

ADMINISTRATIVE CODE
BOARD OF COUNTY COMMISSIONERS

CATEGORY:

Transportation and Traffic Management

CODE NUMBER:

AC-11-8
(Moved from AC-14-1)

TITLE:

Landscaping Funds Program

ADOPTED:

8/24/88

AMENDED:

9/13/89 11/9/94

ORIGINATING DEPARTMENT:

Department of Transportation

PURPOSE/SCOPE:

The Landscaping **Funds** Program provides financial assistance to non-profit organizations engaged in **landscaping** projects for the betterment of Lee County.

This Code repeals and replaces former AC-14-1. Beautification Funds Program, adopted 8/24/88 and amended on 9/13/89.

POLICY/PROCEDURE:

THERE ARE TWO CATEGORIES OF ASSISTANCE AVAILABLE: "A" MATCHING GRANTS, AND "B" FINANCIAL ASSISTANCE GRANTS.

Eligible Organizations:

Non-profit organizations who desire to promote the betterment of Lee County through the landscaping and enhancement of streets and roadways, utilizing community support and volunteers. Proposed projects must be on a County maintained roadway unless approved otherwise by the County.

Category "A" - Matching Grants:

An eligible organization applying for a grant under this category will be required to match the amount requested from the County. Example: If you are requesting \$10,000.00 from Lee County, your organization must match \$10,000.00 from other sources. No more than 50% of your match may be from in-kind contributions, i.e. donated labor, material, etc.

Category "B" - Financial Assistance Grants:

The financial assistance category provides an eligible organization with in-kind assistance to assist the organization in the betterment of Lee County through their landscaping projects. In-kind assistance includes, but is not limited to, materials, supplies, labor, design, etc.

Application and Review Process:

Applications and information for grants may be obtained from:

Landscape Coordinator
Lee County Department of Transportation (DOT)
P. O. Box 398
Fort Myers, Florida 33902-0398

Applications for grant assistance must be submitted to the Landscape Coordinator after October 1 of each year and before May 31st of the following year. Incomplete or insufficient applications will be returned. Corrected applications must be returned before May 31st. Applications will be reviewed on the basis of Criteria for Evaluation as stated in this administrative code and applicable County policy. A recommendation for funding approval or disapproval will be submitted to the Board of County Commissioners for their approval.

NO FUNDS WILL BE EXPENDED UNTIL THE GRANT APPLICATION AND CONTRACT/AGREEMENT IS APPROVED AND SIGNED BY THE CLERK OF THE BOARD OF COUNTY COMMISSIONERS.

Bid Solicitation:

A minimum of three competitive bids must be obtained for each project. The lowest bid must be selected, unless the low bid is incomplete or non-responsive.

Public Record:

All materials submitted with grant applications are a matter of public record open to inspection by any citizen of the State of Florida.

Grant Manager:

Applicants shall designate a Grant Manager. That individual shall be responsible for maintaining the official file with application, correspondence, grant, narrative progress reports, request for funds/reimbursements, invoices, and project drawings. The grant manager will be responsible to assure that all of the elements of the grant are followed, that narrative progress reports are submitted in a timely manner, that requests for funds are accurate and appropriate attachments included, and that the project is closed out efficiently with the necessary reports and audit submitted. It is the grant manager's responsibility to see that all applicable federal, state and local laws, permits or policies are followed.

LEE COUNTY LANDSCAPING FUNDS PROGRAMContract/Agreement:

All applicants approved for grants will be required to **comply** with all County policies and procedures dealing with contract administration. Such **contracts/agreements** must contain **the following where applicable** in addition to other specifics of work to be done. (The **contract/agreement** will be provided by the County).

- a. Beginning and end dates. Must be after October 1 and before September 30.
- b. Contract terms must be within the above dates.
- c. Total dollar amount to be paid by the County.
- d. 30 day cancellation clause.
- e. Non-employee/employer relationship.
- f. **Comply** with the terms of the contract/agreement.
- g. **Detailed** scope of work.
- h. Hold Lee County harmless statement.
- i. Contract/agreement relationship statement.
- j. Liability statement.
- k. Non-discrimination clause.
- l. Access to financial records for auditing purposes.
- m. Signature(s) of appropriate officer(s).

Narrative Progress Report:

Narrative progress reports indicting activities relating to the scope of work for a given period of time. Reports are required once every thirty (30) days.

Final Narrative Report:

Within thirty days of the close of the grant contract/agreement, the final narrative progress report is due and should address in detail the following:

- a. Has the scope of work been met?
- b. Did expenditures fall within the most recent grant contract/agreement budget.
- c. Were special conditions within the grant contract complied **with?**
- d. Did the **project** have the anticipated results?
- e. How can **the project** be improved or expanded?

Procedure for Reimbursement of Ponds:

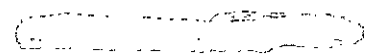
Requests for reimbursement of grant funds must be completed and submitted to the DOT Landscape Coordinator when the grantee desires to receive payment for expenses incurred. Payment is on a reimbursement basis **only**. Requests for funds shall be limited to one per **month**. **Grantees should take into consideration that it will take approximately thirty (30) days for the County to process a check for reimbursement. Reimbursement may be requested for items specifically included in the grantee's scope of work and budget. Other expenditures are subject to refusal of payment. Requests for funds must be accompanied by invoices, tear sheets, or other backup information to substantiate payment.**

Amendments - Extension:

Grants are valid until September 30th. In the event of an amendment or extension, the **grantee must** complete the attached form for **approval** by the DOT Director. All amendments **are subject to availability of funds and may be subject to approval by the Board of County Commissioners.**

Termination/Nonappropriation of Funds:

This administrative code provides that if the County has not appropriated sufficient funds to enable the County to make the grant award payments required hereunder during any of the County's fiscal years subsequent to the one in which the grant is executed and entered into, and the County is then without any other funds **which** can be lawfully expended by the County to **continue executing** the contract/agreement shall be terminated effective upon **expiration of isca year** in which sufficient funds to continue satisfaction **of the County's obligation under this contract/agreement were last appropriated to the County, and the County shall not, in this sole event, be obligated to make further payment due beyond said fiscal year.**

Audits and Records:

The grantee shall maintain all records and accounts, including property, personnel, and financial records, as necessary to ensure a proper accounting for all funds.

The aforesaid records will be made available for audit or inspection purposes at any time during normal business hours. They shall be made available to the County for examination all such records with respect to any matters covered by this grant, and the grantee will permit same to be examined and excerpts or transcriptions made from such records and audits of all contracts, invoices, materials, records of personnel and of employment, and data relating to all matters covered by this grant. The County's right of inspection and audit shall also apply to any audits made by any other agency, whether local, state, or federal. The County shall likewise retain all of its records and supporting documentation applicable to the grant for five (5) years for inspection as aforesaid.

Criteria for Evaluation:

Grant applications will be scored in four (4) **categories** on a one hundred (100) point scale. Applications scoring less than forty (40) points will not be considered for grant approval.

COMMITMENT TO THE BETTERMENT OF LEE COUNTY FOR THE BENEFIT OF RESIDENTS AND VISITORS - MAX. FIFTY (50) POINTS.

- a. Visibility and use potential - Evidence that the projects location is such that it will have public exposure and serve a useful purpose.
- b. Documentation of how the preservation, protection, and enhancement of the environment is to be accomplished.
- c. Evidence of accessibility and provision of facilities for the handicapped, if applicable.
- d. Growth potential of project in subsequent years, commitment of the organization to expand and improve the project as its potential increases.

PLANNING AND ILLUSTRATION OF PROPOSED PROJECT - MAX. TWENTY (20) POINTS

- a. Extent to which organization has clearly identified objectives and scope of project; production of drawing and documents to illustrate proposed project; establishment of time frame for implementation; realistically conceived elements are complete; evidence of community support and coordination of resources of public and private agencies; evidence that funding sources have been identified and a required match is available.
- b. Provision of operating and maintenance covenants and source of funds for maintenance after completion of proposed project.
- c. Provision of cost estimates showing quantities and unit pricing for labor and materials, broken down by phases if applicable.

ORGANIZATION STABILITY AND MANAGEMENT CAPACITY - MAX. FIFTEEN (15) POINTS

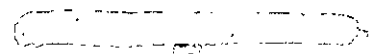
- a. Proven record of the organization to develop resources, prepare and effectively implement the proposed activity
- b. Extent to which the organization has successful history of service in Lee County.
- c. Ability to administer public sector grants.
- d. Provision for regular timely reporting to DOT on the progress of the project.
- e. Demonstrate the internal financial controls to accomplish the project within the budget.
- f. Evidence of applicant and volunteer capability and qualifications.
- g. Completeness of application.

QUALITY AND UNIQUENESS OF PROPOSED PROJECT - MAX. FIFTEEN (15) POINTS.

- a. Extent to which the project has substantial landscape improvement potential, artistic, cultural, or other significance giving emphasis to creativity and excellence.
- b. Extent to which the project provides an area for the County and its residents of significant merit which without such assistance would not otherwise be available.

GRANT FUNDS CANNOT BE USED FOR:

1. Annual operating expenditures not directly related to the activity of the project.



- 2. Salaries, wages or administrative costs.
- 3. Purchase, lease or the acquisition of real property.
- 4. Tangible personal property, including but not limited too, office furnishings or equipment.
- 5. Interest or reduction of deficits or loans. Expenses incurred or obligated prior to or after grant period.
- 6. Prize money, scholarships, awards, plaques, or certificates.
- 7. Travel not associated directly with the project.
- 8. Projects which are restricted to private or exclusive participation.
- 9. Private entertainment, food, or beverages.
- 10. Making payments or reimbursements for goods or services purchased for previous or other projects.

Directions for Completing Grant Application:

Applicants are required to submit an **original** and two **(2) copies** of the completed Grant Application, Scope of Work, and Project Budget to the DOT **Landscape Coordinator**.

COMPLETELY **REVIEW THIS ADMINISTRATIVE** CODE PRIOR TO COMPLRTING THE **ATTACHED** APPLICATION.

The following instructions are provided for your assistance in completing the application:

APPLICATION

- Line 1 Fill in your organization's legal name (name recorded on non-profit incorporation papers).
- Line 2-3 Give the mailing address of your organization.
- Line 4 State the person who will be managing the grant if awarded and phone number.
- Line 5 State the name of the organization's chief official and title.
- Line 6 Check the category of grant applying for.
- Line 7 Give the title and a brief description of the proposed project.
- Line 8 Identify the geographic area of project impact within Lee County.
- Line 9 Fill in the estimated completion date. Project duration will be less than twelve months.
- Line 10 Fill in the amount of money requested from DOT.
- Line 11 Fill in the amount of matching funds from other available sources.
- Line 12 In the event that the full **amount requested cannot** be granted, can the project be revised within a smaller **budget?**
- Line 13 Signature of organization's chief official.



LEE COUNTY LANDSCAPING FUNDS PROGRAM

GRANT APPLICATION

Mail an original and two copies to:

Landscape Coordinator
Lee County Department of Transportation
P. O. Box 398
Fort Myers, Florida 33902-0398

COMPLETELY REVIEW THIS ADMINISTRATIVE CODE PRIOR TO COMPLETING THE ATTACHED APPLICATION.

1) Name of Applicant/Organization: _____

2) Street/P.O.Box: _____

3) City: _____ State: _____ Zip: _____

4) Grant Manager: _____

Phone: _____

5) Organization's Chief Official: _____

Title: _____

6) Check one of the following:

_____ Category "A" - Matching Grant

_____ Category "B" - Financial Assistance Grant

7) Brief Project Description: _____

8) Area of Project Impact: _____

9) Estimate Project Start Date: _____

Estimate Project End Date: _____

10) Total Dollars Requested from DOT: \$ _____

11) Total Dollars Available from Other Sources: \$ _____

Total Cost of Project: \$ _____

12) If the full amount requested cannot be awarded, can the project be revised to accommodate a smaller budget? Yes _____ No _____

13) Signature of Organization's Chief Official: _____

LEE COUNTY LANDSCAPING FUNDS PROGRAM

PLEASE ATTACH ONE COPY OF EACH OF THE FOLLOWING ITEMS TO YOUR APPLICATION:

- 1) Charter, Articles of Incorporation, By-laws, Proof of Current Status i.e. Annual Report on file with Secretary of State.
- 2) I.R.S. Determination Letter of 501 (C) (3) status.
- 3) List of officers and board members indicating **terms**.
- 4) Letters of commitment from cosponsors to substantiate matching funds.

SCOPE OF WORK:

- 1) On the following sheet of paper, list and describe the project.
- 2) State the goals and objectives of the project..
- 3) Describe what benefits the public will receive from this project.
- 4) Describe operation and maintenance covenants, and maintenance budgets to provide for the project after completion.
- 5) Describe how financial resources will be monitored.
- 6) Attach documentation of financial support from other sources.
- 7) Provide a brief **description** of the history of service to Lee County provided by your organization, **including** other completed **projects/services**.
- 8) List the name and address of any professional consultants used in preparation of drawings, cost estimates, planning, etc.
- 9) Provide cost estimates for the **project** including all labor and materials associated with implementation of **the project**. If the project is to be completed in phases, **provide** estimates for each phase and a total for the entire **project**. Show **quantities** and unit prices of materials, supplies, labor, etc. on **the** attached cost estimate.

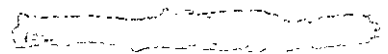


LEE COUNTY LANDSCAPING FUNDS PROGRAM

PROPOSED DEVELOPMENT

Please provide the following and attach to your application:

- 1) Location map showing the proposed projects location within Lee County.
- 2) Scaled drawing or detailed description of the proposed project showing:
 - a. Existing features and vegetation.
 - b. Proposed alterations to site.
 - c. Phasing plan if applicable.
 - d. Provisions for barrier-free access if applicable.
- 3) Copies or list of any permits required for development of project.
 - a. A **Lee County** Department of Transportation Right-Of-Way Construction Permit will be **required** prior to project implementation.



LEE COUNTY LANDSCAPING FUNDS PROGRAM

Affidavit

I, _____, being **first duly** sworn or affirm, depose and say that I am the **authorized representative** of the organization and **project** aescrilled herein and **which** is the subject matter of **this application for funds;** that all answers to the application questions, all drawings, **data, and other supplementary** items made part of this application; are true and **accurate** to the best of my knowledge. I understand that this application must be completed, accurate, and approved before any funding will be issued.

Signature of Organization's Chief Official or
Grant Manager

Print Name

Title

Address

Telephone

Date

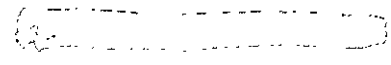
STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was acknowledged before me this _____ day of _____, 19___, BY _____, who is personally known to me or has produced _____ as identification and who did/did not take an oath.

My Commission Expires On:

Notary Public Signature

Print Name



OFFICIAL SIGNATURES ON REQUEST FOR REIMBURSEMENT OF FUNDS FORM

The grantee organization's Grant **Manager** will normally be expected to sign the request for funds and other financial forms to be submitted. **In** the event someone other than the Grant Manager will be signing these forms, we ask that you notify DOT.

INSTRUCTIONS FOR AUTHORIZED SIGNATUREFOR ALL FINANCIAL REPORTS AND REQUESTS FOR REIMBURSEMENT OF FUNDS

1. Enter the name and address of the **organization**. This will be the official name and address of the organization where **checks will** be mailed.
2. Enter contract/agreement number.
3. Enter **signature** of the official within the grantee organization authorized to execute requests **for** payment.
4. Enter typed name and title of official within the grantee organization authorized to execute requests for reimbursement of funds.
5. Enter the date, **typed** name, title and signature of the grantee organization's chief official who is **authorizing** and certifying the authenticity of individual signatures authorized to sign requests for reimbursement of funds.

LEE COUNTY LANDSCAPING FUNDS PROGRAM

AUTHORIZED SIGNATURE FOR ALL
FINANCIAL REPORTS AND REQUESTS FOR REIMBURSEMENT OF FUNDS

1. Name & Address of Organization
for payment:

2. Contract/Agreement Nos.
authorized by Organizations
Chief Official:

Name : _____ # _____

Address: _____ # _____

SIGNATURE OF INDIVIDUAL AUTHORIZED FOR REIMBURSEMENT

3. Signature: _____

4. Typed Name and Title: _____

5. I **certify** that the signature above is of the individual authorized for reimbursement of funds for the above contract/agreements.

Signature of Organizations Chief Official

Typed Name and Title

Date

NOTE: It is understood that the above authorized individual is **notifying** the Organization's Chief Official of all requests for funds and the **status** of the project.



LEE COUNTY LANDSCAPING FUNDS PROGRAM

BID FORM

GRANTEE: _____

DATE: _____

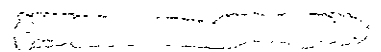
CONTRACT/AGREEMENT GRANT # _____

NOTE: You must solicit at least three bids and select **the lowest** qualified bid. If your project specifications **change** after you have awarded your bid, you must rebid.

1. What is the item or service to be purchased?

2. What were the companies contacted and the name of their representative. Attach copies of each proposal. List all companies contacted. If a company did not reply to your proposal please indicate.

3. Who did you select for your **project** and what was your reasoning for selecting them? You must select the lowest **qualified** bid.



NARRATIVE PROGRSS REPORT

CONTRACT/AGREEMENT # _____ DATE: _____

CHECK ONE:

_____ INTERIM _____ FINAL REPORT PERIOD: FROM _____ TO

GRANTEE: _____

GRANT MANAGER: _____

ADDRESS _____ PHONE _____

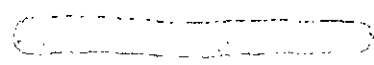
ON THE FOLLOWING PAGE, ANSWER THE QUESTIONS BELOW FOR EACH ITEM IN YOUR SCOPE OF VORK

INTERIM REPORT - These questions should be answered for each report excluding the final report.

1. Has project/phase been completed?
2. If project/phase is in progress, what has been done, what remains to be done, and are there any problems?
3. If the project/phase hasn't been started, why?
4. What benefits have been realized to date?

FINAL REPORT - This is your last report, answer each question for each item in your Scope of Work

1. Has the Scope of Work been met?
2. Did expenditures fall within the most recent cost estimates?
3. Were special conditions within the contract/agreement complied with?.
4. Did the project have the anticipated results?
5. How **can** the project be improved or expanded?



LEE COUNTY LANDSCAPING FUNDS PROGRAM

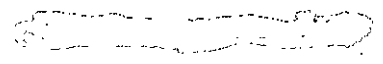
INSTRUCTIONS FOR COMPLETING THE ATTACHED REQUEST FOR REIMBURSEMENT OF FUNDS FORM

Funds can **only** be released when this form is submitted to the Landscape Coordinator and it is filled out with proper documentation attached. Allow at least thirty days for reimbursement. If form is filled out incorrectly and/or proper documentation **is** not attached, reimbursement may take longer than thirty days..

ITEM NUMBER

EXPLANATION

- A. Organization: Grantee's organization name.
- B. Address: Mailing address of organization.
- C. Grant Manager: Person responsible for form preparation.
- D. Phone number: Phone number of Grant Manager.
- E. Contract/Agreement number: Assigned Contract/Agreement number.
- F. Report period: Beginning and ending date of report.
- Interim Request: Check this unless final request.
- Final Request: Check this **when** filing final request.
- G. Status of Lee County Landscaping Funds:
 - 1) Enter total dollar amount of landscaping funds under current contract/agreement.
 - 2) Enter dollar amount of funds reimbursed to date from DOT.
 - 3) Enter dollar amount of funds left.
 - 4) Enter **each** line item costs for stated categories.
 - 5) Enter line item budget dollars as shown in contract/agreement amount.
 - 6) Enter all expenditures **being** submitted for this request (attach labeled invoices and information to **substantiate** request).
 - 7) Enter all expenditures made from the beginning of contract/agreement through current request. This should be the cumulative amount.
 - 8) Enter total of each column.



LEE COUNTY LANDSCAPING FUNDS PROGRAM

REQUEST FOR REIMBURSEMENT OF FUNDS FORM

A. ORGANIZATION: _____

B. ADDRESS: _____

C. GRANT MANAGER: _____

D. PHONE: _____

E. CONTRACT/AGREEMENT: # _____

F. REPORT PERIOD DATES: FROM _____ TO _____

() INTERIM REQUEST () FINAL REQUEST

G. STATUS OF LEE COUNTY LANDSCAPING FUNDS:

1. AGREEMENT/CONTRACT AMOUNT OF FUNDS: _____

2. LESS FUNDS RECEIVED TO DATE: _____

3. BALANCE OF FUNDS:: _____

4. PROJECT EXPENDITURES	5. INITIAL FUNDS	6. FUNDS REQUESTED	7. YEAR-TO-DATE EXPENDED
<u>labor & mat.:</u>			
<u>prof. fees:</u>	\$		
<u>permits:</u>			
<u>irrigation:</u>	\$		
<u>sod:</u>	\$		
<u>grading:</u>			
<u>other:</u>			
<u>other:</u>	s		
<u>other:</u>	\$		
TOTALS			

NOTE: Complete and attach the following Certification of Organization's Grant **Manager** Form to this **request**. Furnishing false information may constitute a violation of applicable **laws**, state and federal laws.

LEE COUNTY LANDSCAPING FUNDS PROGRAM

REQUEST FOR REIMBURSEMENT OF FUNDS FORM

CERTIFICATION OF ORGANIZATION'S GRANT MANAGER:

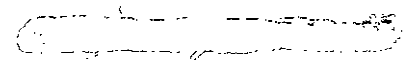
I certify that the attached Request for Reimbursement of Funds Form is correct, based on the contractor's official accounting system and records, consistently applied and maintained, and that the costs shown have been made for the purpose of and in accordance with the terms of the contract/agreement. The funds requested are for reimbursement of actual project costs incurred by the organization and paid by the organization prior to this report period.

SIGNATURE _____

TITLE _____

PRINTED NAME _____

DATE _____



LEE COUNTY LANDSCAPING FUNDS PROGRAM

REQUEST FOR AMENDMENT/EXTENSION

CONTRACT/AGREEMENT # _____

CHECK **THE** TYPE OF AMENDMENT YOU ARE REQUESTING AND ANSWER THE CORRESPONDING QUESTIONS.

1. Time Extension:

a. Indicate length of extension and reason the project cannot be completed under the original contract/agreement time.

2. Scope of Work:

a. Attach a copy of your Scope of Work as it appears in the contract/agreement, and the Scope of Work as you would like it amended.

b. What are your reasons for requesting an amendment to the original Scope of Work?

3. Budget:

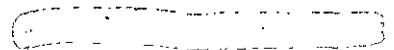
a. Attach a copy of 'the current budget' as it appears in the contract/agreement, and your proposed budget as you would like it amended.

b. What are your reasons for requesting a budget Amendment?

Approved by DOT Director

Date

NOTE: All increases in Time Extension, Scope of Work and/or Budget, are subjected to availability of funds and may also require approval by the Board of County Commissioners.



LEE COUNTY LANDSCAPING FUNDS PROGRAM

Office Use Only

ORGANIZATION: _____ PROJECT TITLE: _____

Disposition of Request

1) Request for reimbursement of funds as applied for is hereby APPROVED subject to the following conditions (if any):

Recommended By:

Signature of DOT Landscape Coordinator _____

Signature of DOT Department Director _____

2) Request for reimbursement of funds as applied for is DENIED for the following reason(s):

Recommended By:

Signature of DOT Landscape Coordinator: _____

Signature of DOT Department Director: _____