## A RESOLUTION IN SUPPORT OF AN APPLICATION TO THE TEXAS GENERAL LAND OFFICE FOR COMMUNITY DEVELOPMENT BLOCK GRANT - MITIGATION FOR THE FORT BEND COUNTY RAIN GAUGE NETWORK

WHEREAS, the Fort Bend County Commissioners Court (the "Court") finds it in the best interest of the citizens of Fort Bend County to participate in the Hazard Mitigation Grant Program (HMGP) Supplemental program through the Texas General Land Office Community Development Block Grant – Mitigation (CDBG-MIT) grant program regarding a Fort Bend County rain gauge network; and

**WHEREAS**, an application must be submitted to the Texas General Land Office to participate in such program, and

WHEREAS, the Court designates KP George, Fort Bend County Judge, as Fort Bend County's authorized official with the power to apply, reject, alter, or terminate the grant on behalf of Fort Bend County.

**NOW THEREFORE, BE IT RESOLVED** that the Court approves submission of the grant application listed above by the Fort Bend County Judge to the Texas General Land Office.

Passed and Approved this \_\_\_\_\_\_ day of September, 2021.

KP George, County Judge Fort Bend County, Texas

ATTEST:

Laura Richard, County Clerk

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Each Applicant for Community Development Block Grant Mitigation ("CDBG-MIT") funding must complete Federal Assistance Standard Form 424 (SF-424) and certify that local certifications included in this application guide were followed in the preparation of any CDBG-MIT program application. Additionally, Applicant must certify that it will continue to follow local certifications in the event that funding is awarded and Applicant is reclassified as a Subrecipient.

Each Applicant/Subrecipient must comply with the provisions of the National Environmental Policy Act ("NEPA"), the Council on Environmental Quality ("CEQ") regulations, the requirements set forth in Title 24 of the Code of Federal Regulations ("CFR") part 58, and applicable Texas General Land Office policy directives.

Each Applicant/Subrecipient must comply with all applicable federal and state laws, including environmental, labor (Davis-Bacon Act), the procurement procedures and contract requirements found at 2 C.F.R. §200.318 – §200.326, and all civil rights requirements.

Each Applicant/Subrecipient certifies, as outlined in 84 FR 45838 (August 30,2019), the following:

- A. The Applicant/Subrecipient certifies that it has in effect and if following a residential antidisplacement and relocation assistance plan in connection with any activity assisted with CDBG-MIT funds.
- B. The Applicant/Subrecipient certifies its compliance with restrictions on lobbying as required by 24 C.F.R. part 87, together with disclosure forms, if required by part 87.
- C. Any entity or entities designated by the subrecipient, and any contractor, subrecipient, or designated public agency carrying out an activity with CDBG-MIT funds, possess(es) the legal authority to carry out the program for which it is seeking funding, in accordance with applicable HUD regulations and the federal register notice. The subrecipient certifies that activities to be undertaken with CDBG-MIT funds are consistent with the Action Plan.
- D. The Applicant/Subrecipient certifies that it will comply with the acquisition and relocation requirements of the Uniform Relocation Act ("URA"), as amended, and implementing regulations at 49 CFR part 24, except where waivers or alternative requirements are provided for CDBG-MIT funds.
- E. The Applicant/Subrecipient certifies that it will comply with Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. §1701u) and implementing regulations at 24 C.F.R. part 135.

- F. The Applicant/Subrecipient certifies that it is following a detailed citizen participation plan that satisfies the requirements of 24 CFR §91.115 or §91.105 (except as provided for in notices providing waivers and alternative requirements for this grant). Also, each local government receiving assistance from a state grantee must follow a detailed citizen participation plan that satisfies the requirements of 24 CFR §570.486 (except as provided for in notices providing waivers and alternative requirements for this grant).
- G. The Applicant/Subrecipient certifies that it is complying with each of the following criteria:
- 1) Funds will be used solely for necessary expenses related to mitigation activities, as applicable, in the most impacted and distressed areas for which the President declared a major disaster in 2015, 2016, or 2017 pursuant to the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1974 (42 U.S.C. §5121 et seq.).
- 2) With respect to activities expected to be assisted with CDBG-MIT funds, the relevant action plan has been developed to give priority to activities that will benefit low- and moderate-income families.
- 3) The aggregate use of CDBG-MIT funds shall principally benefit low- and moderateincome families in a manner that ensures that at least 50 percent (or another percentage permitted by HUD in a waiver published in an applicable Federal Register notice) of the CDBG-MIT grant amount is expended for activities that benefit such persons.
- 4) The Applicant/Subrecipient will not attempt to recover any capital costs of public improvements assisted with CDBG-MIT funds by assessing any amount against properties owned and occupied by persons of low- and moderate-income, including any fee charged or assessment made as a condition of obtaining access to such public improvements, unless:
- i. CDBG-MIT funds are used to pay the proportion of such fee or assessment that relates to the capital costs of such public improvements that are financed from revenue sources other than under this title; or
- ii. For purposes of assessing any amount against properties owned and occupied by persons of moderate income, the grantee certifies to the Secretary that it lacks sufficient CDBG funds (in any form) to comply with the requirements of clause (a).
- H. The Applicant/Subrecipient certifies that the grant will be conducted and administered in conformity with title VI of the Civil Rights Act of 1964 (42 U.S.C. §2000d), the Fair Housing Act (42 U.S.C. §3601-§3619), and implementing regulations, and that it will affirmatively further fair housing.
- I. The Applicant/Subrecipient certifies that it has adopted and is enforcing the following policies, and, in addition, must certify that they will require local governments that receive grant funds to certify that they have adopted and are enforcing:
- 1) A policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in nonviolent civil rights demonstrations;
- 2) A policy of enforcing applicable state and local laws against physically barring entrance to or exit from a facility or location that is the subject of such nonviolent civil rights demonstrations within its jurisdiction.

- J. The Applicant/Subrecipient certifies that it (and any administering entity) currently has or will develop and maintain the capacity to carry out mitigation activities, as applicable, in a timely manner and that the subrecipient has reviewed the respective requirements of this notice.
- K. The Applicant/Subrecipient certifies that it will not use CDBG-MIT funds for any activity in an area identified as flood prone for land use or hazard mitigation planning purposes by the state, local, or tribal government or delineated as a Special Flood Hazard Area (or 100-year floodplain) in FEMA's most current flood advisory maps, unless it also ensures that the action is designed or modified to minimize harm to or within the floodplain, in accordance with Executive Order 11988 and 24 C.F.R. part 55. The relevant data source for this provision is the state, local, and tribal government land use regulations and hazard mitigation plans and the latest-issued FEMA data or guidance, which includes advisory data (such as Advisory Base Flood Elevations) or preliminary and final Flood Insurance Rate Maps.
- L. The Applicant/Subrecipient certifies that its activities concerning lead-based paint will comply with the requirements of 24 CFR part 35, subparts A, B, I, K, and R.
- M. The Applicant/Subrecipient certifies that it will comply with environmental requirements at 24 CFR part 58.
- N. The Applicant/Subrecipient certifies that it will comply with applicable laws.

WARNING: ANY PERSON WHO KNOWLINGLY MAKES A FALSE CLAIM OR STATEMENT TO HUD MAY BE SUBJECT TO CIVIL OR CRIMINAL PENALTIES UNDER 18 U.S.C. §287; 18 U.S.C. §1001, AND 31 U.S.C. § 3729.

Except as otherwise provided under federal law, any person who knowingly and willfully falsifies, conceals, or covers up a material fact by any trick, scheme or device or who makes any materially false, fictitious, or fraudulent statement or representation or who makes or uses any false writing or document knowing the writing or document to contain materially false, fictitious, or fraudulent statement or entry shall be prosecuted under Title 18, United States Code, §1001.

KP George
Printed Name of Authorized Signatory

Date

9-28-2021

Signature of Authorized Signatory

OMB Number: 4040-0004 Expiration Date: 10/31/2019

| Application for Federal Assistance SF-424  |                           |  |  |
|--|---------------------------|--|--|
| * 1. Type of Submission:   | * 2. Type of Application: | * If Revision, select appropriate letter(s): |  |
| Preapplication   | X New                     |  |  |
| Application  | Continuation              | * Other (Specify):                           |  |
| Changed/Corrected Application  | Revision                  |  |  |
| Changed/Corrected Application  | Learsion                  | (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)      |  |
| * 3. Date Received:  | 4. Applicant Identifier:  | 1 11 11 11 11 11 11 11 11 11 11 11 11 1      |  |
|  | TX489157                  |  |  |
| 5a. Federal Entity Identifier: 5b. Federal Award Identifier:                                     |                           |  |  |
|  |                           |  |  |
|  |                           |  |  |
| State Use Only:  |                           |  |  |
| Date Received by State:  | 7. State Application      | n Identifier:                                |  |
| 8. APPLICANT INFORMATION:  |                           |  |  |
| * a. Legal Name: Fort Bend County, Texas   |                           |  |  |
| * b. Employer/Taxpayer Identification Nun  | nber (EIN/TIN):           | * c. Organizational DUNS:                    |  |
| 74-6001969 0000081497075   |                           |  |  |
| d. Address:  |                           |  |  |
| * Street1: 1521 Eugene H   | eimann Cir                |  |  |
| * Street1: 1521 Eugene Heimann Cir Street2:  |                           |  |  |
| * City: Richmond   |                           |  |  |
| County/Parish:   |                           |  |  |
|  |                           |  |  |
| * State: TX: Texas   |                           |  |  |
| Province:  |                           |  |  |
| * Country: USA: UNITED STATES  |                           |  |  |
| * Zip / Postal Code: 77469-3620  |                           |  |  |
| e. Organizational Unit:  |                           |  |  |
| Department Name:   |                           | Division Name:                               |  |
| Homeland Security & Em. Mgmt   |                           |  |  |
| f. Name and contact information of person to be contacted on matters involving this application: |                           |  |  |
| Prefix: Ms   | * First Nar               | me: Caroline                                 |  |
| Middle Name:   | _                         |  |  |
| * Last Name: Egan  |                           |  |  |
| Suffix:  |                           |  |  |
| Title: Disaster Recovery Manager   |                           |  |  |
| Organizational Affiliation:  |                           |  |  |
|  |                           |  |  |
| * Telephone Number: Loss 240 coop  |                           |  |  |
| * Telephone Number: 281-342-6185 Fax Number: 281-342-4798  |                           |  |  |
| *Email: caroline.egan@fortbendcountytx.gov   |                           |  |  |

| Application for Federal Assistance SF-424  |  |  |  |  |
|--|--|--|--|--|
| * 9. Type of Applicant 1: Select Applicant Type:   |  |  |  |  |
| B: County Government   |  |  |  |  |
| Type of Applicant 2: Select Applicant Type:  |  |  |  |  |
|  |  |  |  |  |
| Type of Applicant 3: Select Applicant Type:  |  |  |  |  |
|  |  |  |  |  |
| * Other (specify):   |  |  |  |  |
|  |  |  |  |  |
| * 10. Name of Federal Agency:  |  |  |  |  |
| U.S. Department of Housing and Urban Development (HUD)   |  |  |  |  |
| 11. Catalog of Federal Domestic Assistance Number:   |  |  |  |  |
| 14.218   |  |  |  |  |
| CFDA Title:  |  |  |  |  |
| Community Development Block Grant Mitigation (CDBG-MIT)  |  |  |  |  |
|  |  |  |  |  |
| * 12. Funding Opportunity Number:  |  |  |  |  |
|  |  |  |  |  |
| * Title:   |  |  |  |  |
| Fort Bend County Rain Gauge Network  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 13. Competition Identification Number:   |  |  |  |  |
|  |  |  |  |  |
| Title:   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 14. Areas Affected by Project (Cities, Counties, States, etc.):                                |  |  |  |  |
|  |  |  |  |  |
| Add Attachment Delete Attachment View Attachment   |  |  |  |  |
| * 15. Descriptive Title of Applicant's Project:  |  |  |  |  |
| Community Development Block Grant - Mitigation (CDBG-MIT) HMGP Supplemental program - FBC Rain |  |  |  |  |
| Gauge Network  |  |  |  |  |
|  |  |  |  |  |
| Attach supporting documents as specified in agency instructions.                               |  |  |  |  |
| Add Attachments  |  |  |  |  |
|  |  |  |  |  |

| Application for Federal Assistance SF-424  |  |  |  |
|--|--|--|--|
| 16. Congressional Districts Of:  |  |  |  |
| * a. Applicant TX-022  | * b. Program/Project TX-022                      |  |  |
| Attach an additional list of Program/Project Congressional District  | ts if needed.                                    |  |  |
|  | Add Attachment Delete Attachment View Attachment |  |  |
| 17. Proposed Project:  |  |  |  |
| * a. Start Date: 11/1/2021   | * b. End Date: 11/1/2024                         |  |  |
| 18. Estimated Funding (\$):  |  |  |  |
| * a. Federal 624, 744.63   |  |  |  |
| * b. Applicant 0.00  |  |  |  |
| * c. State 0.00  |  |  |  |
| * d. Local 0.00  |  |  |  |
| * e. Other 0.00  |  |  |  |
| * f. Program Income 0.00   |  |  |  |
| *g.TOTAL   |  |  |  |
| * 19. Is Application Subject to Review By State Under Execution  | cutive Order 12372 Process?                      |  |  |
| a. This application was made available to the State under the Executive Order 12372 Process for review on  |  |  |  |
| b. Program is subject to E.O. 12372 but has not been see   | elected by the State for review.                 |  |  |
| ▼ c. Program is not covered by E.O. 12372.   |  |  |  |
| * 20. Is the Applicant Delinquent On Any Federal Debt? (If   | "Yes," provide explanation in attachment.)       |  |  |
| Yes X No   |  |  |  |
| If "Yes", provide explanation and attach   |  |  |  |
|  | Add Attachment                                   |  |  |
| 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) |  |  |  |
| X ** I AGREE   |  |  |  |
| ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.  |  |  |  |
| Authorized Representative:   |  |  |  |
| Prefix: *First   | st Name: KP                                      |  |  |
| Middle Name:   |  |  |  |
| * Last Name: George  |  |  |  |
| Suffix:  |  |  |  |
| * Title: County Judge  |  |  |  |
| * Telephone Number: 281-341-8608   | Fax Number:                                      |  |  |
| * Email: county.judge@fortbendcountytx.gov   |  |  |  |
| * Signature of Authorized Representative: * Date Signed: 4. 28. 26.) 1   |  |  |  |
|  |  |  |  |