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# **TERREBONNE PARISH COUNCIL**

## **COMMUNITY DEVELOPMENT AND PLANNING COMMITTEE**

**Mr. Dirk J. Guidry**  
**Mr. Al Marmande**      **Chairman**  
**Mr. John Navy**      **Vice-Chairman**  
**Ms. Arlanda Williams**   **Member**  
**Mr. Gerald Michel**      **Member**  
**Mr. Scotty Dryden**      **Member**  
**Ms. Christa Duplantis-** **Member**  
**Prather**      **Member**  
**Mr. Steve Trosclair**      **Member**  
**Mr. Darrin W. Guidry,** **Member**  
**Sr.**



In accordance with the Americans with Disabilities Act, if you need special assistance, please contact Venita H. Chauvin, Council Clerk, at (985) 873-6519 describing the assistance that is necessary.

### **AGENDA**

June 11, 2018  
5:40 PM

Parish Council Meeting Room

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**NOTICE TO THE PUBLIC:** If you wish to address the Council, please complete the "Public Wishing to Address the Council" form located on either end of the counter and give it to either the Chairman or the Council Clerk prior to the beginning of the meeting. Individuals addressing the council should be respectful of others in their choice of words and actions. Thank you.

**ALL CELL PHONES, PAGERS AND ELECTRONIC DEVICES USED FOR COMMUNICATION  
SHOULD BE SILENCED FOR THE DURATION OF THE MEETING**

**INVOCATION**

**PLEDGE OF ALLEGIANCE**

**CALL MEETING TO ORDER**

**ROLL CALL**

- 1. RESOLUTION:** Authorizing the Parish President to execute all necessary documents to submit an application for FY 2018 Supplemental Funding to the Administration for Children and Families for the Head Start Program.
- 2. RESOLUTION:** Obligating the necessary funding under the Terrebonne Parish Flood Hazard Mitigation Program/Hurricane Rita, Project No 1603c-109-0010 to complete the elevation of 3827 Grand Caillou Road, Houma, LA 70363 by the owner Hosea Chatman.

3. Discussion and possible action regarding days and times libraries are open in the bayou communities.
4. Adjourn

Category Number:  
Item Number:



Monday, June 11, 2018

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**Item Title:**  
INVOCATION

**Item Summary:**  
INVOCATION

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Category Number:  
Item Number:



Monday, June 11, 2018

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**Item Title:**

PLEDGE OF ALLEGIANCE

**Item Summary:**

PLEDGE OF ALLEGIANCE

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Category Number:  
Item Number: 1.



Monday, June 11, 2018

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**Item Title:**

Head Start Supplemental Funding Application

**Item Summary:**

RESOLUTION: Authorizing the Parish President to execute all necessary documents to submit an application for FY 2018 Supplemental Funding to the Administration for Children and Families for the Head Start Program.

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**ATTACHMENTS:**

| <b>Description</b> | <b>Upload Date</b> | <b>Type</b>       |
|--------------------|--------------------|-------------------|
| Resolution         | 6/1/2018           | Resolution        |
| ex summary         | 6/1/2018           | Executive Summary |
| Application        | 6/1/2018           | Backup Material   |

## Resolution

A Resolution Authorizing the Parish President to execute all necessary documents to submit an application for FY 2018 Supplemental Funding to the Administration for Children and Families for the Head Start Program in Terrebonne Parish and to execute the contract for funding once approved.

WHEREAS, it is necessary that an application be submitted by the governing body and the Head Start Policy Council.

NOW THEREFORE BE IT RESOLVED that the Terrebonne Parish Council, on behalf of the Terrebonne Parish Consolidated Government does hereby authorize the Parish President, Gordon E. Dove, to sign and submit the application to Administration for Children and Families to provide Head Start services.

BE IT FURTHER RESOLVED that the Terrebonne Parish Council on behalf of the Terrebonne Parish Consolidated Government does hereby authorize the Parish President to sign any certification, modifications, etc. that may be associated with the implementation of this agreement.



**EXECUTIVE SUMMARY**

(REQUIRED FOR ALL SUBMISSIONS)

|   |
|---|
| <b>PROJECT TITLE</b>  |
| Head Start Supplemental Funding Application   |
| <b>PROJECT SUMMARY (200 WORDS OR LESS)</b>  |
| Authorizing the Parish President to execute all necessary documents to submit an application for FY 2018 Supplemental Funding to the Administration for Children and Families for the Head Start Program. |

|  |
|--|
| <b>PROJECT PURPOSE &amp; BENEFITS (150 WORDS OR LESS)</b>                |
| To provide Head Start services in 10 classrooms which serve 170 children |
| <b>TOTAL EXPENDITURE</b>   |
| Supplemental Funds of \$35,303.00  |
| <b>AMOUNT SHOWN ABOVE IS: (CIRCLE ONE)</b>                               |
| <input checked="" type="radio"/> ACTUAL <input type="radio"/> ESTIMATED  |
| <b>IS PROJECT READY BUDGETED: (CIRCLE ONE)</b>                           |
| N/A      NO      YES      IF YES AMOUNT BUDGETED: \$1,942,706.00         |

|  |
|--|
| <b>COUNCIL DISTRICT(S) IMPACTED (CIRCLE ONE)</b>   |
| <input checked="" type="radio"/> PARISHWIDE      1      2      3      4      5      6      7      8      9 |

*David Ward*      6/1/18

Signature

Date

### Application for Federal Assistance SF-424

**\* 1. Type of Submission:**

- ☐ Preapplication  
☒ Application  
☐ Changed/Corrected Application

**\* 2. Type of Application:**

- ☐ New  
☐ Continuation  
☒ Revision

**\* If Revision, select appropriate letter(s):**

Increase Award

**\* Other (Specify):**

**\* 3. Date Received:**

**4. Applicant Identifier:**

06CH010297

**5a. Federal Entity Identifier:**

N/A

**5b. Federal Award Identifier:**

06CH010297

**State Use Only:**

**6. Date Received by State:**

**7. State Application Identifier:**

**8. APPLICANT INFORMATION:**

**\* a. Legal Name:**

TERREBONNE PARISH CONSOLIDATED GOVERNMENT

**\* b. Employer/Taxpayer Identification Number (EIN/TIN):**

726001390

**\* c. Organizational DUNS:**

045774333

**d. Address:**

**\* Street1:**

809 Barrow St

**Street2:**

**\* City:**

Houma

**County/Parish:**

Terrebonne Parish

**\* State:**

LA: Louisiana

**Province:**

**\* Country:**

USA: UNITED STATES

**\* Zip / Postal Code:**

70360-4722

**e. Organizational Unit:**

**Department Name:**

Housing and Human Services

**Division Name:**

Head Start

**f. Name and contact information of person to be contacted on matters involving this application:**

**Prefix:**

Ms.

**\* First Name:**

Diane

**Middle Name:**

Sappenfield

**\* Last Name:**

Powell

**Suffix:**

N/A

**Title:**

Head Start Administrator

**Organizational Affiliation:**

Terrebonne Parish Consolidated Government

**\* Telephone Number:**

(985) 580-7273

**Fax Number:**

(985) 873-6842

**\* Email:**

dpowell@tpcg.org



**Application for Federal Assistance SF-424**

**\* 9. Type of Applicant 1: Select Applicant Type:**

County Government

**Type of Applicant 2: Select Applicant Type:**

**Type of Applicant 3: Select Applicant Type:**

**\* Other (specify):**

**\* 10. Name of Federal Agency:**

ACF-Head Start

**11. Catalog of Federal Domestic Assistance Number:**

93.600

**CFDA Title:**

Head Start

**\* 12. Funding Opportunity Number:**

eGrants-N/A

**\* Title:**

N/A

**13. Competition Identification Number:**

Not Applicable

**Title:**

Not Applicable

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

All of Terrebonne Parish

**\* 15. Descriptive Title of Applicant's Project:**

Head Start

Attach supporting documents as specified in agency instructions.

**Application for Federal Assistance SF-424****16. Congressional Districts Of:**

\* a. Applicant LA-003

b. Program/Project LA-003

Attach an additional list of Program/Project Congressional Districts if needed.

**17. Proposed Project:**

\* a. Start Date: 01/01/2018

\* b. End Date: 12/31/2018

**18. Estimated Funding (\$):**

|                     |        |
|---------------------|--------|
| * a. Federal        | 35,303 |
| * b. Applicant      | 8,826  |
| * c. State          |        |
| * d. Local          |        |
| * e. Other          | 0      |
| * f. Program Income |        |
| * g. TOTAL          | 44,129 |

**\* 19. Is Application Subject to Review By State Under Executive 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 selected 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 ☒ No

If "Yes", provide explanation and attach

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)

☐ \*\* 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: Mr \* First Name: Gordon

Middle Name:

\* Last Name: Dove

Suffix:

\* Title: Parish President

\* Telephone Number: (985) 873-6401 Fax Number:

\* Email: gdove@tpcg.org

\* Signature of Authorized Representative: \* Date Signed:

# BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006  
Expiration Date: 01/31/2019

## SECTION A - BUDGET SUMMARY

| Grant Program Function or Activity (a) | Catalog of Federal Domestic Assistance Number (b) | Estimated Unobligated Funds |                 | New or Revised Budget |                 |           |
|--|---|-----------------------------|-----------------|-----------------------|-----------------|-----------|
|  |   | Federal (c)                 | Non-Federal (d) | Federal (e)           | Non-Federal (f) | Total (g) |
| 1. Read Start: Program Operations      | 93.600  | \$                          | \$              | \$ 35,303             | \$ 8,826        | \$ 44,129 |
| 2. Read Start: TTA                     | 93.600  |                             |                 | 0                     | 0               | 0         |
| 3.                                     |   |                             |                 |                       |                 |           |
| 4.                                     |   |                             |                 |                       |                 |           |
| 5. Totals                              |   | \$ 0                        | \$ 0            | \$ 35,303             | \$ 8,826        | \$ 44,129 |

# SECTION B - BUDGET CATEGORIES

| 6. Object Class Categories             | GRANT PROGRAM, FUNCTION OR ACTIVITY      |                           |     |     | Total<br>(5) |
|--|--|---------------------------|-----|-----|--------------|
|  | (1)<br>Head Start:<br>Program Operations | (2)<br>Head Start:<br>ITA | (3) | (4) |              |
| a. Personnel                           | \$ 26,338                                | \$ 0                      | \$  | \$  | \$ 26,338    |
| b. Fringe Benefits                     | 6,642                                    | 0                         |     |     | 6,642        |
| c. Travel                              | 0  | 0                         |     |     | 0            |
| d. Equipment                           | 0  | 0                         |     |     | 0            |
| e. Supplies                            | 0  | 0                         |     |     | 0            |
| f. Contractual                         | 0  | 0                         |     |     | 0            |
| g. Construction                        | 0  | 0                         |     |     | 0            |
| h. Other                               | 2,323                                    | 0                         |     |     | 2,323        |
| i. Total Direct Charges (sum of 6a-6h) | 35,303                                   | 0                         |     |     | 35,303       |
| j. Indirect Charges                    | 0  | 0                         |     |     | 0            |
| k. TOTALS (sum of 6i and 6j)           | \$ 35,303                                | \$ 0                      | \$  | \$  | \$ 35,303    |
| 7. Program Income                      | \$                                       | \$                        | \$  | \$  | \$           |

Authorized for Local Reproduction

## SECTION C - NON-FEDERAL RESOURCES

| (a) Grant Program                 | (b) Applicant | (c) State | (d) Other Sources | (e) TOTALS |
|-----------------------------------|---------------|-----------|-------------------|------------|
| 8. Head Start: Program Operations | \$ 8,826      | \$        | \$                | \$ 8,826   |
| 9. Head Start: TTA                |               |           |                   | 0          |
| 10.                               |               |           |                   |            |
| 11.                               |               |           |                   |            |
| 12. TOTAL (sum of lines 8-11)     | \$ 8,826      | \$ 0      | \$ 0              | \$ 8,826   |

## SECTION D - FORECASTED CASH NEEDS

|                                    | Total for 1st Year | 1st Quarter | 2nd Quarter | 3rd Quarter | 4th Quarter |
|------------------------------------|--------------------|-------------|-------------|-------------|-------------|
| 13. Federal                        | \$ 35,303          | \$ 8,826    | \$ 8,826    | \$ 8,826    | \$ 8,826    |
| 14. Non-Federal                    | \$ 8,826           | \$ 2,206    | \$ 2,207    | \$ 2,206    | \$ 2,207    |
| 15. TOTAL (sum of lines 13 and 14) | \$ 44,129          | \$ 11,032   | \$ 11,032   | \$ 11,032   | \$ 11,033   |

## SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

| (a) Grant Program                | FUTURE FUNDING PERIODS (YEARS) |            |           |            |
|----------------------------------|--------------------------------|------------|-----------|------------|
|                                  | (b) First                      | (c) Second | (d) Third | (e) Fourth |
| 16.                              | \$                             | \$         | \$        | \$         |
| 17.                              |                                |            |           |            |
| 18.                              |                                |            |           |            |
| 19.                              |                                |            |           |            |
| 20. TOTAL (sum of lines 16 - 19) | \$                             | \$         | \$        | \$         |

## SECTION F - OTHER BUDGET INFORMATION

|                     |  |                       |  |
|---------------------|--|-----------------------|--|
| 21. Direct Charges: |  | 22. Indirect Charges: |  |
| 23. Remarks:        |  |                       |  |

**U.S. DEPARTMENT OF HEALTH AND HUMAN  
SERVICES COMPENDIUM OF REQUIRED  
CERTIFICATIONS AND ASSURANCES**

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**Office of Head Start**

Updated July 29, 2014

# U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES COMPENDIUM OF REQUIRED CERTIFICATIONS AND ASSURANCE

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# U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES COMPENDIUM OF REQUIRED CERTIFICATIONS AND ASSURANCE

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## SF424B Assurances – Non-Construction Programs

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.



## U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES COMPENDIUM OF REQUIRED CERTIFICATIONS AND ASSURANCE

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9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

# U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES COMPENDIUM OF REQUIRED CERTIFICATIONS AND ASSURANCE

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## Certification Regarding Lobbying

### Certification for Contracts, Grants, Loans, and Cooperative Agreements

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal 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 Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form- LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall 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. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### Statement for Loan Guarantees and Loan Insurance

If any 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 Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### Regarding Compliance with Compensation Cap (Level II of the Executive Schedule)

Federal funds will not be used to pay any part of the compensation of an individual employed by a Head Start and/or Early Head Start agency if that individual's compensation exceeds the rate payable for Level II of the Executive Schedule.

# U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES COMPENDIUM OF REQUIRED CERTIFICATIONS AND ASSURANCE

## Certification of Filing and Payment of Federal Taxes

As required by the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriation Act, 2008 (Public Law 110-161, Division G, Title V, section 523), as a prospective financial assistance recipient entering into a grant or cooperative agreement of more than \$5,000,000, I, as the duly authorized representative of the applicant, do hereby certify to the best of my knowledge and belief, that:

1. The applicant has filed all Federal tax returns required during the three years preceding this certification
2. The applicant has not been convicted of a criminal offense pursuant to the Internal Revenue Code of 1986 (U.S. Code - Title 26, Internal Revenue Code)
3. The applicant has not, more than 90 days prior to this certification, been notified of any unpaid Federal tax assessment for which the liability remains unsatisfied, unless the assessment is the subject of an installment agreement or offer in compromise that has been approved by the Internal Revenue Service and is not in default, or the assessment is the subject of a non-frivolous administrative or judicial proceeding.

## Submission Statement

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)

☐ \*\* 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 Name:   
Middle Name:   
\* Last Name:   
Suffix:

\* Title:

\* Telephone Number:  Fax Number:

\* Email:

\* Signature of Authorized Representative:  \* Date Signed:

\* Submitted by:  Date Submitted:

**Terrebonne Parish Consolidated Government  
FY 2018 Supplemental Cost of Living Adjustment (COLA)  
06CH010297  
NARRATIVE AND BUDGET JUSTIFICATIONS**

**Supplemental Cost-of-Living Adjustment (COLA)**

The Consolidated Appropriations Act, 2018 approved a Cost of Living Adjustment (COLA) of 2.6 percent for the Head Start Program. It is proposed that the COLA (\$35,303.00) granted through the Consolidated Appropriations Act be used to grant adjustments to salaries and fringe benefits for the Head Start employees and funds to be used to offset increased costs health insurance costs.

The documentation of how the COLA is broken down will be uploaded onto the Head Start Enterprise System. It is a spreadsheet listing the employees by name and content area with their hourly rates and the breakdown of how the 2.6% COLA increase will be allocated.

There was an increase to the cost of the Group Health Insurance premiums. The funds not allocated to salaries and fringes will be used to offset this increase cost to the Head Start grant.

**SUPPLEMENTAL COLA Increase**

**A. PERSONNEL**

|                      |              |
|----------------------|--------------|
| Salary for 2.6% COLA | \$ 28,661.42 |
|----------------------|--------------|

**B. FRINGE BENEFITS**

|               |             |
|---------------|-------------|
| FICA/Medicare | \$ 2,192.60 |
|---------------|-------------|

|         |             |
|---------|-------------|
| Pension | \$ 2,149.61 |
|---------|-------------|

|                        |           |
|------------------------|-----------|
| Workmen's Compensation | \$ 278.98 |
|------------------------|-----------|

|              |           |
|--------------|-----------|
| Unemployment | \$ 429.92 |
|--------------|-----------|

|                       |             |
|-----------------------|-------------|
| Total Fringe Benefits | \$ 5,051.11 |
|-----------------------|-------------|

|                 |             |
|-----------------|-------------|
| Group Insurance | \$ 1,590.47 |
|-----------------|-------------|

|               |              |
|---------------|--------------|
| Total Fringes | \$ 35,303.00 |
|---------------|--------------|

|  |                     |
|--|---------------------|
| <b>TOTAL 2.6% SUPPLEMENTAL COLA Increase</b> | <b>\$ 35,303.00</b> |
|--|---------------------|

**NON FEDERAL SHARE (Cash and In-kind)**

Terrebonne Parish Consolidated Government understands its obligation to match the funds allocated to the Head Start budget. Terrebonne Parish Consolidated Government (TPCG) has committed to matching 8,826.00 for its share of the cost for the cost of living adjustment. General fund dollars will be used for this match requirement for salaries, fringe benefits and increased food costs. This match will be made with the committed funds in the FY 2018 Head Start Budget Application.

|                                      |                    |
|--------------------------------------|--------------------|
| <b>Total Non Federal Share Match</b> | <b>\$ 8,826.00</b> |
|--------------------------------------|--------------------|



Monday, June 11, 2018

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**Item Title:**

Elevation of 3827 Grand Caillou Road, Houma

**Item Summary:**

RESOLUTION: Obligating the necessary funding under the Terrebonne Parish Flood Hazard Mitigation Program/Hurricane Rita, Project No 1603c-109-0010 to complete the elevation of 3827 Grand Caillou Road, Houma, LA 70363 by the owner Hosea Chatman.

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**ATTACHMENTS:**

| <b>Description</b> | <b>Upload Date</b> | <b>Type</b>       |
|--------------------|--------------------|-------------------|
| Executive Summary  | 6/6/2018           | Executive Summary |
| Memo               | 6/6/2018           | Cover Memo        |
| Resolution         | 6/6/2018           | Resolution        |
| Approval Letter    | 6/6/2018           | Backup Material   |
| Elevation Quote    | 6/6/2018           | Backup Material   |



## EXECUTIVE SUMMARY

(REQUIRED FOR ALL SUBMISSIONS)

| PROJECT TITLE  |
|--|
| Elevation of the property at 3827 Grand Caillou Road, Houma, LA 70363. |

| PROJECT SUMMARY (200 WORDS OR LESS)   |
|---|
| Resolution obligating the necessary funding under the Terrebonne Parish Flood Hazard Mitigation Program/Hurricane Rita, Project No 1603c-109-0010 to complete the elevation of 3827 Grand Caillou Road, Houma, LA 70363 by the owner Hosea Chatman. |

| PROJECT PURPOSE & BENEFITS (150 WORDS OR LESS)   |
|--|
| The purpose of this Resolution is approval of the elevation packets for the above property and owner; and obligating the necessary HMGP/Hurricane Rita funding to complete same. |

| TOTAL EXPENDITURE                        |           |           |                         |
|--|-----------|-----------|-------------------------|
| N/A                                      |           |           |                         |
| AMOUNT SHOWN ABOVE IS: (CIRCLE ONE)      |           |           |                         |
| ACTUAL – N/A                             |           | ESTIMATED |                         |
| IS PROJECTALREADY BUDGETED: (CIRCLE ONE) |           |           |                         |
| N/A                                      | <u>NO</u> | YES       | IF YES AMOUNT BUDGETED: |

| COUNCIL DISTRICT(S) IMPACTED (CIRCLE ONE) |   |   |   |   |   |   |   |          |   |
|---|---|---|---|---|---|---|---|----------|---|
| PARISHWIDE                                | 1 | 2 | 3 | 4 | 5 | 6 | 7 | <u>8</u> | 9 |

Chris Pulaski

Signature

6/5/2018

Date

6/8/2018

MEMO TO: Gordon E. Dove  
Parish President

FROM: Chris Pulaski, Director  
Planning and Zoning Department

SUBJECT: Request for Agenda Item June 11<sup>th</sup> and 13<sup>th</sup>, 2018  
Hurricane Rita Project No. 1603c-109-0010  
Property Elevation

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Attached is a Resolution requesting the elevation of the property at 3827 Grand Caillou Road, Houma, LA 70363 for Hosea Chatman under the FEMA funded Terrebonne Parish Traditional Hazard Mitigation Grant Program/Hurricane Rita, Project No 1603c-109-0010.

Should you have any questions or require additional information, please contact me at extension 6569.

Thanks,  
Chris

**OFFERED BY:**  
**SECONDED BY:**

**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION OBLIGATING THE NECESSARY FUNDING UNDER THE TERREBONNE PARISH FLOOD HAZARD MITIGATION GRANT PROGRAM/HURRICANE RITA, PROJECT NO 1603c-109-0010 TO COMPLETE THE STRUCTURE ELEVATION OF 3827 GRAND CAILLOU ROAD, HOUMA, LA 70363.**

**WHEREAS**, the Terrebonne Parish Consolidated Government has been formally notified by FEMA in a letter dated May 29, 2018 the funding for elevating this structure through the Hurricane Rita Flood Hazard Mitigation Grant Program (HMGP), Project No. 1603c-109-0010, the Parish can proceed with the mitigation of:

Address: 3827 Grand Caillou Road, Houma, LA 70363

Owned by: Hosea Chatman

**WHEREAS**, the grantee, the Governor's Office of Homeland Security has approved this structure for elevation in a letter June 2, 2018; and

**WHEREAS**, the Parish is the subgrantee; and

**WHEREAS**, the project will be implemented under the administrative guidance of Providence Engineering, formerly known as Higher Ground Flood Protection Services;;

**NOW, THEREFORE, BE IT RESOLVED**, by the Terrebonne Parish Council that the necessary funding under the Terrebonne Parish Flood Hazard Mitigation Grant Program/Hurricane Rita, Project No. 1603c-109-0010 be hereby obligated to mitigate the property above.





**FEMA**

May 29, 2018

James Waskom, Director  
Governor's Office of Homeland Security  
and Emergency Preparedness  
7667 Independence Blvd.  
Baton Rouge, LA 70806

Attn: Mr. Jeffrey Giering, State Hazard Mitigation Officer

Re: 1603-0179-LA  
Terrebonne Parish—Elevation/Pilot Reconstruction  
Scope of Work Modification and Budget Revision  
CFDA 97.039 Hazard Mitigation Grant Program (HMGP)

Dear Mr. Waskom:

This letter provides official notification that the U.S. Department of Homeland Security's Federal Emergency Management Agency (FEMA) approves your request dated March 14, 2018, for a Scope of Work (SOW) modification and budget revision for the Elevation/Pilot Reconstruction project. FEMA agrees with the additional analysis and information submitted by the recipient demonstrating the need to replace a withdrawn property with an alternate property, and to move funds between properties. There is no additional funding to the approved project.

The revised scope of work does not result in a change in the federal share for the project referenced above. The chart below reflects the funding summary.

| Summary of Funding | Federal      | Non-Federal | Total        |
|--------------------|--------------|-------------|--------------|
| Original           | \$10,295,685 | \$970,315   | \$11,266,000 |
| Amendment          | \$0          | \$0         | \$0          |
| Total              | \$10,295,685 | \$970,315   | \$11,266,000 |

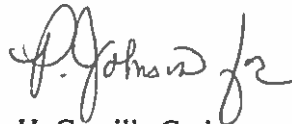
The properties included in this amendment are as follows:

| Property ID            | Property Address  | Latitude | Longitude | Mitigation Action |
|------------------------|-------------------|----------|-----------|-------------------|
| 1404 Dr. Beatrous Rd.  | Theriot, LA 70397 | 29.4526  | -90.7509  | Withdraw          |
| 3827 Grand Caillou Rd. | Houma, LA 70363   | 29.5015  | -90.6769  | Add               |

Mr. Waskom  
May 29, 2018  
Page 2

If you have any questions regarding the information, please contact Reginald Jefferson, HMA Specialist, at (225) 376-5364 or [Reginald.Jefferson@fema.dhs.gov](mailto:Reginald.Jefferson@fema.dhs.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "H. Crain" with a stylized flourish at the end.

H. Camille Crain  
HMA Branch Chief

Attachments: Obligation Report  
REC

# Elevation Quote

Type of Elevation: Slab Elevation  
 Homeowner: Josea Chatman  
 Address: 3827 Grand Caillou Rd.  
Houma, La. 70363  
 Phone No: 1.985.791.4901

Company: Davie Shoring  
 Contact: Ron Jackson License No: 39771  
 Address: #3 Veterans Blvd  
Kenner, La. 70062  
 Phone No: 504.464.4712

Work to be performed by elevation type:

## Slab Elevation:

- 1a Raise, shore and align the above named approx 2280 sq ft residence approx 8' feet to satisfy local BFE/ABFE/DFIRM (to include 18" freeboard if applicable) required elevation @ \$ 20.70 / sq. foot. \$ 47,210.00
- 2a Raise, shore and align the above named approx \_\_\_\_\_ square foot residence an additional \_\_\_\_\_ feet above the required BFE/ABFE/DFIRM (to include 1 foot freeboard if applicable) elevation @ \_\_\_\_\_/sq. foot. (for additional elevation height not required but requested by homeowner) \$ N/A
- 3a Install \_\_\_\_\_ linear feet of CMU block wall with stucco, including vents and access panel. (if home will use other material than block wall, please use line 6a and describe material used) \$ N/A
- 4a Pour approximately 318 feet of continuous steel reinforced concrete foundation measuring 24 inches wide by 18 inches thick. Concrete will be 4000 PSI \$ 15,900.00
- 5a Push 76 pilings to support existing slab under residence to point of refusal OR Install 600 new required pilings @ \$ 600 /piling \$ 45,600.00
- 6a Install 40 piers/columns @ \$ 500.00 /pier/columns \$ 20,000.00

## Slab Separation:

- 1b Raise, shore and align the above named approx \_\_\_\_\_ sq ft residence approx \_\_\_\_\_ feet to satisfy local BFE/ABFE/DFIRM (to include 1 foot freeboard if applicable) required elevation @ \$ \_\_\_\_\_/ sq. foot. \$ \_\_\_\_\_
- 2b Raise, shore and align the above named approx \_\_\_\_\_ square foot residence an additional \_\_\_\_\_ feet above the required BFE/ABFE/DFIRM (to include 1 foot freeboard if applicable) elevation @ \_\_\_\_\_/sq. foot. (for additional elevation height not required but requested by homeowner) \$ \_\_\_\_\_
- 3b Install \_\_\_\_\_ sq feet of platform framed floor system @ \$ \_\_\_\_\_/ sq. foot \$ \_\_\_\_\_
- 4b Install \_\_\_\_\_ required piers @ \$ \_\_\_\_\_ each or block wall @ \$ \_\_\_\_\_/ sq. foot \$ \_\_\_\_\_
- 5b Remove and replace \_\_\_\_\_ sq feet of exterior finish (vinyl, hardboard etc...) @ \$ \_\_\_\_\_/ sq. foot. \$ \_\_\_\_\_
- 6a Other \_\_\_\_\_ \$ \_\_\_\_\_

## Open Foundation (piling or post / columns) Elevation:

- 1c Raise, shore and align the above named approx \_\_\_\_\_ sq ft residence approx \_\_\_\_\_ feet to satisfy local BFE/ABFE/DFIRM (to include 1 foot freeboard if applicable) required elevation @ \$ \_\_\_\_\_/ sq. foot. \$ \_\_\_\_\_
- 2c Raise, shore and align the above named approx \_\_\_\_\_ square foot residence an additional \_\_\_\_\_ feet above the required BFE/ABFE/DFIRM (to include 1 foot freeboard if applicable) elevation @ \_\_\_\_\_/sq. foot. (for additional elevation height not required but requested by homeowner) \$ \_\_\_\_\_
- 3c Pour approximately \_\_\_\_\_ feet of continuous steel reinforced concrete foundation measuring \_\_\_\_\_ inches wide by \_\_\_\_\_ inches thick. Concrete will be \_\_\_\_\_ PSI \$ \_\_\_\_\_
- 4c Install \_\_\_\_\_ required piers @ \$ \_\_\_\_\_/pier \$ \_\_\_\_\_
- 5c Other \_\_\_\_\_ \$ \_\_\_\_\_

Initial \_\_\_\_\_

**Remainder of work to be performed:**

|    |   |            |
|----|---|------------|
| 1  | Pre-site prep   | \$ 2500.00 |
| 2  | Install <u>1</u> 4' X 4' and/or <u>0</u> 4' X 8' landings, rails & stairs at <u>2</u> entrances | \$ 7500.00 |
| 3  | Disconnect and reconnect sewer  | \$ 2300.00 |
| 4  | Disconnect and reconnect water  | \$ 2300.00 |
| 5  | Disconnect and reconnect electrical   | \$ 4500.00 |
| 6  | Construct electrical access platform (if necessary)   | \$ 1500.00 |
| 7  | Disconnect and reconnect gas  | \$ N/A     |
| 8  | Disconnect, raise, and reconnect air conditioning unit(s) to new elevation                      | \$ 1500.00 |
| 9  | Breakaway all necessary walks and drives; make repairs of same, damaged during the elevation.   | \$ 2500.00 |
| 10 | Install turnbuckle tie downs to stabilize against uplift and lateral movement                   | \$ N/A     |
| 11 | Post site cleanup   | \$ 2500.00 |

**Additions:**

|    |   |              |
|----|---|--------------|
| 12 | Install handicapped ramp with rails (if applicable)   | \$ N/A       |
| 13 | Furnish and install personnel lift (if applicable)  | \$ 18,000.00 |
| 14 | Elevation certificates (Pre and Post Elevation Certificates OR Post Elevation only)   | \$ 450.00    |
| 15 | Permit and Fees: City Remodel Permit (Plan Review/Mechanical Permit/Electrical Permit/Plumbing Permit/Certificate of Occupancy                  | \$ 1200.00   |
| 16 | Replace interior flooring lost in slab separation with standard grade flooring<br>_____ sq feet @ \$ _____/sq foot.                             | \$ N/A       |
| 17 | Remove and replace drywall (hang, tape, float and paint) lost in slab separation  | \$ N/A       |
| 18 | Remove and replace insulation lost in slab separation   | \$ N/A       |
| 19 | Remove and reinstall all necessary cabinetry, countertops, plumbing fixtures, doors and trim with slab separation                               | \$ N/A       |
| 20 | Remove and replace landscaping that would be damaged during the elevation process. Re-grade around perimeter of house; no fill added or removed | \$ N/A       |

**Other work required to be performed if applicable; please provide justification:**

|    |   |              |
|----|---|--------------|
| 21 | Slab under footprint structural support (Engineer Letter) | \$ 14,820.00 |
| 22 | _____   | \$ _____     |
| 23 | _____   | \$ _____     |

Please attach additional sheet if necessary

**TOTAL ELEVATION COST:**

\$ 190,280.00

All insurance; worker comp, liability, riggers and cargo, are included in this estimate. Copies will be provided upon request. Contractor agrees to remove all trash and rubbish caused by its work and is hereby permitted to salvage any materials for its own use.

- 24 Architectural & Engineering Plans Drawings to include foundation plans, front, side and rear elevation, before and after project. A & E plans will be provided by a certified engineer through the general contractor. Price not included in the TOTAL ELEVATION COST listed above.

Architectural &amp; Engineering Plans

\$ 1000.00

**TOTAL PROJECT COST:**

\$ 191,280.00

**5.9.18**

Contractor Representative

Date

Initial



Monday, June 11, 2018

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**Item Title:**

Days & times libraries open in bayou communities

**Item Summary:**

Discussion and possible action regarding days and times libraries are open in the bayou communities.

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**ATTACHMENTS:**

**Description**

Agenda Form

**Upload Date**

6/7/2018

**Type**

Backup Material

|                      |  |
|----------------------|--|
| <b>COMMITTEE:</b>    | <b>COMMUNITY DEVELOPMENT &amp; PLANNING</b>  |
| <b>MEETING DATE:</b> | 6-11-18  |
| <b>REQUESTED BY:</b> | Al Marmande  |
| <b>TOPIC:</b>        | Discussion and possible action regarding days and times libraries are open in the bayou communities. |

**BACKUP INFORMATION:**

|                  |                     |                    |
|------------------|---------------------|--------------------|
| <b>ATTACHED:</b> | <b>FORTHCOMING:</b> | <b>NOT NEEDED:</b> |
|------------------|---------------------|--------------------|

|                                |                |
|--------------------------------|----------------|
| <b>TO BE PREPARED BY:</b>      |                |
| <b>PERSON COMPLETING FORM:</b> | Venita Chauvin |
| <b>DATE:</b>                   | 06/07/18       |