# MOBILE URBAN COUNTY COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

# **2021 Capital Project Application**



# PROPOSAL DEADLINE: January 22, 2021 by 12:00 p.m.



Mobile County Grants Department 205 Government Street Mobile, AL 36644-1800

If you have questions or require technical assistance, please contact the Mobile County Grants Department at (251) 574-5075 or (251) 574-8096.

Application may also be downloaded from <a href="http://www.mobilecountyal.gov/HUDgrant">http://www.mobilecountyal.gov/HUDgrant</a>. For your convenience, this application form has been created in a fillable PDF format. After completion it can be digitally signed, saved, and attached to an e-mail for submittal. See Application Deadline section on page 4 for detailed instructions.

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#### **GENERAL INFORMATION**

Mobile County and the municipalities that have elected to be part of the Mobile Urban County are collectively recipients of Community Planning and Development formula grants from the United States Department of Housing and Urban Development (HUD). The Urban County receives Community Development Block Grant (CDBG), Home Investment Partnership Program (HOME), and Emergency Solutions Grant (ESG). These grants are primarily to assist low- and moderate-income persons, expand economic development opportunities, and provide decent housing and/or a suitable living environment. Each program year, the County as lead agency of the Urban County holds public hearings and accepts funding proposals for CDBG funds from public and private agencies/entities within a deadline established annually. All eligible proposals are reviewed by a Project Review Committee and a recommended budget is presented to the Mobile County Commission for review and final action. The Committee considers proposals based upon eligibility criteria set forth in the Federal regulations promulgated by HUD, the extent to which proposals address the priorities and support the goals established in the Consolidated Plan, and how the proposals fit into the availability of formula grant funds. After consulting with the community and stakeholders in 2019/20, the 2020-2024 Consolidated Plan was developed. The Plan includes the following CDBG Priorities, which will serve as the basis for review of program year 2021 applications, and in finalizing 2021 funding decisions.

- Public Facilities and Infrastructure
- Demolition and Spot Blight Clearance
- Homelessness Prevention
- Public Services (subject to 15% cap of the annual grant)
- Fair Housing
- Homeowner Housing Repair Assistance
- Homebuyer Assistance

HUD has not announced the 2021 program year funding allocation for Mobile County, however we anticipate level funding from 2020 for the Community Development Block Grant and Home Investment Partnership (HOME) Programs:

| Community Development Block Grant (CDBG)      | \$1,622,148 |
|---|-------------|
| Home Investment Partnership (HOME)            | \$580,826   |
| Emergency Solutions Grants (ESG) – If Awarded | \$ NA       |

Of the amount awarded, Mobile County Commission proposes to deduct for program administration, planning, and program costs as allowed.

In anticipation of the 2021 funding, Mobile County Commission is accepting applications for the Community Development Block Grant program. Applications for the HOME Program are accepted in accordance with request-for-proposals published on the County's webpage on an as-needed basis. Applications for the Emergency Solutions Grants Program will be announced, if funding becomes available.

Neither this request for applications nor the acceptance of any application shall imply a funding obligation to any applicant. Submitting a request does not guarantee funding. The County, its elected officials, employees, and agents shall not be held responsible or liable for any losses incurred from claims, suits, damages, costs, and expenses of any



kind or of any nature that any proposing entity may suffer, incur, or pay arising out of decisions by the County concerning any proposal, application, or action(s) associated with the administration of any HUD programs.

This Application Package is to request Community Development Block Grant (CDBG) funds for Capital Projects. There is a separate application package for Public Service activities.

### **APPLICATION DEADLINE**

**All proposals for CDBG funds must be submitted electronically to the Grants Department by 12:00 p.m. on January 22, 2021.** Please submit a PDF of your proposal: <u>CLICK HERE FOR LINK</u> A printed application (hard copy) will also be accepted, as long as it is accompanied by an electronic copy of the submittal (i.e., PDF file saved on a compact disc or jump drive) and submitted to **the Grants Department by 12:00 p.m. CST on January 22, 2021 as follows:** Attn: Grants Department, Mobile County Commission, South Tower 8<sup>th</sup> Floor, Mobile Government Plaza, 205 Government Street, Mobile, AL 36644-1800.

This requirement is firm as to the mode of submission, inclusive of date, and time. Mailed proposals should be posted in time to be received by the designated date and time at the above location. No faxed proposals will be accepted. Please provide the name of a contact person, along with telephone number and address.

#### **PROGRAM YEAR 2021 CALENDAR**

| Advertisement for Public Hearings Published  | November 4, 2020 & March 17, 2021 |  |
|--|-----------------------------------|--|
| 1 <sup>st</sup> Public Hearing / Application Workshop<br>Application Package Available | November 17, 2020                 |  |
| Deadline for Proposal Submission   | Noon, January 22, 2021            |  |
| Proposal Review by Review Committee  | February 24, 2021                 |  |
| 2nd Public Hearing   | April 1, 2021                     |  |
| Action Plan Publication 30-Day Comment Period Begins                                   | April 7, 2021                     |  |
| Commission Approval of Final Action Plan and Submission to HUD                         | ion Plan May 10, 2021             |  |
| Program Year Begins  | July 1, 2021                      |  |

(The above dates are subject to change.)



#### WHO MAY APPLY FOR CDBG

A governmental unit that is a member of the Mobile Urban County, a for-profit business that wants to implement economic development, and an incorporated not-for-profit agency capable of undertaking approved programs that serve persons who reside within the geographic designation of the Mobile Urban County, namely City of Bayou La Batre, City of Chickasaw, City of Citronelle, City of Creola, Town of Mount Vernon, City of Prichard, City of Saraland, City of Satsuma, City of Semmes, and the unincorporated areas of Mobile County may apply for CDBG.

Please note Federal guidelines require that funds be spent in a timely manner. Therefore, funded programs will need to be underway and all funds expended within twelve (12) months of execution of an agreement with the County, otherwise funds may be deobligated.

### **ELIGIBILITY AND NATIONAL OBJECTIVES**

eligible activities be found in Basically **CDBG** for **Entitlements** guide for can at https://www.hudexchange.info/resource/19/basically-cdbg-training-guidebook-and-slides/. Please note: to be considered for funding, the proposed activity must be consistent with the 2020-2024 CDBG Priorities for Mobile County (as noted above). These priorities will serve as the basis for review of program year 2021 applications and in finalizing 2021 funding decisions.

A proposed activity must be eligible and must meet at least one of the national objectives mandated by HUD. The three national objectives are: 1) Benefit to low- and moderate-income (LMI) persons; 2) Aid in the prevention or elimination of slums or blight; and 3) Meet a need having a particular urgency (referred to as urgent need).

The LMI national objective is often referred to as the "primary" national objective because the statute requires that the Mobile Urban County expend 70 percent of its CDBG funds to benefit LMI persons. Low- and moderate-income persons are persons with <u>household incomes</u> that are at or below 80% of the median family income for the Mobile Urban County Area (as adjusted by the number of persons in the family). **Income limits for 2021 are anticipated to be released by HUD on or around June 2021.** 

Current income limits for 2021 are based on the 2020 HOME Income limits, effective July 1, 2020:

| Family<br>Size → | 1        | 2        | 3        | 4        | 5        | 6        | 7        | 8+       |
|------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| 80%              | \$34,401 | \$39,301 | \$44,201 | \$49,101 | \$53,051 | \$57,001 | \$60,901 | \$64,851 |

(These limits are subject to change annually.)

Capital projects must benefit low- and moderate-income persons, be located in an area that is predominantly (51%) inhabited by low and moderate-income residents (i.e., Low Mod Area - LMA) as shown in HUD's mapping tool at <a href="https://hud.maps.arcgis.com/apps/webappviewer/index.html?id=ffd0597e8af24f88b501b7e7f326bedd">https://hud.maps.arcgis.com/apps/webappviewer/index.html?id=ffd0597e8af24f88b501b7e7f326bedd</a>. To determine eligibility of projects that are not located in a LMA, a door-to-door survey may be required.

### **Ineligible Activities:**

- Acquisition, construction, or reconstruction of buildings and land for the general conduct of government
- General government expenses
- Political activities



- Purchase of equipment, furnishings, and other personal property that are not affixed to building structure
- Operating and maintenance expenses
- Construction of new housing
- Income payment



# **CDBG CAPITAL PROJECT APPLICATION**



# COMMUNITY DEVELOPMENT BLOCK GRANT CAPITAL PROJECT CHECKLIST OF REQUIRED DOCUMENTS

The following documents must be submitted before this request can be processed. Mark as enclosed the documents included with your application. Note as pending any items that will not be available until later.

| <u>E</u>  | NCLOSED | <u>PENDING</u>  |
|-----------|---------|---|
| 1.        |         | ☐ Completed Application Form (provide detailed description of project, cost estimate, and project map)  |
| 2.        |         | ☐ Completed Form W-9  |
| 3.        |         | ☐ Completed Form regarding Designation of Responsible Officials   |
| 4.        |         | ☐ Completed Form regarding FFATA Report   |
| 5.        |         | ☐ Completed Certification regarding Section 504   |
| 6.        |         | ☐ Completed Certification regarding MBE/WBE/SBC   |
| 7.        |         | ☐ Completed Certification regarding Debarment   |
| 8.        |         | ☐ Completed Certification regarding Lobbying  |
| 9.        |         | ☐ Completed Certification regarding Drug-Free Workplace   |
| 10        | . 🗆     | ☐ Completed Certification regarding Conflict of Interest  |
|           |         | pelow will be applicable to every agency/entity. Mark as enclosed the items included with you differ those items that are not applicable, denote as "NA".   |
| <u>E1</u> | NCLOSED | <u>NA</u>   |
| 1.        |         | ☐ Articles of Incorporation (if applicable)   |
| 2.        |         | ☐ Bylaws (if applicable)  |
| 3.        |         | ☐ Documentation that certifies that the agency is a not-for-profit 501(c)(3) (if applicable)  |
| 4.        |         | ☐ Organization's budget for its 2021 fiscal year (if applicable)  |
| 5.        |         | ☐ Organization's independently audited financial statements for its past two fiscal years. If an independent audit has not been conducted for those years, a printout from your accounting system or an accountant's compilation is acceptable.   |
| 6.        |         | ☐ Resolution or certified copy of the minutes of the organization's governing body reflecting approval of the organization's application and potential entry into a contract with the Mobile County Commission and of the expenditures described in the program statement/scope of work |
| 7.        |         | ☐ Proof of E-verify enrollment to include copy of MOU for Employers with electronic verification by Department of Homeland Security   |



# COMMUNITY DEVELOPMENT BLOCK GRANT PY2021 CAPITAL PROJECT APPLICATION FORM

| Legal Name of Organizat                                | ion:  |                                 |   |
|--|---|---------------------------------|---|
| Address:   |   | Telepho                         | ne:   |
| Email:   |   |                                 |   |
| DUNS Number:   |   | EIN Number:                     |   |
| Name and Title of Person                               | ns authorized to execute co                                   | ontracts on behalf of the Organ | nization:   |
| Name:  |   | Title:                          |   |
| Please indicate type of o                              | rganization:   Munic  | ipality 🔲 For Profit            | ☐ Not for Profit  |
| construction projects sho<br>include any information t | ould include all items to contract will give a clear, concise | nstruct including professional  | and a cost estimate. Cost estimate of engineering/architectural fees. Pleas esentation of your project and agency       |
| Attach separate sheet if                               |   |                                 |   |
| ·  |   | tailed man for project locatio  | n & proposed improvements.)   |
|  |   |                                 |   |
|  | ted: \$   |                                 |   |
| Other Funds:   | \$  | (include any other funding th   | nat may be available)   |
| Total Project Cost:                                    | \$  |                                 |   |
| benefit from the propos                                | ed project. Beneficiaries                                     | will vary based on the type of  | te income beneficiaries who will be<br>f project. Please estimate <u>either</u> the<br>based on what is known about the |
| Number of Housing Unit                                 | s/Households to be served                                     | and/or Number                   | er of Persons   |
|  | 750,000 or more of Federa                                     | Il funds in a calendar year?    | □ Y □ N   |



| If yes, complete the fo                            | llowing (attach  | separate sheet if nee  | ded):                  |                     |                    |
|--|------------------|--|------------------------|---------------------|--------------------|
| Funding Source                                     | Years            | Amount   | *Name of Proje         | ct                  | Completion Status  |
|  |                  |  |                        |                     |                    |
|  |                  | <del></del>  |                        | ·                   |                    |
| Did your agency have a                             | a "Single Audit" | (per Subpart F of the  | e OMB Uniform Guida    | nce) performed i    | n that year?       |
| Authorized signature                               | only:            |  |                        |                     |                    |
| Submitted by:                                      |                  |  |                        |                     |                    |
| Signat   | ure              |  | Print Name             |                     |                    |
| Date Submitted:                                    |                  |  | _                      |                     |                    |
| NOTE: Mobile County st                             | taff may contact | you for additional info  | rmation Submitting a r | reallest does not a | uarantee funding   |
| A mailed or hand-deliv<br>submittal (i.e., saved o | on a compact di  | obile County Commis<br>South<br>Mobile G<br>205 Gov<br>Mobile, Ala | •                      |                     | y a PDF copy of th |
|  |                  | FOR USE BY MOE   | ILE COUNTY STAFF O     | NLY                 |                    |
| Census Tract/Block Gro                             | oup % Lov        | v/Mod El   | gible Activity?        | Estimate            | ed Cost            |
|  |                  |  | s 🗆 No                 | \$                  |                    |
| Survey required: [                                 | □ Yes □          | l No   |                        |                     |                    |
| Reason if Ineligible:                              |                  |  |                        |                     |                    |



# FORM W-9

Please submit a completed Form W-9 using the following link: <a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf">https://www.irs.gov/pub/irs-pdf/fw9.pdf</a>



# **DESIGNATION OF RESPONSIBLE OFFICIALS FOR CDBG**

| Applicant                               | Project Name  |
|---|---|
| Please provide an e-mail address for th | mailed to the Mayor/Board Chairperson at the applicant's official address<br>e Mayor/Board Chairperson if one is available or any special mailing<br>to be copied to a project management person, please complete the |
| MAYOR/BOARD CHAIRPERSON                 |   |
| Name                                    |   |
| Address                                 |   |
| City/State/Zip                          |   |
| Telephone Number                        | E-Mail Address  |
| CDBG PROJECT MANAGEMENT PERSON          |   |
| Name                                    |   |
| Address                                 |   |
| City/State/Zip                          |   |
| Telephone Number                        | E-Mail Address  |
| DESIGNATION OF EQUAL OPPORTUNITY O      | DFFICER   |
| Name                                    |   |
| Address                                 |   |
| City/State/Zip                          |   |
| Telephone Number                        | E-Mail Address  |
| Signed<br>Mayor/Board Chairperson       |   |
| iviayor, boara citali person            |   |



## **FFATA REPORT**

Federal Funding Accountability and Transparency Act of 2006 (FFATA)

The FFATA requires that all Federal program recipients (or awardees) report award information on any first-tier subawardees (or subrecipients) totaling \$25,000 or more, and, in some cases, to report information on the names and total compensation of the five most highly compensated executives of the recipients. Further information regarding this subaward reporting can be found at <a href="https://www.fsrs.gov">www.fsrs.gov</a>. This Act also requires all potential subrecipients to acquire and provide a Data Universal Numbering System (DUNS) number by applying online at <a href="https://www.dnb.com">www.dnb.com</a>.

| Please fill out the items below for proposed projects us  | sing CDBG funds:  |
|---|---|
| Subrecipient Name:  |   |
| Subrecipient Address:   |   |
| Federal EIN or W-9:   | DUNS Number:  |
| Please mark your answers below:   |   |
| Does your agency receive more than 80% of its funding  If NO – Stop. You do not need to report.   | g (revenue) from the Federal Government?                |
| ☐ If YES – Go to the next question:   |   |
| Does your agency receive more than \$25M annually fro ☐ If NO – Stop. You do not need to report.  | om the Federal Government?                              |
| ☐ If YES – Go to the next question:   |   |
| Is the executive compensation information already ava ☐ If Yes – Stop. You do not need to report. | ilable through reporting to the SEC?                    |
| ☐ If NO – Please provide the names and comp   | pensation of the five most highly compensated officers: |
| 1   | \$  |
| 2   | \$  |
| 3   | \$  |
| 4   | \$  |
| 5   | \$  |
| Total Compensation of Officers:   | \$  |



### **CERTIFICATION REGARDING SECTION 504 OF THE REHABILITATION ACT OF 1973**

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination against persons with disabilities in the operation of programs receiving Federal financial assistance. HUD regulations implementing Section 504 contain accessibility requirements for new construction and rehabilitation of housing as well as requirements for ensuring that the programs themselves are operated in a manner that is accessible to and usable by persons with disabilities. Both individual units and the common areas of buildings must be accessible under Section 504.

Section 504 states that "no qualified individuals with a disability in the United States shall be excluded from, denied the benefits of, or be subject to discrimination under" any program or activity that receives Federal financial assistance. Requirements common to these regulations include program accessibility, effective communication with people who have hearing or vision disabilities, and accessible new construction and alterations (See 24 CFR Part 8). Further information concerning compliance with any of these requirements may be obtained through the HUD web page: <a href="https://www.hud.gov/programdescription/sec504">https://www.hud.gov/programdescription/sec504</a>.

## Signature and Certification:

The undersigned certifies that it has read and understands all of its obligations under the Section 504 requirements. The undersigned acknowledges that this certification will be relied upon by the Mobile County Commission in its review and approval of proposed funding and any misrepresentations of information or failure to comply with any conditions stated in this certification could result in disqualification of the application, disallowance of reimbursement requests, or termination of CDBG contract. The undersigned also agrees to cooperate in any compliance review and to provide reasonable access to the premises of all places of business and employment and to records, files, information, and employees therein to Mobile County Commission for reviewing compliance with Section 504 requirements.

| Printed Name of Signer  | Name of Agency  |
|---|---|
| Signature of Authorized Signing Official/Representative   | Date  |
| ☐ Not in compliance with Section 504/ADA requirement Evaluation & Transition Plan (attach separate explanation) | nts, but in compliance with Applicant- approved ADA Self-<br>n) |
| ☐ Not in compliance with Section 504/ADA requirement  | nts, but seeking CDBG funds to address Section 504 issues       |
| ☐ Good faith self-certification   |   |



# CERTIFICATION REGARDING COMPLIANCE WITH MINORITY BUSINESS ENTERPRISE (MBE), WOMEN'S BUSINESS ENTERPRISE (WBE), AND SMALL BUSINESS CONTRACTING REQUIREMENTS

A. The organization listed below certifies that it will comply with 2 CFR Part 200.321, as follows:

The organization will take all necessary affirmative steps to assure that minority firms, women's business enterprises, and labor surplus area firms are used when possible. Affirmative steps shall include:

Positive efforts shall be made by the organization to utilize small businesses, minority-owned firms, and women's business enterprises, whenever possible. Recipients of CDBG funds shall take all of the following steps to further this goal:

- (1) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
- (2) Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
- (3) Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- (4) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises;
- (5) Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce; and
- (6) Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (1) through (5) of this section.

The organization further certifies that it will submit to the Mobile County Commission at the time of project completion a report of the MBE and WBE status of all subcontractors to be paid with CDBG funds in a format to be provided by the County.

| Signature of Authorized Signing Official/Representative | <br>Date       |
|---|----------------|
| Printed Name of Signer                                  | Name of Agency |



# <u>CERTIFICATION REGARDING DEBARMENT, SUSPENSION, PROPOSED DEBARMENT, INELIGIBILITY AND OTHER</u> <u>RESPONSIBILITY MATTERS</u>

- 1. By signing and submitting this certification, the undersigned certifies to the best of its knowledge and belief, that it and its principals:
  - a) Are not presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by any Federal agency;
  - b) Have not within a three-year period preceding this award, been convicted of or had a civil judgment rendered against them for: commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, local) contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, or receiving stolen property;
  - c) Are not presently indicted or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in Section (1.b) of this certification;
  - d) Have not within a three-year period preceding this award, had one or more contracts (Federal, State, or local) terminated for cause or default;
  - e) Will not knowingly enter into any subcontract with a person who is, or organization that is, debarred, suspended, proposed for debarment, or declared ineligible for award of contracts by any Federal agency; and
  - f) Will require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts; subgrants; and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
- 2. "Principals", for the purposes of this certification, means officers, directors, owners, partners, and persons having primary management or supervisory responsibilities within a business entity.
- 3. Where the undersigned is unable to certify to the statements listed in Section (1) in this certification, an explanation shall be attached. The Contractor shall provide immediate written notice if, at any time prior to or during the negotiated contract period, the Contractor learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 4. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render, in good faith, the certification required by Section (1) of this provision. The knowledge and information of Contractor is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

This certification submitted to the Mobile County Commission is a material representation of fact upon which reliance was placed when entering into a contract agreement. If it is later determined that the Contractor knowingly rendered an erroneous certification, in addition to other remedies available, the Mobile County Commission may terminate the contract for default.

| Signature of Authorized Signing Official/Representative |                | ate |
|---|----------------|-----|
| Printed Name of Signer                                  | Name of Agency |     |



## **CERTIFICATION REGARDING LOBBYING**

By signing and submitting this certification, the undersigned certifies to the best of its knowledge and belief that it and its principals shall be in compliance with the following:

- Agency shall not use, and shall require its subcontractors not to use, any of the funds, personnel, or materials received in connection with any agreement (contracts, grants, cooperative agreements) awarded by the Mobile County Commission to influence or attempt to influence any governmental decision or election in any manner whatsoever. This prohibition shall apply to any decision of any kind to be made by any electorate, legislative body, agency, bureau, board, commission, district, or any other instrument of Federal, State, or local government. The term "influence or attempt to influence" shall mean the making, with the intent to influence, any communication to or appearance before any officer, employee, or appointee of any governmental entity, as well as any communication made to any electorate, regarding any ballot measure or candidate election.
- 2) Agency acknowledges that Federal funds received from the Mobile County Commission for individual program(s) have been provided pursuant to a Federal grant, and shall comply with the laws set forth at 31 USC section 1352 and 2 CFR Part 200 Subtitle B, Chapter IV, Part 418.
- Agency shall disclose any funds from any other source which have been paid by Contractor or its principals and agents within the last year to influence or attempt to influence decisions of the Federal government by completing, signing, and submitting Standard Form LLL, "Disclosure of Lobbying Activities". Contractor understands that the duty to disclose lobbying activities is a continuing requirement, and therefore shall make such disclosures at the end of each calendar quarter in which there occurs any event requiring disclosure.
- 4) Agency shall require the language of this certification be included in the award documents for all subawards at all tiers (including subagreements, subcontracts, subgrants, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification submitted to the Mobile County Commission is a material representation of fact upon which reliance was placed when entering into a contract agreement. If it is later determined that the agency rendered an erroneous certification, in addition to other remedies available, the Mobile County Commission may terminate the contract for default.

| Signature of Authorized Signing Official/Representative | Date           |  |
|---|----------------|--|
| Printed Name of Signer                                  | Name of Agency |  |



## **CERTIFICATION FOR A DRUG-FREE WORKPLACE**

- A. Every person or agency awarded a contract or grant by the Mobile County Commission for the provision of services shall certify to the County that it will provide a drug-free workplace. By signing and submitting this certification, the undersigned certifies that it and its subcontractors shall provide a drug-free workplace by doing all of the following:
  - 1) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited in the person's or organization's workplace and specifying the actions that will be taken against employees for violations of the prohibition.
  - 2) Establishing a drug-free awareness program to inform employees about all of the following:
    - a) The dangers of drug abuse in the workplace.
    - b) The person's or organization's policy of maintaining a drug-free workplace.
    - c) Any available drug counseling, rehabilitation, and employee assistance programs.
    - d) The penalties that may be imposed upon employees for drug abuse violations.
  - 3) Posting the statement required by Section (A.1) of this certification in a prominent place at the agency's main office. For projects large enough to necessitate a construction trailer at the job site, the required signage would also be posted at the job site.
- B. Agencies shall include language in each subcontract agreement which indicates the subcontractor's agreement to abide by the provisions of Sections (A.1) through (A.3) of this certification. Agencies and subcontractors shall be individually responsible for their own drug-free workplace programs.

This certification submitted to the Mobile County Commission is a material representation of fact upon which reliance was placed when entering into a contract agreement. If it is later determined that the agency knowingly rendered an erroneous certification, in addition to other remedies available, the Mobile County Commission may terminate the contract for default.

| Signature of Authorized Signing Official/Representative | Date           |
|---|----------------|
| Printed Name of Signer                                  | Name of Agency |



# MOBILE COUNTY CONFLICT OF INTEREST DISCLOSURE FORM

Answer all questions or respond "Not Applicable" or "NA" if a question does not apply. Attach additional pages as needed to fully disclose requested information.

| 1.       | Name of Agency/Organization:   |  |  |
|----------|--|--|--|
| 2.       | Physical Street Address of Agency/Organization:  |  |  |
| 3.       | Phone Number of Agency/Organization:   |  |  |
| 4.       | Key Contact Person for Agency/Organization:  |  |  |
|          | Phone Number and Email Information:  |  |  |
| 5.       | . Identify all officers and directors as well as other key persons involved with decision making of the Agency/Organization (attach list):   |  |  |
| 6.<br>7. | Are any of these persons Mobile County employees?   Yes   No  Are any of these persons related by blood or by marriage to Mobile County officials or employees?                                    |  |  |
|          | ☐ Yes ☐ No   |  |  |
|          | If yes, list all pertinent relationships   |  |  |
| 8.       | Has the Agency/Organization retained, hired, or paid any person or organization to assist in its efforts to obtain funding from Mobile County? $\square$ Yes $\square$ No (If yes, identify below) |  |  |
|          | Name of Key Person:  |  |  |
|          | Firm name:   |  |  |
|          | Address:   |  |  |
|          | Phone Number and Email Information:  |  |  |
| 9.       | If applicable, identify any business or organization in which the following apply (attach separate list if   |  |  |

necessary):



| Print Titl           | le/Position:  | Date:  |
|----------------------|---|--|
| Signatu              | re:   | Print Name:  |
| am awar<br>criminal, | re that any false, fictitious, or fraudulent inform | ge and belief that the report is true, complete, and accurate. ation, or the omission of any material fact, may subject me to se statements, false claims, or otherwise. (U.S. Code Title 18 -3812). |
| c)                   | The Agency/Organization or any of its office        | rs, directors, or its key personnel is a partner:  |
| b)                   | The Agency/Organization or any of its officers      | , directors, or key personnel serves as an officer or director:  |
| a)                   | The Agency/Organization or any of its officers,     | directors, or key personnel owns 5% or more of the business  |

