County of Los Alamos GRANT ANALYSIS AND FINANCIAL MATRIX FORM

This form is to be completed and submitted for review and approval <u>prior</u> to applying for any grant on behalf of the County of Los Alamos.

GRANT APPLICANT:

Matrix Form Submission Status: <u>X</u> InitialRevised Name of Department: <u>Public Works Department</u>
Name of Department Head: Philo Shelton
Contact Information: Email: <u>philo.shelton@lacnm.us</u> Phone # 662-8106
Person Completing This Form: Desirae Lujan
Contact Information: Email: <u>desirae.lujan@lacnm.us</u> Phone # 662-8212
GRANT INFORMATION: Grant Agency/Source <u>NMDOT</u> _Name of Grant Program <u>NMDOT State Funds</u> Application Submission Deadline: 6/12/2019 Federal Grantor/Program Title: <u>NA</u> Federal CFDA Number: <u>NA</u> Check Only One: Federal Direct OR Federal Indirect State Grantor/Program Title: <u>State Legislative Funding</u> Private Organization: <u>NA</u> Grant Application: \$ <u>1,282,500 (95%)</u> Match: \$67,500 (5%) Total: \$ <u>1,350,000</u> Estimated Date for Notice of Award (if awarded): <u>August 2019</u> Does Grant include loan component? Yes No X Loan Terms (interest rate, years to repay) <u>NA</u>

Review and Approvals	
Department Head: Phi She T	6-3-19
Signature	Date
Other Department Head:	
Signature	Date
Budget Manager: Kan buddel	6/4/19
Signature	Date
Finance Grants Mgr:	06/04/19
Signature	Date /
County Manager: M for Harry Burgess	4/5/19 Date
	Submicire exercises of proved

Date to Council for Approval to Apply for Grant: _____ June 11, 2019

A. Describe the purpose of the grant and what will be accomplished:

The Grant would aid in the funding of the design, environmental study, construction management, and construction of the Trinity Drive Pavement Rehabilitation Project. The project was proposed due to the poor condition of the asphalt on Trinity Drive, but most importantly due to a 150 unit apartment housing development being proposed on the A12/A13 LASO site previously transferred to the County. The project would consist of pavement rehabilitation through a mill and overlay from Diamond Drive to Oppenheimer Drive. New sidewalks, drivepads, and curb & gutter will be installed where necessary, as well as all new pavement markings. The project is currently being studied by Santa Fe Engineering and a final design is expected in 2019.

B. Grant Budget

Expense Type	Grant	Match/In Kind Requirement	Budget Authority (Yes or No)
Operational	\$ 0	\$ 0	NA
Outside Services	\$ 0	\$ 0	NA
Capital Outlay	\$ 1,282,500	\$ 67,500	No
TOTAL	\$ 1,282,500	\$ 67,500	No

C. Source of Match/In Kind: <u>CIP (FY19 Carryover)</u>

D. Will a budget revision be required if grant awarded? Yes____X___No_____

E. Do the resources exist in your department to accomplish the goals of the grant? <u>Yes</u>

G. Frequency of reporting requirement Monthly <u>X</u>Quarterly___Annually_____

- H. Frequency of pay requests for reimbursement Monthly <u>X</u>_Quarterly_Annually_____
- I. What, if anything, is the County's obligation (personnel or \$) beyond the life of the grant? None, Trinity Drive is a State facility.
- K. Who within the department will have responsibility for this grant? Programmatic Reporting? <u>Desirae Lujan</u> Financial Reporting? <u>Desirae Lujan/David Griego</u>

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Name of Department Head: <u>Philo Shelton</u>	
Contact Information: Email: philo.shelton@lacnm.us Phone # 662-8106	
Person Completing This Form: Desirae Lujan	
Contact Information: Email: desirae.lujan@lacnm.us Phone # 662-8212	
GRANT INFORMATION: Grant Agency/Source <u>NMDOT</u> Name of Grant Program <u>NMDOT State Funds</u> Application Submission Deadline: <u>6/12/2019</u> Federal Grantor/Program Title: <u>NA</u> Federal CFDA Number: <u>NA</u>	
Check Only One: Federal Direct OR Federal Indirect State Grantor/Program Title: State Legislative Funding	
Private Organization: <u>NA</u>	
Grant Application: \$_1,700,000 (85%) Match: \$300,000 (15%)	
Total: \$2,000,000	
Estimated Date for Notice of Award (if awarded): <u>August 2019</u>	
Does Grant include loan component? Yes No <u>X</u>	
Loan Terms (interest rate, years to repay) NA	
Review and Approvals	
Department Head: Plui Slan 6-3-19	
Signature Date	
Other Department Head:	
Signature Date	
Budget Manager: Kone Cenelcel 6-4-19	
Signature Date	
Finance Grants Mgr:	î
Signature Date	
County Manager: My for Harry Bungess 6/5/19	
Date Date	

Date to Council for Approval to Apply for Grant: _____ June 11, 2019

The Grant would aid in the funding of construction of the NM 4/E. Jemez Road Intersection Project. The project is currently under design by the US Army Corp. of Engineer's and partially funded by DOE. The current construction estimate is \$4.7Million and has an approximate funding shortfall of near \$2Million. The project is a collaborative effort between NMDOT, DOE, Santa Fe County, National Park Service, LANL, and Los Alamos County. This intersection is heavily utilized by Los Alamos County residents, commuters and tourists to the County. The project would add much needed capacity to the intersection, alleviating the traffic congestion experienced currently at peak times. Additional left turn lanes, longer merging tapers, a fourth leg into the Tsankawi site's anticipated new parking lot, and bike lanes will be added to the intersection for additional capacity. As well as extended drainage structures and retaining walls as needed.

B. Grant Budget

Expense Type	Grant	Match/In Kind Requirement	Budget Authority (Yes or No)
Operational	\$ 0	\$ 0	NA
Outside Services	\$ 0	\$ 0	NA
Capital Outlay	\$ 1,700,000	\$ 300,000	No
TOTAL	\$ 1,700,000	\$ 300,000	No

C. Source of Match/In Kind: <u>CIP (FY 20)</u>

D. Will a budget revision be required if grant awarded? Yes X No

- E. Do the resources exist in your department to accomplish the goals of the grant? <u>Yes</u>
- F. Will resources (\$ or people) from another department be required? Yes_____No X If yes, describe: _____
- G. Frequency of reporting requirement Monthly <u>X</u>Quarterly___Annually____
- H. Frequency of pay requests for reimbursement Monthly X_Quarterly_Annually_____
- I. What, if anything, is the County's obligation (personnel or \$) beyond the life of the grant? Roadway Maintenance
- K. Who within the department will have responsibility for this grant? Programmatic Reporting? <u>Desirae Lujan</u> Financial Reporting? <u>Desirae Lujan/David Griego</u>

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Contact Information: Email: <u>philo.shelton@lacnm.us</u> Phone # <u>662-8106</u>
Person Completing This Form: <u>Desirae Lujan</u>
Contact Information: Email: <u>desirae.lujan@lacnm.us</u> Phone # <u>662-8212</u>
GRANT INFORMATION: Grant Agency/Source <u>NMDOT</u> Name of Grant Program <u>NMDOT State Funds</u> Application Submission Deadline: <u>6/12/2019</u> Federal Grantor/Program Title: <u>NA</u> Federal CFDA Number: <u>NA</u>
<i>Check Only One:</i> Federal Direct OR Federal Indirect State Grantor/Program Title: <u> </u>
Private Organization: <u>NA</u>
Private Organization: <u>NA</u> Grant Application : \$_2,572,500 (70%) Match: <u>\$1,102,500 (30%)</u>
Fotal: \$3,675.000
Estimated Date for Notice of Award (if awarded): <u>August 2019</u>
Does Grant include loan component? Yes No <u>X</u>
Loan Terms (interest rate, years to repay) NA
Review and Approvals
Department Head: Phi fla 6-3-19
Signature Date
Other Department Head:
Signature Date

 Budget Manager:
 Kalledge
 6/4/9

 Signature
 Date

 Finance Grants Mgr.
 Signature

 Signature
 Date

 County Manager:
 MW fr Harry Burgess
 6/5/19

 Signature
 Date

Date to Council for Approval to Apply for Grant: _____ June 11, 2019

A. Describe the purpose of the grant and what will be accomplished: _____

The Grant would aid in the funding of the design, environmental study, construction management, and construction of the DP Road Infrastructure Improvements Project. The project would consist of reconstruction of DP Road from Tract A-16 to the eastern end. All new curb & gutter, roadway, sidewalks, drivepads, and ADA compliant curb ramps would be installed following the installation of new and rehabilitated public utilities. The roadway project is being designed in house, with the aid of any design exploration needs conducted by consultants.

B. Grant Budget

Expense Type	Grant	Match/In Kind Requirement	Budget Authority (Yes or No)
Operational	\$ 0	\$ 0	NA
Outside Services	\$ 0	\$ 0	NA
Capital Outlay	\$ 2,572,500	\$ 1,102,500	No
TOTAL	\$ 2,572,500	\$ 1,102,500	No

C. Source of Match/In Kind: <u>CIP (FY21)</u>

D. Will a budget revision be required if grant awarded? Yes____X___No_____

- E. Do the resources exist in your department to accomplish the goals of the grant? <u>Yes</u>
- F. Will resources (\$ or people) from another department be required? Yes_____No X If yes, describe: _____
- G. Frequency of reporting requirement Monthly <u>X</u>Quarterly___ Annually_____
- H. Frequency of pay requests for reimbursement Monthly <u>X</u>_Quarterly_Annually_____
- I. What, if anything, is the County's obligation (personnel or \$) beyond the life of the grant? Roadway Maintenance
- K. Who within the department will have responsibility for this grant? Programmatic Reporting? <u>Desirae Lujan</u> Financial Reporting? <u>Desirae Lujan/David Griego</u>