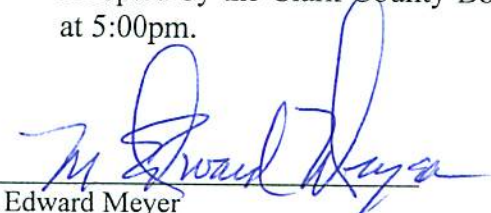
WHEREAS, the Housing and Community Development Act of 1974, as amended, authorizes the Indiana Office of Community and Rural Affairs to provide grants to local units of government to meet the housing and community development needs of low and moderate income persons; and

WHEREAS, the Clark County Board of Commissioners, Clark County, Indiana, has conducted or will conduct public hearings prior to the submission of the final report to the Indiana Office of Community and Rural Affairs, said public hearings to assess the housing, public facilities and economic needs of its low and moderate income residents;

NOW THEREFORE, BE IT RESOLVED by the Clark County Board of Commissioners, Indiana that:

1. The Clark County Commissioners authorize the approval of the Underwood Sanitary Sewer Feasibility Study contingent on the final approval by the Indiana Office of Community and Rural Affairs. This report addressed the necessary steps in addressing the community's interest and needs in the area of community development.

Adopted by the Clark County Board of Commissioners, Indiana, this 22nd day of January, 2009, at 5:00pm.


M. Edward Meyer
President, Clark County Commissioners

ATTEST: 
Keith Groth
Clark County Auditor

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COPY

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M. Edward Meyer
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Keith Groth
Clark County Auditor

State of Indiana
Department of Commerce
Community Development Block Grant Program
Semi-Annual Report
Cover Sheet

| | |
|---|---|
| 1. Grantee Name: <i>Clark County Commissioners</i> Street Address: <i>501 E. Court Avenue, City-County Bldg, Room 204</i> City, State Zip: <i>Jeffersonville, Indiana 47130</i> | 3. Report Date <i>12/31/2008</i> |
| 2. Grantee Phone Number: <i>(812) 285-6275</i> | 4. Grant Number <i>PL-04-064</i> |
| 5. Grantee Certification: <p>The grantee's Chief Elected Official certifies that:</p> <p>(a) To the best of his or her knowledge or belief, the data in this report was true and correct as of the report end date.</p> <p>(b) The records described in 24 CFR Part 570 are being maintained and will be made available upon request.</p> | |
| Signature, Grantee's Chief Elected Official | Date |
| Typed Name and Title of Grantee's Chief Elected Official <i>M. Edward Meyer, Clark County Commissioners President</i> | |
| 6. This report prepared by: <p>Name: <i>Andrea M. Frazier</i> Title: <i>Administrative & Technical Coordinator</i> Community or Company: <i>River Hills EDD & RPC</i> Address: <i>300 Spring Street, Suite 2A</i> City, State Zip: <i>Jeffersonville, IN 47130</i> Area Code & Phone: <i>(812)-288-4624</i></p> | |
| Do not write in this space. For Office of Community and Rural Affairs Use Only. | |
| DOC Review Performed By: _____ Date: _____ PER Entry: _____ | |

State of Indiana
Office of Community and Rural Affairs
Community Development Block Grant Program
Semi-Annual Report
Table II - Summary of Actual Project Beneficiaries

| | | | |
|---|--|---------------------------------------|--|
| Grantee Name: | Clark County Commissioners | Grant Begin Date: | 4/9/2008 |
| | | Grant End Date: | 5/31/2010 |
| Grant Number: | PL-04-064 | Report Date: | 12/31/2008 |
| National Objective (check only one as sited in grant application and agreement): | | | |
| Benefit to Low and Moderate Income Persons | | | |
| | <input checked="" type="checkbox"/> XXXX | Area Benefit | <input type="checkbox"/> Limited Clientele |
| | <input type="checkbox"/> | Housing | <input type="checkbox"/> Job Creation |
| Prevention or Elimination of Slums or Blight | | | |
| | <input type="checkbox"/> | Area Basis | <input type="checkbox"/> Spot Basis |
| Urgent Need <input type="checkbox"/> | | | |
| Proposed Beneficiaries : (cited in grant application and agreement) | | Actual Beneficiaries: | |
| Total Beneficiaries | 177 | Total Beneficiaries | |
| Total Low/Mod Beneficiaries | 153 | Total Low/Mod Beneficiaries | |
| Proposed Beneficiaries Breakdown | | Actual Beneficiaries Breakdown | |
| Activity number(s) | 12 | Activity number(s) | |
| Total Number | 177 | Total Number | |
| White | | White | |
| Number | 160 | Number | |
| Percent | 90.00% | Percent | |
| Black | | Black | |
| Number | 10 | Number | |
| Percent | 6.00% | Percent | |
| Hispanic | | Hispanic | |
| Number | 2 | Number | |
| Percent | 0.90% | Percent | |
| Asian | | Asian | |
| Number | 2 | Number | |
| Percent | 1.00% | Percent | |
| Native American | | Native American | |
| Number | 1 | Number | |
| Percent | 0.50% | Percent | |
| Handicapped | | Handicapped | |
| Number | 33 | Number | |
| Percent | 18.90% | Percent | |
| Elderly | | Elderly | |
| Number | 26 | Number | |
| Percent | 14.60% | Percent | |
| Low and Moderate Income | | Low and Moderate Income | |
| Number | 153 | Number | |
| Percent | 86.42% | Percent | |
| Female-headed Households | | Female-headed Households | |
| Number | 9 | Number | |
| Percent | 5.00% | Percent | |
| Source of Information: | Income Survey | Source of Information: | |

State of Indiana
Office of Community and Rural Affairs
Community Development Block Grant Program
Semi-Annual Report
Table III - Minority/Women's Business Participation

| Grantee Name: | Clark County Commissioners | Total amount of all contracts awarded in last six (6) months: | \$ | - | | | |
|---|----------------------------|---|--------------------|----------------------------|---------------------------|------------|--------------------|
| Grant Number: | PL-04-064 | Total amount of M/WBE contracts awarded in last six (6) months: | \$ | - | | | |
| Grant Begin Date: | 4/9/2008 | Total Amount of all contracts awarded to date: | | \$ | 33,333.00 | | |
| Report Date: | 12/31/2008 | | | | | | |
| Contractor/Subcontractor Name and Address | | Type of Trade Code | Racial/Ethnic Code | Prime Contractor ID Number | Subcontractor ID Number | Female Y/N | Amount of Contract |
| Capitol Engineering 6200 E. Highway 62, BLDG 2501, Suite 250, Jeffersonville, IN 47130 | | 9 | 1 | 62-1436205 | N/A | N | \$ 30,000.00 |
| River Hills EDD & RPC 300 Spring Street, Suite 2A, Jeffersonville, IN 47130 | | 6 | 1 | 35-1328894 | N/A | N | \$ 3,333.00 |
| | | | | | | | |
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| | | | | | | | |
| Type of Trade Codes | | Racial/Ethnic Codes | | | | | |
| 1=New Construction | 4=Service | 7=Tenant Services | 0=Other | 1=White Americans | 4=Hispanic Americans | | |
| 2=Substantial Rehab | 5=Project Mgmt | 8=Education/Training | | 2=Black Americans | 5=Asian/Pacific Americans | | |
| 3=Repair | 6=Professional | 9=Arch/Eng/Appraisal | | 3=Native Americans | 6=Other | | |

| Leveraging Funds Source | Grant Agreement Commitment | Amount Expended to Date | Estimated Final Amount |
|-------------------------|----------------------------|-------------------------|------------------------|
| CDBG Funds | \$ 30,000.00 | \$ - | \$ 30,000.00 |
| Local Match/Private | \$ 3,333.00 | \$ - | \$ 3,333.00 |
| Program Income | \$ - | \$ - | \$ - |
| Other (list) | \$ - | \$ - | \$ - |

| |
|--|
| Describe any problems or delays encountered or anticipated in accomplishing grant objectives within the approved timeline. Attach additional sheet if necessary. |
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State of Indiana
Office of Community and Rural Affairs
Community Development Block Grant Program
Semi-Annual Report
Table VI - Job Creation and Housing Report

NOT APPLICABLE

| | | | |
|------------------------|----------------------------|-------------------|------------|
| Grantee Name: | Clark County Commissioners | Grant Begin Date: | 4/9/2008 |
| Participating Company: | | Grant End Date: | 5/31/2010 |
| Grant Number: | PL-04-064 | Report Date: | 12/31/2008 |

Table VI-A - Job Creation

| | | | | | | | | | |
|---|-----------------|-------------------|--------------------|------------------|-------------------------------|-----------------|-------------------|--------------------|------------------|
| Participating Company: | | | | | | | | | |
| Goal Date for completion of job creation/retention: | | | | | | | | | |
| Has actual job creation/retention goal been met? | | | | | | Yes | | No | |
| Goal for job retention/creation | | | | | Actual job creation/retention | | | | |
| | Total Number | Number low/mod | Number Minority | Number Female | | Total Number | Number low/mod | Number Minority | Number Female |
| Created | | | | | | | | | |
| Retained | | | | | | | | | |

Table VI-B - Housing

| | | | | | | | | | |
|--|-----------------|-------------------|--------------------|------------------|-------------------------------|-----------------|-------------------|--------------------|------------------|
| Goal Date for completion of housing occupancy: | | | | | | | | | |
| Has actual housing occupancy goal been met? | | | | | | Yes | | No | |
| Goal for job retention/creation | | | | | Actual job creation/retention | | | | |
| | Total Number | Number low/mod | Number Minority | Number Female | | Total Number | Number low/mod | Number Minority | Number Female |
| Owner occupied | | | | | | | | | |
| Rental | | | | | | | | | |
| New Housing | | | | | | | | | |
| Rehabilitation | | | | | | | | | |

I certify under penalties of perjury that the information on this report is true and correct to the best of my knowledge and belief in every respect as to job creation/retention, and that I have not withheld or overstated any of the information presented in this report.

| | | | |
|--|------|-----------------------------------|------|
| Signature Business/Developer Authorized Representative | Date | Signature Chief Elected Official: | Date |
| N/A | | N/A | |
| Typed name and title | | Typed name and title | |
| N/A | | N/A | |

