



Roll Call Number

22-0245

Agenda Item Number

30

Date February 21, 2022

**ACCEPTANCE OF AN INCREASE IN FUNDS FOR THE PROJECT SAFE
NEIGHBORHOOD GRANT AWARD THROUGH THE OFFICE OF DRUG CONTROL
POLICY**

WHEREAS, the City of Des Moines has been awarded an increase in funding for the 2020 Project Safe Neighborhood grant through the Office of Drug Control Policy in the increased amount of \$104,126.50 designated to reimburse overtime related to targeted drug enforcement; and,

WHEREAS, the grant performance period has also been amended to July 13, 2021, through June 30, 2023, with no matching funds requirement.

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Des Moines, Iowa, that the increase in funds and the extension of the performance period of the 2020 Project Safe Neighborhood grant awarded by the Office of Drug Control Policy, is hereby approved with the Mayor authorized to sign the award documents on behalf of the City and the City Manager, or his designee, is directed to take any and all steps necessary to timely implement the grant award.

(Council Letter Number 22- 053 attached)

Moved by Gatto to adopt.

Second by Boesen

Approved as to form:

/s/ Megan Norberg

Megan Norberg
Assistant City Attorney

COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT
COWNIE	✓			
BOESEN	✓			
GATTO	✓			
MANDELBAUM	✓			
SHEUMAKER		✓		
VOSS	✓			
WESTERGAARD	✓			
TOTAL	<u>6</u>	<u>1</u>		

MOTION CARRIED

APPROVED

J. M. Franklin Cownie Mayor

CERTIFICATE

I, P. KAY CMELIK, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

P. Kay Cmelik City Clerk

PROJECT SAFE NEIGHBORHOODS

Governor's Office of Drug Control Policy
Pape State Office Bldg., 5th Floor
215 E. 7th Street, Des Moines, Iowa 50319 (515) 725-0300

PSN CFDA #16.609

Grantee: City of Des Moines 25 East 1 st Street Des Moines, Iowa 50309-1813	Grant #19/20-PSN-02 Grant Period: July 13, 2021 – June 30, 2023 <i>Revised February 10, 2022</i> Federal: \$104,126.50 Match: \$0 Total: \$104,126.50
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ODCP Contact:
Dennis Wiggins 515/725-0311

Legal Applicant:
T.M. Franklin Cownie

Program Director: Colleen Barongan
E-mail: cmbarongan@dm.gov

This grant is subject to the terms and conditions incorporated either directly or indirectly by reference in the grant program legislation, the grant program request for proposal, and the stipulations, if any, noted under "Special Conditions." Except for any waiver granted explicitly elsewhere in this grant, this award does not constitute approval of waiver from any Federal or state statutory/regulatory requirements for a United States Department of Justice grant. The grantee agrees to perform all services and furnish all supplies set forth in the application of this grant award for the consideration stated herein. This grant consists of the application for funds, the grant award notice, the budget documents, the standard grant conditions, the reporting forms, and all approved grant revision documents. All parties to this grant award acknowledge that they have fully read and understand this contract, and agree to abide by the terms set forth within.

SPECIAL CONDITIONS

Sub-contracts for service must be submitted to ODCP for review and approval prior to expenditure of grant funding.

COPY

In witness wherefore, the parties hereto have executed this grant the day and year specified below.

SIGNATURES/DATES


Legal Applicant/Date


Program Director/Date

ODCP Administrator/Date

PROJECT SAFE NEIGHBORHOODS

Governor's Office of Drug Control Policy
 Pape State Office Bldg., 5th Floor
 215 E. 7th Street, Des Moines, Iowa 50319 (515) 725-0300

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Legal Applicant: T.M. Franklin Cownie	Program Director: Colleen Barongan E-mail: cmbarongan@dmgov.org
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In witness wherefore, the parties hereto have executed this grant the day and year specified below.	
SIGNATURES/DATES	
 _____ Legal Applicant/Date	_____ Program Director/Date
_____ ODCP Administrator/Date	