



# STAFF REPORT

**Report To:** Board of Supervisors

**Meeting Date:** November 16, 2017

**Staff Contact:** Ana Jimenez, Grants Administrator

**Agenda Title:** For Possible Action: To recommend to the U.S. Department of Housing and Urban Development (HUD) approval of the Carson City FY 2018 2<sup>nd</sup> round of funding recommendations in the amount of \$132,334 to implement programs associated with the Community Development Block Grant (CDBG). (Ana Jimenez, [ajimenez@carson.org](mailto:ajimenez@carson.org))

**Staff Summary:** Approval of the funding recommendation establishes the distribution of CDBG funds between public services activities, public facilities and improvements, and planning, research, reports and administrative functions in accordance with HUD regulations.

**Agenda Action:** Formal Action/Motion

**Time Requested:** 10 minutes

## **Proposed Motion**

I move to recommend to the U.S. Department of Housing and Urban Development (HUD) approval of the Carson City FY 2018 2<sup>nd</sup> round of funding recommendations in the amount of \$132,334 to implement programs associated with the Community Development Block Grant (CDBG).

## **Board's Strategic Goal**

Quality of Life

## **Previous Action**

At the March 27, 2017 Board of Supervisors meeting, the Board reviewed and approved the FY 2018 CDBG Public Services and Public Improvements funding recommendations.

On August 17, 2017 the Board approved a grant agreement with the State of Nevada Community Development Block Grant (CDBG) program (Grantor) to receive U.S. Department of Housing and Urban Development (HUD) funding through an allocation from the State administered Community Development Block Grant program.

## **Background/Issues & Analysis**

HUD requires the City to conduct public hearings and recommend approval of the projects to fund.

## **Applicable Statute, Code, Policy, Rule or Regulation**

Title 1 of the Housing and Community Development Act of 1974, Public Law 93-383 as amended; 42 U.S.C.-5301 et seq.

## **Financial Information**

Is there a fiscal impact?  Yes  No

If yes, account name/number: Grant Fund, CDBG Grant 275-0620-465/offset by Federal Grant Revenue.

Is it currently budgeted?  Yes  No

Explanation of Fiscal Impact: \$427,000 was included in the FY18 budget. We will adjust this to the actual award amount of \$474,607 during the augmentation process in January, 2018.

**Alternatives**

Provide other direction.

**Board Action Taken:**

Motion: \_\_\_\_\_

1) \_\_\_\_\_

2) \_\_\_\_\_

Aye/Nay

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(Vote Recorded By)



## CARSON CITY, NEVADA CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

### MEMORANDUM

Board of Supervisors Meeting of November 16, 2017

**To:** Mayor and Board of Supervisors  
**From:** Ana Jimenez, Grants Administrator  
**Date:** November 6, 2017  
**Subject:** CDBG 2018 2<sup>nd</sup> Round of Funding Recommendations

On March 27, 2017, the Board of Supervisors approved the 2018 CDBG Final Allocations. The funding recommendations were based on the 2017 CDBG funding allocation of \$368,516, of this amount \$294,812 was allocated to projects/programs and 20% was allocated to administration (\$73,704). Carson City's actual award for FY18 was \$474,607, of which 10% (47,461) can be allocated to administration, (pursuant to the grant agreement with the State) giving the City \$132,334 in additional funding to award; \$116,420 for Public Improvements and \$15,914 for Public Services.

#### REQUIRED ACTION:

The Board of Supervisors must recommend the final 2<sup>nd</sup> round of funding recommendations to The Governor's Office of Economic Development. Below is a list of applicants to be considered for the 2<sup>nd</sup> round of funding. The "2018 Final CDBG Allocations" are included at the end of this memo. The Board of Supervisors may modify the funding recommendations at their discretion.

Please contact Ana Jimenez ([ajimenez@carson.org](mailto:ajimenez@carson.org)) at 283-7069 or Nancy Paulson ([npaulson@carson.org](mailto:npaulson@carson.org)) at 283-7944 if you have any questions regarding this memo or the CDBG program.

#### Eligibility Requirements

In order to be eligible for funding, every CDBG-funded activity (excluding planning and administration) *must* qualify as meeting one of the three national objectives of the program:

- Benefiting low- and moderate-income (LMI) persons or a low income area,
- Preventing or eliminating slums or blight, or
- Meeting an urgent community development need due to threat to community health and welfare (e.g. natural disaster emergencies).

Past CDBG public facility and public service projects in Carson City have met the LMI criteria. This means projects that get funded qualify by either:

1. Limited Clientele criteria: Serving persons where at least 51% of the clientele are LMI persons (senior citizens are also classified as LMI under this category); or
2. Area Benefit criteria: Meeting the needs within a service area where at least 51% of the residents in that area are LMI persons. (HUD provides data on the percentage of LMI persons within the Census Block Groups.)

#### DEPARTMENT OF FINANCE

201 North Carson Street, Suite #3, Carson City, NV 89701 - (775) 887-2133 (775) 887-2107 fax

**CARSON CITY, NEVADA**  
**CONSOLIDATED MUNICIPALITY AND STATE CAPITAL**

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It is very important that projects are able to document the number of LMI persons served for grant monitoring and audit purposes.

**Eligible Activities**

Eligible activities for the use of CDBG funds and examples of such activities include:

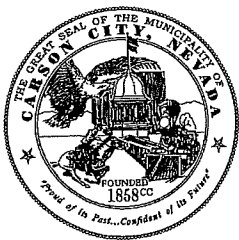
- Construction of public facilities and improvements
  - Infrastructure improvements, senior centers, parks, homeless shelters
- Public Services
  - Education programs, services for senior citizens, drug abuse counseling and treatment, low-income rental assistance
  - Public Services funding is limited to a maximum of 15% of the total allocation
- Housing
  - Minor rehabilitation (Emergency Repair, Lead Paint Removal)
  - Rehabilitation of affordable owner and rental housing
  - Down-payment assistance
  - Acquisition, new construction of housing
- Economic Development
  - Façade improvements
  - Loans to businesses (usually to create jobs)
  - Micro-enterprise assistance
- Planning and Administration
  - Personnel costs, preparation of required documents, planning studies
  - Funding for these costs is limited to a maximum of 10% of the total allocation

**FY2018 2<sup>nd</sup> Round of Funding For Possible Consideration**

- RSVP – Veterans Volunteers in Partnership (\$3,664)
- Accessible Space Yasmer Estates (\$70,000)
- Carson City Public Works – Pedestrian Improvements (\$79,319)
- Salvation Army – Commercial Kitchen (\$50,000)

**FY2018 Funded Projects**

- Ron Wood Family Resource Center – Reach Up (\$35,000)
- Food For Thought – Summer Lunch Program (\$12,000)
- RSVP – Veterans Volunteers in Partnership (\$8,277)
- Carson City Public Works – Pedestrian Improvements (\$147,871)
- Carson City Parks & Rec – Ross Gold Park (\$91,664)



# Community Development Block Grant (CDBG) Program Application Fiscal Year 2017-2018

## GENERAL INFORMATION

PLEASE READ ATTACHED INSTRUCTIONS ON PAGE NN FOR MORE INFORMATION.  
 APPLICATIONS ARE DUE\*: JANUARY 13, 2017, 4:00 P.M.  
 PLEASE SUBMIT THE ORIGINAL PLUS 2 COPIES TO:

Carson City Dept. of Finance  
 201 N. Carson St., Ste. 3  
 Carson City, NV 89701

\*The deadline established is firm. Any application received after the deadline will not be considered for funding. Applications must be unstapled. An electronic version of this document is available at [CARSON.ORG/CDBG](http://CARSON.ORG/CDBG).

## APPLICANT INFORMATION

Agency Name: Nevada Rural Counties RSVP Program, Inc. (RSVP)	
Agency Mailing Address: P.O. Box 1708, Carson City, NV 89702	
Project Name: Veterans Volunteers in Partnership Program (Veterans VIP Program)	
Project Address/Location: 2621 Northgate Lane, Suite 6, Carson City, NV 89706	
Agency Director: Susan C. Haas, Executive Director & C.E.O.	
Board Chairperson: Jerry Thurman	
Contact Person: Susan C. Haas	
Phone Number: (775) 687-4680 x 2	Email: shaas@nvrsvp.com
Fax: (775) 687-4494	Website (if applicable): www.nevadaruralrsvp.org
How long has your organization been in existence? 44 yrs.	In Carson City? 44 yrs.

## PROJECT FUNDING

Requested amount:	\$ 11,941
Other funding:	\$ 40,620
<b>Total project cost:</b>	<b>\$ 52,561</b>

## PROJECT SUMMARY

Please provide a **brief** summary of the proposed project (not the organization), including what the project is, who will be served, how many will be served, and where will it take place. The description should be **no more than five sentences**.

RSVP's Veterans "Volunteers in Partnership" (Veterans VIP) Program is a new program that assists veterans and their families. The goal of the Veterans VIP Program is to provide veterans with information and access to services that empowers them to emerge from poverty and enables them to remain independently at home. Through collaboration with the Office of Suicide Prevention, the Veterans VIP Program will also provide access to suicide prevention awareness and training. Seventy-five veterans age 62 and older who live in Carson City will be served.

## FUNDING CATEGORY

<input type="checkbox"/> Public Improvements	<input checked="" type="checkbox"/> Public Services
<input type="checkbox"/> Economic Development	<input type="checkbox"/> Housing

## PROJECT ELIGIBILITY

A. This project meets at least ONE of the HUD national objectives listed below (please check all that apply)

1. Benefits low/moderate income individuals/households  
 2. Addresses the prevention or elimination of slums or blight  
 3. Meets a particularly urgent community development need

B. Check all statements that describe HOW this project meets one of the National Objectives above:

**L/M Area Benefit:** the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. **Examples:** street improvements, water/sewer lines, neighborhood facilities, façade improvements in neighborhood commercial districts.

**L/M Limited Clientele:** the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. **Examples:** construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

**L/M Housing:** the project adds or improves permanent residential structures that will be occupied by L.M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family structures. Rental units for L/M income persons must be occupied at affordable rents. Examples: acquisition of property for permanent housing, rehabilitation of permanent housing, conversion of non-residential structures into permanent housing.

**L/M Jobs:** the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. **Examples:** loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close with resultant loss of jobs, a majority of which are held by L/M persons.

**Microenterprise Assistance:** the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. (A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

\_\_\_\_\_ **Slum or Blighted Area:** the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area.

\_\_\_\_\_ **Spot Blight:** the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to the extent necessary to eliminate conditions detrimental to public health and safety. **Examples:** historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

**C. Project Category (check one):**

**X** Public Service (i.e., a new service or an **increase** in the level of service

\_\_\_\_\_ Public Facilities and Improvements (i.e., homeless shelter, water and sewer facilities, flood and drainage improvements, fire protection facilities/equipment, community centers, senior centers, health centers, parking, landscaping, streets, curbs, gutters and sidewalks, parks and playgrounds).

\_\_\_\_\_ Acquisition of Real Property

\_\_\_\_\_ Disposition of Real Property (sale, lease or donation)

\_\_\_\_\_ Privately-Owned Utilities

\_\_\_\_\_ Relocation Payments and Assistance to Displaced Persons

\_\_\_\_\_ Removal of Architectural Barriers, Handicapped Accessibility

\_\_\_\_\_ Housing Rehabilitation (weatherization)

\_\_\_\_\_ Historic Preservation

\_\_\_\_\_ Commercial or Industrial Rehabilitation, including façade improvements and correction of code violations

\_\_\_\_\_ Special Economic Development or assistance to microenterprises

## PROJECT DESCRIPTION

The Five-year Consolidated Plan identifies priority community development needs for Carson City (see table on page 13). The need for your proposed project will be determined by identifying how the project impacts upon the adopted Consolidated Plan Priority Needs. Greater consideration will be given to projects that provide a clear description of the project with supporting data and methodology of how the project will meet these needs.

1. Describe the proposed project, including how the project will address the National Objective indicated and whether the project is new, ongoing, or expanded from previous years. **(Please use allotted space)**  
According to U.S. Census American Survey data (2/5/15), of the approximately 8,000 veterans in Carson City, more than 2,300 are age 60 and older. RSVP's Veterans "Volunteers in Partnership" (Veterans VIP) Program is a new program that assists veterans. The Corporation for National and Community Service awarded RSVP three AmeriCorps VISTAs for three years. In November 2016, one VISTA was placed in RSVP's Carson City office and a second VISTA will also join our Carson City office in April 2017. VISTAs will 1) provide information and referrals to benefits and services that veterans are entitled to; 2) identify veterans and their families in need of assistance; 3) recruit volunteers to provide services to veterans that empower them to emerge from poverty and live independently at home (i.e., transportation to access food, medical care, vocational rehabilitation, respite care, and more); 3) provide suicide awareness and prevention in partnership with the Nevada Office of Suicide Prevention; and 4) assist with organizational capacity-building activities (i.e., fundraising, outreach and awareness of RSVP services and programs).
2. If the proposed project already exists, please describe your success rates in providing services to low- to moderate-income persons:  
RSVP has been serving seniors for more than 43 years. Volunteers provided transportation, companionship, respite, homemaker, and other independent living services to 543 Carson City seniors during FY2016-17, quarter 1. Currently 25 veterans age 62 and older who live in Carson City receive RSVP independent living services. The Veterans VIP Program AmeriCorps VISTAs will be trained to become Nevada Veterans Advocates who will educate veterans about benefits and opportunities they may be eligible for with the goal to help lift them out of poverty.
3. Describe who will benefit from the proposed project.  
Veterans age 62 and older who need assistance to access the life-saving goods and services that will help lift them out of poverty and allow them to remain independent and in their own homes with dignity.
4. If your project is designed to serve a specific or limited clientele, please indicate the population you will be serving with your project/program:

<input type="checkbox"/> Abused Children	<input type="checkbox"/> Illiterate Persons	<input type="checkbox"/> Homeless Persons
<input type="checkbox"/> Battered Spouses	<input type="checkbox"/> Severely Disabled Adults	<input type="checkbox"/> Migrant Farm Workers
<input checked="" type="checkbox"/> <b>Elderly</b>	<input type="checkbox"/> Other (Please explain)	
<input type="checkbox"/> <b>Veterans</b>		



5. If your project will not be serving a limited clientele, explain how you will document client income and how you will document that at least 51% of your clientele will be low-to-moderate income:  
N/A

6. How will the funds be used on this project?

Funds will be used to help invigorate and supplement our new Veterans VIP Program in Carson City. The Corporation for National and Community Service (CNCS) awarded RSVP with AmeriCorps VISTAs. CNCS pays VISTAs a monthly stipend but does not cover the other expenses necessary to run the program. Funds are needed to 1) purchase a locked filing cabinet and two computer workstations for our Carson City AmeriCorps VISTAs; 2) cover the costs of training and mileage reimbursement for the two VISTAs and volunteers who serve our veterans in Carson City; 3) help with costs to maintain our VISTA's worksite in Carson City (internet, telephone, fax, and office supplies); and 4) purchase promotional items and advertisements.

7. Can your organization reduce the need for grant funding in the future and become self-sustaining? Explain.

AmeriCorps VISTAs will be tasked with capacity-building activities that include grant research and writing and fundraising that will help sustain the Veterans VIP Program.

8. Can you still proceed with your project if you are awarded partial funding? Please provide a detailed explanation.

Yes, however, without additional funding we cannot provide our VISTAs with mileage reimbursement, training, and functional workstations with current software. The Corporation for National and Community Service (CNCS) pays the VISTAs' monthly stipend but does not cover the operational costs such as the costs to market and raise awareness of the Veterans VIP Program.

9. Are there other organizations that provide the same service as your organization? If so, how do you coordinate your services?

No other agency currently provides the same services as RSVP. We do complement many state and federal programs; however, due to the very strict criteria for persons to receive services, so many needy veterans fall through the cracks. RSVP has no rigid income criteria for services, nor do we charge, except for the Lifeline program monitoring costs. There is some public transportation; however, it does not provide the escorted service and emotional support given by volunteers to our senior veterans at no cost to the veterans. Our Carson City AmeriCorps VISTA has begun to conduct outreach and to collaborate with local veteran resource centers. Additionally, the VISTA is participating in on-line training to become a Veteran Service Advocate.

10. What is the geographic target area that will be served by this project?

Target Area (specify geographic area) Carson City

OR

Community-wide

**For Public Improvement (construction) Projects ONLY:**

1. Is the proposed project part of a larger project or is it a stand-alone project? (If part of a larger project, please describe the entire project.)

N/A

2. Can this project be done in different phases?  Yes  No  
If YES, explain.

N/A

3. Have CDBG funds been used for an earlier phase?  Yes  No  
N/A

4. Who currently holds title to the property involved?

N/A

5. With whom will title be vested upon completion?

N/A

6. Do any rights-of-way, easements or other access rights need to be acquired?  
 Yes  No  N/A

7. If the project requires water rights or well permits, have they been acquired?  
 Yes  No  N/A

**For CDBG Economic Development projects ONLY:**

1. Identify the proposed employers that will be assisted with this project; (b) describe how they will comply with the requirement that at least 51% of the permanent full-time jobs created are either held by or made available to LMI persons; and (c) explain how they will document the jobs created and the income levels of the persons hired.

N/A

**For CDBG Housing Projects please indicate: N/A**

The number of homes to be rehabilitated: \_\_\_\_\_

The number of persons to be benefited: \_\_\_\_\_

## PROJECT MEASUREMENT

Carson City has implemented a Performance and Outcome Measurement System into the application and grant/project administration process. When completing this section, keep in mind that **outputs** are specific descriptions of what your project is intended to accomplish (such as serve a total of 20 clients) and **outcomes** are the benefits or changes that result from the program (such as how well the service met the client needs).

1. What are the projected **outputs**, or total number of people served, from this project?

RSVP volunteers will provide 50 new veteran clients and 25 current veteran clients in Carson City with access to the goods and services they need to emerge from poverty and/or enable them to remain independent and in their own homes with dignity. Additionally, veterans will be offered information and awareness about suicide prevention in collaboration with the Nevada Office of Suicide Prevention.

2. Of the total number of people in Question 1, how many of these are low-to-moderate income (LMI)? How many are Carson City residents?

At least 51% are LMI. All are Carson City residents age 62 and older.

3. What is the projected **outcome** of this project? (How will the outputs benefit the total number of people in Question 1?)

85% of the veterans surveyed will report that the Veterans VIP Program helped them access information and services that empowered them to emerge from poverty and/or enabled them to remain independent and in their own homes with dignity rather than having to be prematurely institutionalized. Surveys will also indicate that RSVP was a resource for veterans to access information and referrals concerning suicide prevention.

4. How do you plan to track clients served?

RSVP volunteers are required to submit monthly time reports. Data is tracked in two database systems: Volunteer Reporter (VR), which tracks monthly volunteer hours and activities, and the Social Assistance Management System (SAMS), which tracks all senior client information and services rendered on a monthly basis. RSVP conducts a client survey annually as well as ongoing assessments.

**PROJECT BUDGET**

Complete the Budget Summary chart below. This information is mandatory in order to be considered for a CDBG Grant. Detailed calculations **must** be attached in support of the proposed budget. Other funding is not required but will increase your score. Amount must match "Other Funding" from page #1. **Also attach Profit and Loss Statement, General Ledger, and Balance Sheet. Attach copies of funding commitment letters or other evidence of funding support, if applicable.**

<b>Project Title:</b>	<b>Requested Amount</b>	<b>Other Funding</b>	<b>In-Kind</b>	<b>Total Funds</b>
<b>Project Expenses FY 2016-17</b>				
Locked Filing Cabinet	\$ 492.99			\$ 492.99
2 Computer Workstations w/software	2,672.34			2,672.34
Printing/Promotion/Advertising	6,326.00			6,326.00
Training	150.00			150.00
Mileage	1,800.00			1,800.00
Cell Phones	500.00			500.00
2 Carson City AmeriCorps VISTAs		40,620.00		40,620.00
<b>TOTALS</b>	<b>\$11,941.33</b>	<b>\$ 40,620.00</b>		<b>\$52,561.33</b>

**AGENCY ASSETS**

<b>Unrestricted cash</b>	<b>\$79,106.04</b>
<b>Restricted cash*</b>	
<b>Total cash on hand</b>	<b>\$79,106.04</b>

\*If restricted cash, attach description and amount of restriction

**Have you applied for or received any funds or in-kind contributions from Carson City? If so, please describe.**

## BUDGET JUSTIFICATION

Please list each project expense from the previous page and explain in more detail. Include calculations. Use additional pages if necessary.

PROJECT EXPENSE	AMOUNT BUDGETED	JUSTIFICATION OF EXPENSE
Locked filing cabinet	\$ 492.99	Maintain confidential client files
2 Computer workstations with Software	2,672.34	Functional workstations with up-to-date software: includes computer, monitor, keyboard, printer
Printing/Promotion  Advertising	1,126.00  5,200.00	Printing brochures, flyers, business cards, stationery and envelopes  Newspaper Ads - $\$300 \times 4 = \$1,200$ Radio - $\$1,000 \times 4 = \$4,000$
Training	150.00	Suicide Prevention and Awareness @ \$75 ea. X 2
Mileage	1,800.00	\$75 per month x 2 AmeriCorps VISTAs X 12 months
Cell Phones	500.00	2 cell phones for 12 months

**PROJECT ADMINISTRATION****AGENCY DIRECTOR**

<b>Name:</b>	Susan C. Haas
<b>Title:</b>	Executive Director & C.E.O.
<b>Address</b>	2621 Northgate Lane, Suite 6, Carson City NV 89706
<b>Phone number:</b>	(775) 687-4680 x 2
<b>Email:</b>	shaas@nvrsvp.com

**PROJECT MANAGER**

<b>Name:</b>	Susan C. Haas
<b>Title:</b>	Executive Director & C.E.O.
<b>Address</b>	2621 Northgate Lane, Suite 6, Carson City NV 89706
<b>Phone number:</b>	(775) 687-4680 x 2
<b>Email:</b>	shaas@nvrsvp.com

**FISCAL MANAGER**

<b>Name:</b>	Nick Providenti
<b>Title:</b>	Controller
<b>Address</b>	2621 Northgate Lane, Suite 6, Carson City NV 89706
<b>Phone number:</b>	(775) 687-4680 x 5
<b>Email:</b>	nprovidenti@nvrsvp.com

**PERFORMANCE TRACKING CONTACT**

<b>Name:</b>	Carol Anacker
<b>Title:</b>	Executive Assistant & Grants Manager
<b>Address</b>	2621 Northgate Lane, Suite 6, Carson City NV 89706
<b>Phone number:</b>	(775) 687-4680 x 4
<b>Email:</b>	canacker@nvrsvp.com

## AGENCY INFORMATION

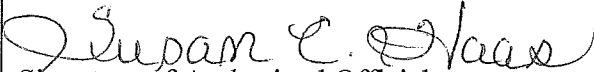
Date of incorporation	July 16, 1992
Date of IRS certification	June 18, 1992
Tax exempt number	94-3164032
DUNS#: ( <a href="http://www.dnb.com/get-a-duns-number.html">http://www.dnb.com/get-a-duns-number.html</a> )	06-786-7080


Attach items 1-6 to your application. Item 7 is optional. Please list and reference any additional attachments you are providing with your application. Do not include attachments unless they are needed to understand the project.

## INDEX OF ATTACHMENTS

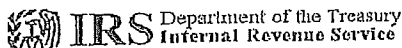
Attachment Number	Attachment Description	Attachment Included (✓)
1	<b>IRS Tax Exempt 501(c)(3) letter (available to print from Secretary of State's website)</b>	✓
2	<b>Proof of incorporation from Secretary of State (Certificate Only)</b> Go to <a href="https://www.nvsilverflume.gov/certificate">https://www.nvsilverflume.gov/certificate</a> You will need to register in order to get the certificate. Cost is \$50. <b>OR</b> Submit proof that your entity is active and in good standing. Go to <a href="http://nvsos.gov/sosentitysearch/">http://nvsos.gov/sosentitysearch/</a> and print your business entity information	✓
3	<b>Current Organization Chart with names of staff members</b>	✓
4	<b>Current Board of Directors and terms of office.</b> [If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CSSG funds.]	✓
5	<b>501(c)(3) non-profits: Copy of the most recent Federal Tax Return. Attach FIRST 2 PAGES (Form 990 or 990EX)</b>	✓
6	<b>Profit and Loss Statement, General Ledger, Balance Sheet</b>	✓
7	<b>Funding commitment letters and/or letters of support (if applicable)</b>	✓

Applicant certifies that to the best of his/her knowledge, all information submitted as part of this application is true. Applicant will comply with all grant and contract requirements if funding is approved.

 Signature of Authorized Official	1-13-17 Date
Susan C. Haas, Executive Director & C.E.O. Typed Name and Title of Authorized Official	(775) 687-4680 x 2 Phone Number

 Signature of President of Board of Directors	1-13-17 Date
Jerry Thurman, Board President Typed Name of President of Board of Directors	(775) 882-9537 Phone Number





Department of the Treasury  
Internal Revenue Service  
P.O. Box 2508, Room 4010  
Cincinnati OH 45201

In reply refer to: 4077552422  
July 16, 2010 LTR 4168C 0  
94-3164032 000000 00

00031024  
BODC: TE

RECEIVED

JUL 19 2010

Per \_\_\_\_\_

NEVADA RURAL COUNTIES RSVP  
PROGRAM INC  
2621 NORTHGATE LANE SUITE 6  
CARSON CITY NV 89706-1619



034124

Employer Identification Number: 94-3164032  
Person to Contact: Mr. R. Molloy  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your May 12, 2010, request for information regarding your tax-exempt status.

Our records indicate that your organization was recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in June 1998.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Beginning with the organization's sixth taxable year and all succeeding years, it must meet one of the public support tests under section 170(b)(1)(A)(vi) or section 509(a)(2) as reported on Schedule A of the Form 990. If your organization does not meet the public support test for two consecutive years, it is required to file Form 990-PF, Return of Private Foundation, for the second tax year that the organization failed to meet the support test and will be reclassified as a private foundation.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

FILED  
THE OFFICE OF THE  
SECRETARY OF STATE OF THE  
STATE OF NEVADA

JUL 16 1992

ARTICLES OF INCORPORATION  
OF THE  
NEVADA RURAL COUNTIES RSVP PROGRAM, INC.

RYL A. LAU SECRETARY OF STATE

7656-92 *Chylla* KNOW ALL MEN BY THESE PRESENTS: That we, the undersigned, all of whom are citizens and residents of the State of Nevada, have this day voluntarily associated ourselves together for the purpose of organizing a corporation, not formed for pecuniary profit, and without capital stock, under the laws of the State of Nevada, that is, Sections 82.006 to 82.690, inclusive, Nevada Revised Statutes,

AND FURTHER, being desirous of becoming the sponsor required by the federal agency called ACTION to assume the administration and financing of the Nevada Rural Counties RSVP Program now based in Carson City, Nevada,

AND FURTHER, being desirous of coming under the provisions of Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law), to obtain federal tax exempt status,

WE DO HEREBY ASSOCIATE OURSELVES, and make, subscribe and agree to the following:

ARTICLE I

a. THE NAME OF THE CORPORATION. The name of the Corporation shall be the Nevada Rural Counties RSVP Program, Inc.

b. PRINCIPAL PLACE OF BUSINESS. The principal place of business shall be located in Carson City, Nevada.

ARTICLE II

RESIDENT AGENT. The name of the natural person or corporation designated as the corporation's resident agent, and the resident agent's street address where it maintains an office for service of process, are as follows:

Janice R. Ayres  
801 N. Division St.  
Carson City, NV. 89703

ARTICLE III

TYPE OF CORPORATION. That this corporation is a non-profit corporation.

ARTICLE IV

a. GENERAL PURPOSES OF THE CORPORATION. The nature of the business, or objects or purposes proposed to be transacted, promoted or carried on by the corporation, are:

1. To provide the SPONSORING AGENCY authorized and required under TITLE II of the DOMESTIC VOLUNTEER SERVICES ACT OF 1973, AS AMENDED (PUBLIC LAW 93-113), for the benefit of the Nevada Rural Counties RSVP Program, based in Carson City, Nevada.

That the corporation may engage in any lawful activity, subject to any expressed limitations expressed herein, within the objects or purposes of this corporation, and as allowed under the Nonprofit Corporation Law of the State of Nevada.

~~b. FEDERAL ACTION REQUIREMENTS. Said corporation shall have~~ all the powers and responsibilities established by the federal agency ACTION, shall assume administration of, and manage the Nevada Rural Counties RSVP Program in a way that ensures fiscal and programmatic quality controls, compliance with ACTION policies and procedures, and accomplishment of stated goals. This corporation may not delegate or contract this responsibility to another entity without the prior approval of ACTION.

c. FEDERAL INTERNAL REVENUE REQUIREMENTS. Said corporation is organized exclusively for charitable purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in its Articles of Incorporation. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from Federal Income Tax under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

#### ARTICLE V

GOVERNING BOARD. The members of this corporation shall be the officers and members of the Board of Directors, and the business affairs of the corporation shall be managed by the Board of Directors, who shall have the responsibility of establishing policies for the corporation. The Board of Directors shall consist of 5 members.

The number, names and post office addresses, residence or business of the first board of directors, are the following:

1. Katherine MacDonald  
1521 Pinto Ct.  
Carson City, NV. 89701
2. Jerry Thurman  
308 N. Curry, #105  
Carson City, NV. 89703
3. Frank Sharp  
P.O. Box 2023  
Carson City, NV. 89702
4. John Barlow  
1182 Kenny Way  
Carson City, NV. 89701
5. Charles Daniels  
2898 Hwy. 50 East  
Carson City, NV. 89701

ARTICLE VI

BY-LAWS. The corporation shall have the power to adopt by-laws prescribing the duties of the officers and agents of the corporation, detailed organization and procedures of the corporation, the time and manner of its meetings, and any and all details incident to its organization and the efficient conduct and management of its affairs. Such by-laws of the corporation shall, thereafter, be amended only by an affirmative vote of the majority of the members of the board of directors.

ARTICLE VII

INCORPORATORS. The names and post office addresses, residence or business, of each of the incorporators signing the articles of incorporation are as follows:

1. Katherine MacDonald  
1521 Pinto Ct.  
Carson City, NV. 89702
2. Jerry Thurman  
308 N. Curry, #105  
Carson City, NV. 89703
3. Frank Sharp  
P.O. Box 2023  
Carson City, NV. 89702
4. John Barlow  
1182 Kenny Way  
Carson City, NV. 89701
5. Charles Daniels  
2898 Hwy. 50 East  
Carson City, NV. 89701

ARTICLE VIII

PERPETUAL EXISTENCE. The corporation is to have a perpetual existence.

IN WITNESS WHEREOF, we have hereunto set our hands as Incorporators, this date: JULY 15, 1992

<u>Katherine MacDonald</u>	Katherine MAC DONALD
<u>Jerry Thurman</u>	JERRY THURMAN
<u>John Barlow</u>	JOHN BARLOW
<u>Charles Daniels</u>	CHARLES DANIELS
<u>Frank Sharp</u>	FRANK SHARP

STATE OF NEVADA )  
 ) SS  
CARSON CITY )

On this date: July 15, 1992, before me, the undersigned, a Notary Public, personally appeared.

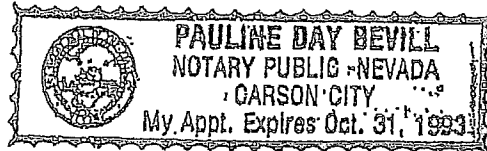
1. Katherine MacDonalld
2. Jerry Thurman
3. Frank Sharp
4. John Barlow
5. Charles Daniels

known to me to be the persons described in and who executed the foregoing ARTICLES OF INCORPORATION, and who acknowledged to me that they executed the same freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS MY HAND AND OFFICIAL SEAL.

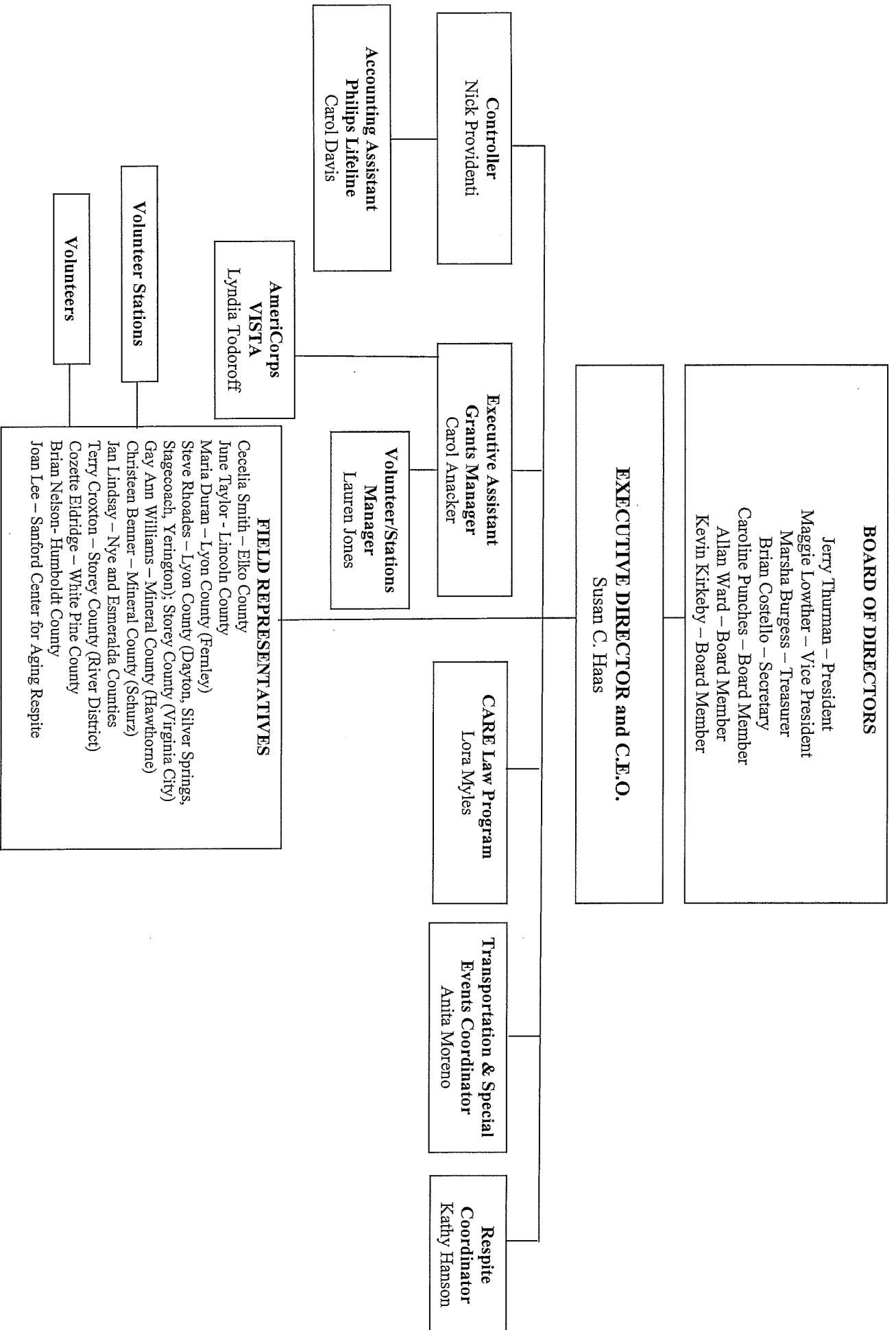
Pauline Day Bevil  
NOTARY PUBLIC

RECEIVED  
JUL 16 1992



SECRETARY OF STATE

**Nevada Rural Counties RSVF Program, Inc.  
Organizational Chart**



**RSVP BOARD OF DIRECTORS ROSTER**

Board Terms are Indefinite

November 25, 2015

**Jerry Thurman – Board President****President, Insured Financial Services**

6175 McDowell Road

Carson City, NV 89706

(775) 882-9537 Cell: 885-2525

**jerryanddelia@charter.net****Margaret Lowther – Board Vice President****Retired Storey County Auditor/Recorder**

P.O. Box 349

Virginia City, NV 89440

(775) 847-0563 Cell: 720-7102

**lowthermaggie@gmail.com****Marsha Burgess – Board Treasurer****Retired CEO, Greater Nevada Credit Union**

2249 Pinion Hills Drive

Carson City, NV 89701

(775) 882-7600 – Fax 882-7320 Cell: 220-8218

**marshabrgss@aol.com****Caroline PUNCHES – Board Member****Retired Executive Director, Northern Nevada Chapter,****American Red Cross**

206 La Costa Avenue

Dayton, NV 89403

(775) 246-1850

**Cpunches206@charter.net****Brian Costello – Board Member****Carson Region Director, NV Energy**

P.O. Box 10100

Reno, NV 89520

(775) 834-5772

**bcostello@nvenergy.com****Allan Ward - Board Member****Franchise Owner Home Instead Senior Care (Carson)****Personal Care Services, LLC**

444 W. Washington Street

Carson City, NV 89703

P: 775-283-0333

M: 775-354-5299

F: 775-283-0124

**allan@homeinsteadreno.com****Kevin S. Kirkeby – Board Member****Business Analyst, ElectraTherm, Reno**

2555 Clear Acre Ln. #83

Reno, NV 89512

P: 775-230-6185

**Kevin.s.kirkeby@gmail.com**





Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
RSVP'S MISSION: TO HELP FRAIL, HOMEBOUND, AND LOW-INCOME SENIORS REMAIN INDEPENDENT BY PROVIDING HIGH QUALITY PROGRAMS WHICH ALLOW THEM TO STAY IN THEIR HOMES WITH DIGNITY. ADDITIONALLY, RSVP COORDINATES A VOLUNTEER NETWORK OF SENIORS WHO USE THEIR SKILLS AND TALENTS TO

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 803,572. including grants of \$ 0. ) (Revenue \$ 113,774. )
PROVIDED VOLUNTEERS, HOME VISITS, RESPITE CARE, LIFELINE EMERGENCY NOTIFICATION SERVICES, HEALTH AND WELFARE TRAINING, AND TRANSPORTATION SERVICES TO HOMEBOUND SENIORS AND DISABLED PERSONS TO PROMOTE INDEPENDENT LIVING AND PREVENT THEM FROM BEING INSTITUTIONALIZED.

4b (Code: ) (Expenses \$ 215,460. including grants of \$ 0. ) (Revenue \$ 0. )
PROVIDED VOLUNTEER SERVICES TO PUBLIC AND NON-PROFIT COMMUNITY AGENCIES

4c (Code: ) (Expenses \$ 55,708. including grants of \$ 0. ) (Revenue \$ 0. )
PROVIDED LEGAL SERVICES AND OTHER SUPPORT FOR SENIORS THROUGHOUT NEVADA.

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,074,740.

## Nevada Rural Counties RSVP Program, Inc.

## Balance Sheet

As of December 31, 2016

	<u>Dec 31, 16</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
Mutual of Omaha Bank - Checking	29,215.07
Mutual of Omaha Bank-Federal	135.89
Mutual of Omaha Bank-Non Federa	274.03
CareLaw Cash Account	1,621.16
Mutual of Omaha Bank-Fireworks	336.24
Smith Barney Account	47,316.65
PETTY CASH	<u>250.00</u>
<b>Total Checking/Savings</b>	<u>79,149.04</u>
<b>Accounts Receivable</b>	
1200 - Accounts Receivable	
1210 - Grants Receivable	13,315.00
1200 - Accounts Receivable - Other	<u>8,124.56</u>
<b>Total 1200 - Accounts Receivable</b>	<u>21,439.56</u>
<b>Total Accounts Receivable</b>	<u>21,439.56</u>
<b>Total Current Assets</b>	<u>100,588.60</u>
<b>Fixed Assets</b>	
<b>EQUIPMENT</b>	
Depreciation	-87,937.40
Original Cost	<u>102,794.54</u>
<b>Total EQUIPMENT</b>	<u>14,857.14</u>
<b>VEHICLES</b>	
Depreciation	-121,285.04
Original Cost	<u>268,636.65</u>
<b>Total VEHICLES</b>	<u>147,351.61</u>
<b>Total Fixed Assets</b>	<u>162,208.75</u>
<b>Other Assets</b>	
<b>Prepaid Expenses</b>	
Prepaid Expense-Service Contrac	3,602.00
Prepaid Expenses - Other	<u>9,496.04</u>
<b>Total Prepaid Expenses</b>	<u>13,098.04</u>
<b>Total Other Assets</b>	<u>13,098.04</u>
<b>TOTAL ASSETS</b>	<u><u>275,895.39</u></u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
Accounts Payable	23,807.99
<b>Other Current Liabilities</b>	
Deferred Income	63,283.07
Payroll Liabilities	-807.50
Direct Deposit Liabilities	256.42
Payroll Deductions	612.30
Payroll Accruals	<u>9,099.56</u>
<b>Total Other Current Liabilities</b>	<u>72,443.85</u>
<b>Total Current Liabilities</b>	<u>96,251.84</u>
<b>Total Liabilities</b>	<u>96,251.84</u>
<b>Equity</b>	
Retained Earnings	165,082.41
Fund Balance-Vehicle Restricted	12,798.00
Initial Fund Balance-Equipment	7,952.95
Net Income	<u>-6,189.81</u>
<b>Total Equity</b>	<u>179,643.55</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><u>275,895.39</u></u>

## LIST OF SOURCES OF INCOME LISTED ON PROFIT & LOSS - 2016

**Donations** - Personal donations for Respite, Transportation, and general program donations

**Grants** - City and County Grants

- Fund for Healthy Nevada
- Nevada Department of Transportation Grants
- Aging and Disability Services Division Grants
- Corporation for National and Community Service
- Foundations and Corporate Grants
  - John Ben Snow Memorial Trust
  - Union Pacific Foundation
  - Nevada Energy Foundation
  - Robert Z. Hawkins Foundation
  - EJC Foundation
  - Barrick Gold
  - Newmont Mines
  - AdminiTrust Foundation
  - Nevada Bar Foundation

**Miscellaneous Income** - Interest earned at bank accounts

**Program Revenue** -

- Carelaw Private Donations
- PERS - Lifeline Billings and Donations
- Farmers Market - Senior Coupons
- Farmers Market - WIC Coupons

**Fundraising** -

- Three Carson City Fairs
- Special Events

**Nevada Rural Counties RSVP Program, Inc.**  
**Profit & Loss Prev Year Comparison**  
 January through December 2016

	Jan - Dec 16	Jan - Dec 15	\$ Change	% Change
<b>Ordinary Income/Expense</b>				
<b>Income</b>				
Home Companion Respite Program	5,457.00	8,509.75	-3,052.75	-35.87%
Transportation Donations	12,927.10	10,642.75	2,284.35	21.46%
Contributions Income	25,320.18	21,721.78	3,598.40	16.57%
Donated Professional services *	11,790.97	538,190.00	-526,399.03	-97.81%
Grants	718,954.92	914,063.36	-195,108.44	-21.35%
Miscellaneous Income	541.87	10.52	531.35	5,050.86%
Program Rev	348,801.67	262,308.92	86,492.75	32.97%
Fundraising Rev	98,331.15	102,078.06	-3,746.91	-3.67%
United Way of Northern Nevada	8,422.50	7,650.64	771.86	10.09%
United Way of Southern Nevada	739.57	123.81	615.76	497.34%
<b>Total Income</b>	<b>1,231,286.93</b>	<b>1,865,299.59</b>	<b>-634,012.66</b>	<b>-33.99%</b>
<b>Gross Profit</b>	<b>1,231,286.93</b>	<b>1,865,299.59</b>	<b>-634,012.66</b>	<b>-33.99%</b>
<b>Expense</b>	<b>1,237,476.74</b>	<b>1,783,549.86</b>	<b>-546,073.12</b>	<b>-30.62%</b>
<b>Net Ordinary Income</b>	<b>-6,189.81</b>	<b>81,749.73</b>	<b>-87,939.54</b>	<b>-107.57%</b>
<b>Net Income</b>	<b>-6,189.81</b>	<b>81,749.73</b>	<b>-87,939.54</b>	<b>-107.57%</b>

\* Donated Professional Services of the RSVP Care Law Attorney are calculated at the time of the 2016 Audit

## STATE OF NEVADA

BRIAN SANDOVAL  
Governor

RICHARD WHITLEY, MS  
Interim Director



MARTA E. JENSEN  
Acting Administrator

TRACEY D. GREEN, MD  
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

Bureau of Child, Family & Community Wellness

Nevada Office of Suicide Prevention

445 Apple Street, Suite 104

Reno, Nevada 89502

Telephone (775) 687-0856 Fax (775) 689-2067

May 26, 2015

Susan C. Haas, Executive Director & C.E.O.  
Nevada Rural Counties RSVP Program, Inc.  
P.O. Box 1708 (89702)  
2621 Northgate Lane, Ste 6  
Carson City, NV 89706

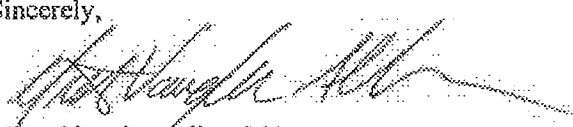
Dear Ms. Haas,

I am writing this letter to confirm the Nevada Office of Suicide Prevention's willingness and commitment to work collaboratively with the AmeriCorps VISTA Veteran's "VIP" (Volunteers in Partnership) Program. RSVP is requesting two VISTAS from the Corporation for National and Community Service (CNCS) for their Veterans Program. They intend to make suicide prevention and awareness a large component of their assistance to Veterans.

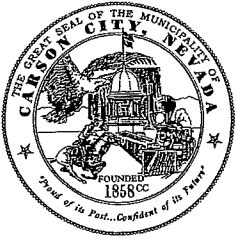
Nevada has consistently ranked among the highest states in the country in suicide deaths with almost 24% of those suicide deaths being a Nevada veteran; in order to impact the tragic loss of life to suicide in our state, the Nevada Office of Suicide Prevention seeks to build and expand effective partnerships with other agencies collaboratively striving to make a difference in suicide prevention. The Office of Suicide Prevention, through its partnership with RSVP and other agencies across the state, has worked diligently to improve Nevada's capacity to prevent suicide and related behaviors. By continuing to improve the collaborative relationships throughout the state, we will successfully enhance infrastructures to reduce the rate of suicide and attempts, prevent and reduce the impact of substance abuse, and increase our ability to help Nevadans achieve recovery.

If this request is granted, the Office of Suicide Prevention will support RSVP in training the new VISTAS and community members, volunteers and caregivers they will work with in supporting veterans. We are also committed to mentoring and assisting with ongoing trainings logistically as resources allow.

Sincerely,



Misty Vaughan Allen, MA  
Suicide Prevention Coordinator



# Community Development Block Grant (CDBG) Program Application Fiscal Year 2017–2018

## GENERAL INFORMATION

PLEASE READ ATTACHED INSTRUCTIONS ON PAGE NN FOR MORE INFORMATION.  
 APPLICATIONS ARE DUE\*: **JANUARY 13, 2017, 4:00 P.M.**  
 PLEASE SUBMIT THE ORIGINAL PLUS 2 COPIES TO:

Carson City Dept. of Finance  
 201 N. Carson St., Ste. 3  
 Carson City, NV 89701

\*The deadline established is firm. Any application received after the deadline will not be considered for funding. Applications must be unstapled. An electronic version of this document is available at [CARSON.ORG/CDBG](http://CARSON.ORG/CDBG).

## APPLICANT INFORMATION

Agency Name: Accessible Space, Inc. (ASI)	
Agency Mailing Address: 2550 University Ave. West	
Project Name: Frost Yasmer Estates	
Project Address/Location: 1009 East 5 <sup>th</sup> St. Carson City, NV 89701	
Agency Director: Stephen Vander Schaaf	
Board Chairperson: Mark Hamel	
Contact Person: Devin Vander Schaaf	
Phone Number: 800-466-7722	Email: <a href="mailto:dvanderschaaf@accessiblespace.org">dvanderschaaf@accessiblespace.org</a>
Fax: 651-645-0541	Website (if applicable): <a href="http://www.accessiblespace.org">www.accessiblespace.org</a>
How long has your organization been in existence? 1978	In Carson City? 5/1997

## PROJECT FUNDING

Requested amount:	\$70,000
Other funding:	\$40,000
Total project cost:	\$110,000

## PROJECT SUMMARY

Please provide a **brief** summary of the proposed project (not the organization), including what the project is, who will be served, how many will be served, and where will it take place. The description should be **no more than five sentences**.

The elevator at Frost Yasmer Estates, which was built in 1997, needs to be replaced. Certain parts of the elevator are no longer being manufactured and some parts are obsolete. We are currently at a point with the elevator where a part could go out and we might not be able to get the elevator working, which is imperative for our residents with physical disabilities, mobility impairments and/or traumatic brain injuries.

## FUNDING CATEGORY

<input type="checkbox"/> Public Improvements	<input type="checkbox"/> Public Services
<input type="checkbox"/> Economic Development	<input checked="" type="checkbox"/> Housing

## PROJECT ELIGIBILITY

A. This project meets at least ONE of the HUD national objectives listed below (please check all that apply)

1. Benefits low/moderate income individuals/households  
 2. Addresses the prevention or elimination of slums or blight  
 3. Meets a particularly urgent community development need

B. Check all statements that describe HOW this project meets one of the National Objectives above:

**L/M Area Benefit:** the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. **Examples:** street improvements, water/sewer lines, neighborhood facilities, façade improvements in neighborhood commercial districts.

**L/M Limited Clientele:** the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. **Examples:** construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

**L/M Housing:** the project adds or improves permanent residential structures that will be occupied by L.M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family structures. Rental units for L/M income persons must be occupied at affordable rents. Examples: acquisition of property for permanent housing, rehabilitation of permanent housing, conversion of non-residential structures into permanent housing.

**L/M Jobs:** the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. **Examples:** loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close with resultant loss of jobs, a majority of which are held by L/M persons.

**Microenterprise Assistance:** the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. (A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

**Slum or Blighted Area:** the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area.



\_\_\_\_\_ **Spot Blight:** the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to the extent necessary to eliminate conditions detrimental to public health and safety. **Examples:** historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

**C. Project Category (check one):**

- \_\_\_\_\_ Public Service (i.e., a new service or an **increase** in the level of service)
- \_\_\_\_\_ Public Facilities and Improvements (i.e., homeless shelter, water and sewer facilities, flood and drainage improvements, fire protection facilities/equipment, community centers, senior centers, health centers, parking, landscaping, streets, curbs, gutters and sidewalks, parks and playgrounds).
- \_\_\_\_\_ Acquisition of Real Property
- \_\_\_\_\_ Disposition of Real Property (sale, lease or donation)
- \_\_\_\_\_ Privately-Owned Utilities
- \_\_\_\_\_ Relocation Payments and Assistance to Displaced Persons
- Removal of Architectural Barriers, Handicapped Accessibility
- \_\_\_\_\_ Housing Rehabilitation (weatherization)
- \_\_\_\_\_ Historic Preservation
- Commercial or Industrial Rehabilitation, including façade improvements and correction of code violations
- \_\_\_\_\_ Special Economic Development or assistance to microenterprises

**PROJECT DESCRIPTION**

The Five-year Consolidated Plan identifies priority community development needs for Carson City (see table on page 13). The need for your proposed project will be determined by identifying how the project impacts upon the adopted Consolidated Plan Priority Needs. Greater consideration will be given to projects that provide a clear description of the project with supporting data and methodology of how the project will meet these needs.

- 1. Describe the proposed project, including how the project will address the National Objective indicated and whether the project is new, ongoing, or expanded from previous years. (Please use allotted space)

**Frost Yasmer Estates is an accessible, rent-subsidized and service enriched apartment community for very low-income adults with physical disabilities, traumatic brain injuries and/or mobility impairments. The elevator at Frost Yasmer, which is critical for our disabled resident's daily life, is in dire need of modernization. This is a new project at Frost Yasmer, and the project satisfies two national objectives. The project benefits very low-income individuals and is a particularly urgent community development need.**

- 2. If the proposed project already exists, please describe your success rates in providing services to low- to moderate-income persons: **We have been providing accessible, affordable housing to very low-income adults with physical disabilities, traumatic brain injuries and/or mobility impairments since 1978, and we operate at or below a 4% vacancy rate. We manage 121 buildings nation-wide and own 137 buildings nationwide, including 19 in the state of Nevada. We also provide assisted living services, independent living services and own a rehabilitation center in Las Vegas, Nevada, called the Nevada Community Enrichment Program (NCEP).**

- 3. Describe who will benefit from the proposed project.

**Very low-income adults with physical disabilities, traumatic brain injuries and/or mobility impairments will benefit from this project. There are 24 one and two bedroom apartments at Frost Yasmer, and 24 residents at the apartment community. All residents are either very low-income or extremely low-income. Many receive our on-site supportive living services due to their brain injuries and/or physical disabilities.**

- 4. If your project is designed to serve a specific or limited clientele, please indicate the population you will be serving with your project/program:

Abused Children       Illiterate Persons       Homeless Persons  
 Battered Spouses       Severely Disabled Adults       Migrant Farm Workers  
 Elderly       Other (Please explain)

5. If your project will not be serving a limited clientele, explain how you will document client income and how you will document that at least 51% of your clientele will be low-to-moderate income:

**In order to qualify for our housing applicants must make at or below 50% of the Area Median Income (AMI). Residents at Frost Yasmer Estates are very low-income to extremely low-income and pay 30% of their gross adjusted monthly income for rent, which is a HUD requirement. We verify income by checking bank accounts, tax statements and other IRS forms.**

6. How will the funds be used on this project?

**We have already gotten bids for this project. The bid that we received from Thyssenn Krupp is for replacing the obsolete parts on the elevator. The second bid is from Simplex Grinell, and it is for upgrades to the fire alarm, fire control panel and sprinkler system in order to accommodate the replacement of the elevator, and both estimates are attached. We are providing \$40,000 toward to the total cost of the project from Frost Yasmer's reserve for replacement funds.**

7. Can your organization reduce the need for grant funding in the future and become self-sustaining? Explain.

**This is the first time we have asked for a CDBG grant from Carson City. This is a unique situation given that the elevator parts are obsolete; we don't foresee needing additional grant funding in the future. We have a reserve for replacement fund for the apartment community; however, we must keep \$1,000 per unit in the account per HUD guidelines. Therefore, our contribution of \$40,000 is the most we can comfortably contribute to the project.**

8. Can you still proceed with your project if you are awarded partial funding? Please provide a detailed explanation.

**We cannot. We are contributing \$40,000 from our reserve for replacement fund, which is the maximum amount we are comfortable offering given HUD restrictions.**

9. Are there other organizations that provide the same service as your organization? If so, how do you coordinate your services?

**Nevada Supportive Housing (NSH) enables individuals who have a physical disability and/or brain injury to live independently with access to 24 hour per day shared supportive living services. This program is open to Medicaid eligible consumers who live at Frost Yasmer Estates in Carson City, Nevada. Otherwise, we are one of the few providers of accessible, affordable and service enriched housing of this kind in Carson City.**

10. What is the geographic target area that will be served by this project?

Target Area (specify geographic area) \_\_\_\_\_

OR  
✓ Community-wide

**For Public Improvement (construction) Projects ONLY:**

1. Is the proposed project part of a larger project or is it a stand-alone project? (If part of a larger project, please describe the entire project.)
  
2. Can this project be done in different phases? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If YES, explain.
  
3. Have CDBG funds been used for an earlier phase? \_\_\_\_\_ Yes \_\_\_\_\_ No
  
4. Who currently holds title to the property involved?
  
5. With whom will title be vested upon completion?
  
6. Do any rights-of-way, easements or other access rights need to be acquired?  
\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ N/A
  
7. If the project requires water rights or well permits, have they been acquired?  
\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ N/A

**For CDBG Economic Development projects ONLY:**

1. Identify the proposed employers that will be assisted with this project; (b) describe how they will comply with the requirement that at least 51% of the permanent full-time jobs created are either held by or made available to LMI persons; and (c) explain how they will document the jobs created and the income levels of the persons hired.

**For CDBG Housing Projects please indicate:**

The number of homes to be rehabilitated: \_\_\_\_\_ 24 \_\_\_\_\_

The number of persons to be benefited: \_\_\_\_\_ 24 \_\_\_\_\_

**PROJECT MEASUREMENT**

Carson City has implemented a Performance and Outcome Measurement System into the application and grant/project administration process. When completing this section, keep in mind that **outputs** are specific descriptions of what your project is intended to accomplish (such as serve a total of 20 clients) and **outcomes** are the benefits or changes that result from the program (such as how well the service met the client needs).

1. What are the projected **outputs**, or total number of people served, from this project?  
**Frost Yasmer is currently home to 24 individuals. However, by fixing the elevator, we can ensure that future residents with physical disabilities will have a modern, fully operational elevator for years to come. Securing this funding will ensure that none of our current residents will get stuck on the second floor or have to temporarily relocated if our elevator were to fail completely. Moreover, by finally fixing the elevator, we could use future reserve for replacement dollars on other items in need of replacement, thereby becoming more self-sufficient.**
  
2. Of the total number of people in Question 1, how many of these are low-to-moderate income (LMI)? How many are Carson City residents? **Every resident must be very low-income to qualify to live at Frost Yasmer Estates. Every one of these individuals are Carson City residents.**
  
3. What is the projected **outcome** of this project? (How will the outputs benefit the total number of people in Question 1?) **Modernizing an outdated elevator with obsolete parts will save our residents a lot of trouble down the road. Our residents rely on the elevator since they are physically disabled; if the outdated elevator were to go down it would create accessibility issues and dramatically impact the daily lives of our residents. We will save time and money by fully addressing this issue and fixing it completely.**
  
4. How do you plan to track clients served?  
**The apartment community is home to 24 very low-income adults with physical disabilities, traumatic brain injuries and/or mobility impairments.**

**PROJECT BUDGET**

Complete the Budget Summary chart below. This information is mandatory in order to be considered for a CDBG Grant. Detailed calculations **must** be attached in support of the proposed budget. Other funding is not required but will increase your score. Amount must match "Other Funding" from page #1. **Also attach Profit and Loss Statement, General Ledger, and Balance Sheet. Attach copies of funding commitment letters or other evidence of funding support, if applicable.**

<b>Project Title:</b>	<b>Requested Amount</b>	<b>Other Funding</b>	<b>In-Kind</b>	<b>Total Funds</b>
<b>Project Expenses FY 2016-17</b>				
Elevator update and related	\$70,000	\$40,000		\$110,000
<b>TOTALS</b>	<b>\$70,000</b>	<b>\$40,000</b>		<b>\$110,000</b>

**AGENCY ASSETS**

<b>Unrestricted cash</b>	Frost Yasmer: \$1786.95 ; ASI: \$4,651,841.53
<b>Restricted cash*</b>	Frost Yasmer: \$102,369.15; ASI \$2,685,784.30
<b>Total cash on hand</b>	

**\*If restricted cash, attach description and amount of restriction**

**Have you applied for or received any funds or in-kind contributions from Carson City? If so, please describe.**

**We have not received funds from Carson City. As mentioned in the cover letter, it is important to note that Frost Yasmer Estates is a nonprofit affiliate of Accessible Space, Inc. (ASI). HUD requires all HUD projects to operate successfully without sponsor**

contribution, which is why ASI cannot contribute to this project. Due to HUD regulations, Frost Yasmer Estates must keep a minimum of \$1,000 per unit in the reserve for replacement budget at all times.

**BUDGET JUSTIFICATION**

Please list each project expense from the previous page and explain in more detail. Include calculations. Use additional pages if necessary.

PROJECT EXPENSE	AMOUNT BUDGETED	JUSTIFICATION OF EXPENSE
See attachments for estimates of proposed project		
Elevator Upgrade Cost	<b>98,784.00</b>	Current elevator has parts that are obsolete and no longer made. If the elevator breaks down repairs would be extremely costly. Our residents need the elevator to function due to their disabilities; any down time would be extremely problematic for them.
Upgrades to the fire alarm, fire control panel and sprinkler system in order to accommodate the replacement of the elevator	<b>10,880</b>	The fire alarm, fire control panel and sprinkler system would also have to be updated in order to accommodate elevator replacement.

**PROJECT ADMINISTRATION**

**AGENCY DIRECTOR**

<b>Name:</b>	<b>Mr. Stephen Vander Schaaf</b>
<b>Title:</b>	<b>President/CEO</b>
<b>Address</b>	<b>2550 University Ave West. Saint Paul, MN 55114</b>
<b>Phone number:</b>	<b>800-466-7722</b>
<b>Email:</b>	<b>svanderschaaf@accessiblespace.org</b>

**PROJECT MANAGER**

<b>Name:</b>	<b>Mr. David Lacklund</b>
<b>Title:</b>	<b>Housing and Facilities Maintenance Technic</b>
<b>Address</b>	<b>960 W. Grand Ave Suite J Grover Beach, CA 93433</b>
<b>Phone number:</b>	<b>805-270-4591</b>
<b>Email:</b>	<b>dlacklund@accessiblespace.org</b>

**FISCAL MANAGER**

<b>Name:</b>	<b>Mr. Ken Berry</b>
<b>Title:</b>	<b>Director of Property Management</b>
<b>Address</b>	<b>2550 University Ave West. Saint Paul, MN 55114</b>
<b>Phone number:</b>	<b>800-466-7722 Ext. 284</b>
<b>Email:</b>	<b>kberry@accessiblespace.org</b>

**PERFORMANCE TRACKING CONTACT**

<b>Name:</b>	<b>Ms. Stephanie Brooks</b>
<b>Title:</b>	<b>Property Management Generalist</b>
<b>Address</b>	<b>2550 University Ave West. Saint Paul, MN 55114</b>
<b>Phone number:</b>	<b>800-466-7722 Ext 241</b>
<b>Email:</b>	<b>sbrooks@accessiblespace.org</b>



## AGENCY INFORMATION


Date of incorporation	5/2/78
Date of IRS certification	8/2/78
Tax exempt number	41-1330242
DUNS#: ( <a href="http://www.dnb.com/get-a-duns-number.html">http://www.dnb.com/get-a-duns-number.html</a> )	962293619

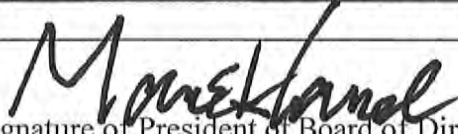
Attach items 1-6 to your application. Item 7 is optional. Please list and reference any additional attachments you are providing with your application. Do not include attachments unless they are needed to understand the project.

## INDEX OF ATTACHMENTS

Attachment Number	Attachment Description	Attachment Included (✓)
1	<b>IRS Tax Exempt 501(c)(3) letter (available to print from Secretary of State's website)</b>	(✓)
2	<b>Proof of incorporation from Secretary of State (Certificate Only)</b> Go to <a href="https://www.nvsilverflume.gov/certificate">https://www.nvsilverflume.gov/certificate</a> You will need to register in order to get the certificate. Cost is \$50. <b>OR</b> Submit proof that your entity is active and in good standing. Go to <a href="http://nvsos.gov/sosentitysearch/">http://nvsos.gov/sosentitysearch/</a> and print your business entity information	(✓)
3	<b>Current Organization Chart with names of staff members</b>	(✓)
4	<b>Current Board of Directors and terms of office.</b> [If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CSSG funds.]	(✓)
5	<b>501(c)(3) non-profits: Copy of the most recent Federal Tax Return. Attach FIRST 2 PAGES (Form 990 or 990EX)</b>	(✓)
6	<b>Profit and Loss Statement, General Ledger, Balance Sheet</b>	(✓)
7	<b>Funding commitment letters and/or letters of support (if applicable)</b>	(✓)
8	<b>ThyssenKrupp Elevator Modernization Proposal (20 pg. Estimate) &amp; Simplex Grinnell Quotation (6 pg.)</b>	(✓)
9	<b>Statement of Financial Position, Frost Yasmer Estates</b>	(✓)
10	<b>Frost Yasmer Estates Brochure and Marketing Materials</b>	(✓)

Applicant certifies that to the best of his/her knowledge, all information submitted as part of this application is true. Applicant will comply with all grant and contract requirements if funding is approved.

	
Signature of Authorized Official	Date 1/12/17
Devin C. Vander Schaaf	800-466-7722 Ext. 225
Typed Name and Title of Authorized Official	Phone Number

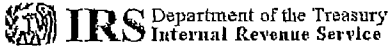
	
Signature of President of Board of Directors	Date 1/12/17
Mark Hamel, Esq	612-340-8716
Typed Name of President of Board of Directors	Phone Number

**Table 2B: Priority Community Development Needs  
(This table is for your reference only. Do not fill out)**

Priority Need	Priority Need Level	Unmet Priority Need	Dollars to Address Need	5 Yr Goal Plan/Act	Annual Goal Plan/Act	Percent Goal Completed
Acquisition of Real Property	Medium					
Disposition	Low					
Clearance and Demolition	Low					
Clearance of Contaminated Sites	Low					
Code Enforcement	Low					
<b>Public Facility (General)</b>	<b>Measures by # of Projects/Facilities</b>					
Senior Centers	Medium					
Handicapped Centers	Medium					
Homeless Facilities	High	1		1		
Youth Centers	Medium					
Neighborhood Facilities	High	1		1		
Child Care Centers	Medium					
Health Facilities	Medium					
Mental Health Facilities	High					
Parks and/or Recreation Facilities	High	1		1		
Parking Facilities	Medium					
Tree Planting	Low					
Fire Stations/Equipment	Medium					
Abused/Neglected Children Facilities	High	1		1		
Asbestos Removal	Low					
Non-Residential Historic Preservation	Medium					
Other Public Facility Needs	Medium					
<b>Infrastructure (General)</b>	<b>Measured by # of Projects/Facilities</b>					
Water/Sewer Improvements	Medium					
Street Improvements	High					
Sidewalks	High	4		4		
Solid Waste Disposal Improvements	Medium					
Flood Drainage Improvements	Medium					
Other Infrastructure	Medium					
<b>Public Services (General)</b>	<b>Measured by # of Persons Served</b>					
Senior Services	Medium					
Handicapped Services	High			50		
Legal Services	Medium					
Youth Services	High			250		
Child Care Services	Medium					

Transportation Services	Medium					
Substance Abuse Services	High			300		
Employment/Training Services	Medium					
Health Services	Medium					
Lead Hazard Screening	Medium					
Crime Awareness	Medium					
Fair Housing Activities	High	1		50		
Tenant Landlord Counseling	Medium					
Other Services	Medium					
<b>Economic Development (General)</b>	<b>Measured by Business Assisted and Jobs Created</b>					
C/I Land Acquisition/Disposition	Medium					
C/I Infrastructure Development	Medium					
C/I Building Acq/Const/Rehab	Medium					
Other C/I	Medium					
ED Assistance to For-Profit	Low					
ED Technical Assistance	Medium					
Micro-enterprise Assistance	Low					
Other						
Transit Oriented Development	Medium					
Urban Agriculture	Medium					

1	<b>IRS Tax Exempt 501(c)(3) letter (available to print from Secretary of State's website)</b>
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CINCINNATI OH 45999-0059

In reply refer to: 1000195772  
July 09, 2015 LTR 4168C 0  
41-1330242 000000 00  
Input Op: 0248205449 00024735  
BODC: TE

ACCESSIBLE SPACE INC  
2550 UNIVERSITY AVE WEST STE 330N  
ST PAUL MN 55114



032781

Employer Identification Number: 41-1330242  
Person to Contact: Ms Chambers  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

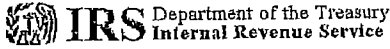
This is in response to your June 29, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in March 1981.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website [www.irs.gov/eo](http://www.irs.gov/eo) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.



CINCINNATI OH 45999-0059

032781.576138.5729.22530 1 AB 0.416 530



ACCESSIBLE SPACE INC  
2550 UNIVERSITY AVE WEST STE 330N  
ST PAUL MN 55114



032781

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT,  
EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window.

1000195772

BODCD-TE

Use for payments

Letter Number: LTR4168C  
Letter Date : 2015-07-09  
Tax Period : 000000



\*411330242\*

INTERNAL REVENUE SERVICE

CINCINNATI OH 45999-0059



ACCESSIBLE SPACE INC  
2550 UNIVERSITY AVE WEST STE 330N  
ST PAUL MN 55114

411330242 NP ACCE 00 2 000000 670 000000000000

2	<b>Proof of incorporation from Secretary of State (Certificate Only)</b> Go to <a href="https://www.nvsilverflume.gov/certificate">https://www.nvsilverflume.gov/certificate</a> You will need to register in order to get the certificate. Cost is \$50. <b>OR</b> Submit proof that your entity is active and in good standing. Go to <a href="http://nvsos.gov/sosentitysearch/">http://nvsos.gov/sosentitysearch/</a> and print your business entity information
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Q 374



To All To Whom These Presents Shall Come, Greeting:

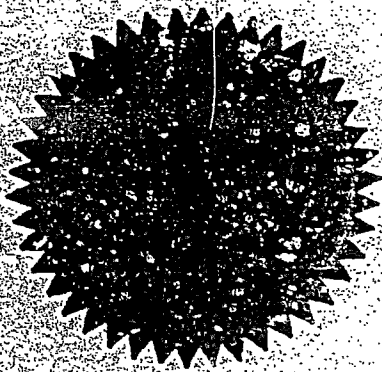
Whereas, Articles of Incorporation, duly signed and acknowledged under oath, have been recorded in the office of the Secretary of State, on the ---2nd--- day of May, A. D. 19 78 for the incorporation of

Accessible Space, Inc.

under and in accordance with the provisions of the Minnesota Nonprofit Corporation Act, Minnesota Statutes, Chapter 317;

Now, Therefore, I, Joan Anderson Growe, Secretary of State of the State of Minnesota, by virtue of the powers and duties vested in me by law, do hereby certify that the said Accessible Space, Inc.

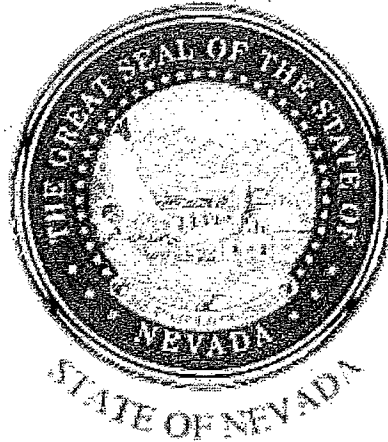
is a legally organized Corporation under the laws of this State.



Witness my official signature hereunto subscribed and the Great Seal of the State of Minnesota hereunto affixed this ---second--- day of May in the year of our Lord one thousand nine hundred and seventy-eight.

*Joan Anderson Growe*  
Secretary of State.

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ACCESSIBLE SPACE, INC.**, as a non-profit corporation duly organized under the laws of Minnesota and existing under and by virtue of the laws of the State of Nevada since December 9, 1991, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 19, 2016.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE  
Secretary of State

Electronic Certificate  
Certificate Number: C20161219-0528  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>

3	<b>Current Organization Chart with names of staff members</b>
---	---

## **List of Key Employees/Volunteer Staff**

**Stephen Vander Schaaf**  
President/CEO

**Brad Fuller, Esq.**  
General Counsel

**Judith Lemke-Kline, CPA, MBA**  
Director of Finance

**Loriann Granados, SPHR**  
Director of Human Resources

**Jessica Scott**  
Employment Administrator

**Jerry Kappeler, MSW**  
Director of Nevada Community Enrichment Program (NCEP)

**Josh Berg**  
Acting Director of Program Services

**Mary Easter**  
Services Administrator/Case Manager

**Diane Vandeberg**  
Brain Injury Services Administrator

**Ken Berry**  
Director of Property Management

**Dora Jacobson-Bauer**  
Housing Portfolio Administrator

**Dan Billmark**  
Director of Real Estate Development

**Current Board of Directors and terms of office.** [If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CSSG funds.]

**ACCESSIBLE SPACE, INC.  
BOARD OF DIRECTORS**

<b><u>NAME/ AFFILIATION</u></b>	<b><u>TITLE</u></b>	<b><u>COMMENCEMENT/TERM</u></b>
John W. Adams, MBA	Secretary	January 1, 2014 – December 31, 2017
Maynard Bostrom	Board Member	January 1, 2015 – December 31, 2016
Virginia Upchurch Chase, MA	Board Member	January 1, 2015 – December 31, 2016
Mark E. Hamel, Esq.	Chair	January 1, 2014 – December 31, 2017
James Hanson, MSW	Board Member	January 1, 2014 – December 31, 2017
Kay Knutson	Vice Chair	January 1, 2015 – December 31, 2016
Jennifer Samaha, MSW	Board Member	January 1, 2015 – December 31, 2016
Steve Schugel, CPA	Treasurer	January 1, 2015 – December 31, 2016
Stephen Wiggins, MBA	Board Member	January 1, 2014 – December 31, 2017

*Two Vacant Board Positions*

Revised: June 30, 2016

5

**501(c)(3) non-profits: Copy of the most recent Federal Tax Return. Attach  
FIRST 2 PAGES (Form 990 or 990EX)**

Form **990**

Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

**A** For the 2015 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: **Accessible Space, Inc.**  
 Doing business as \_\_\_\_\_  
 Number and street for P.O. box if mail is not delivered to street address: **2550 University Ave W**  
 Room/suite: **330N**  
 City or town, state or province, country, and ZIP or foreign postal code: **St. Paul MN 55114-1903**

**D** Employer identification number: **41-1330242**

**E** Telephone number: **651-645-7271**

**F** Name and address of principal officer:  
**Stephen Vander Schaaf**  
**2550 University Ave W, STE 330N**  
**St. Paul MN 55114-1903**

**G** Gross receipts: \$ **27,018,726**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: **www.accessiblespace.org**

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: \_\_\_\_\_ **M** State of legal domicile: \_\_\_\_\_

**H(c)** Group exemption number ▶ \_\_\_\_\_

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>To provide accessible housing for adults with disabilities and seniors.</b>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	932
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	3,115,604	9,730,605
	9 Program service revenue (Part VIII, line 2g)	13,074,402	14,122,978
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	125,468	134,693
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,807,903	3,030,450
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,123,377	27,018,726
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	14,104,706	14,188,295
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>197,380</b>		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,810,814	10,497,586	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,915,520	24,685,881	
19 Revenue less expenses. Subtract line 18 from line 12	207,857	2,332,845	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	29,384,936	32,005,783
	21 Total liabilities (Part X, line 26)	13,465,728	13,753,730
	22 Net assets or fund balances. Subtract line 21 from line 20	15,919,208	18,252,053

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer: **Judy Lenke-Kline** Date: \_\_\_\_\_  
 Director of Finance  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: **Anthony J. Hinrichs** Preparer's signature: **Anthony J. Hinrichs** Date: **05/26/16** Check  if PTIN self-employed **P01344453**

Firm's name: **Hinrichs & Associates, LTD.** Firm's EIN: **41-1629155**

Firm's address: **1000 Shelard Parkway Suite 110 Minneapolis, MN 55426** Phone no.: **952-542-8010**

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2015)



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

X

1 Briefly describe the organization's mission:

To provide accessible housing for adults with disabilities and seniors.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No X

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No X

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses, Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,143,099 including grants of \$ ) (Revenue \$ )

The Nevada Community Enrichment Program provides comprehensive day treatment services, vocational services and residential options to individuals with a traumatic brain injury; The Independent Living and Technology Program provides assessments, training, and resources to persons with disabilities; The Nevada Personal Assistance Services provides personal assistance to adults with mobility impairments.

4b (Code: ) (Expenses \$ 6,010,503 including grants of \$ ) (Revenue \$ )

Assisted Living Services: Residents with mobility impairments and/or brain injuries or similar cognitive disabilities have access to on-site Resident Assistant Staff 24 hours per day. Services are directed by the resident and may include service coordination, help with activities of daily living, housekeeping, meal preparation, behavior management and socialization. Residents with brain injuries or similar cognitive disabilities have access to additional on-site support.

4c (Code: ) (Expenses \$ 9,701,949 including grants of \$ ) (Revenue \$ )

Special Projects Program: activities related to the Independent Living Program, accessible housing and program development.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 3,288,122 including grants of \$ ) (Revenue \$ )

4e Total program service expenses 21,143,673



**Accessible Space, Inc.**  
**STATEMENT OF FINANCIAL POSITION**

	2016
TOTAL ASSETS	
CURRENT ASSETS	
CASH AND TEMPORARY INVESTMENTS	
Unrestricted	\$5,440,980.56
Restricted Other	\$0.00
Total	\$5,440,980.56
RECEIVABLES	
Accounts	\$2,866,562.14
Affiliated companies	\$3,069,343.43
Program Services	\$35,038.00
Other	(\$121,970.74)
Total	\$5,848,972.83
PREPAID EXPENSES	(\$203,220.39)
TOTAL CURRENT ASSETS	\$11,086,733.00
ENDOWMENT ASSETS	
CASH AND CASH EQUIVALENTS	\$2,548,797.26
Total	\$2,548,797.26
OTHER ASSETS	
DEVELOPMENT COSTS FOR PROJECTS IN PROGRESS	\$1,380,099.45
NOTES RECEIVABLE	\$16,262.40
DEPOSITS	\$695,754.35
TOTAL OTHER ASSETS	\$2,092,116.20
PROPERTY AND EQUIPMENT, AT COST	
BUILDINGS, LAND, FURNITURE, EQUIPMENT	\$8,727,926.28
ACCUMULATED DEPRECIATION	(\$2,368,205.69)
TOTAL PROPERTY EQUIPMENT	\$6,359,720.59
TOTAL ASSETS	\$22,087,367.05

**Accessible Space, Inc.**  
**STATEMENT OF FINANCIAL POSITION**

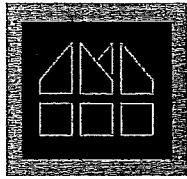
	2016
<b>LIABILITIES AND NET ASSETS</b>	
<b>CURRENT LIABILITIES</b>	
NOTES PAYABLE BANK	\$0.00
CURRENT MATURITIES OF LONG TERM DEBT	\$2,892.45
ACCOUNTS PAYABLE	\$808,709.48
SECURITY DEPOSITS PAYABLE	\$2,100.00
<b>ACRRUED EXPENSES</b>	
SALARIES	\$777,607.39
VACATION	\$328,980.24
REAL ESTATE TAXES	\$0.00
OTHER	\$18,409.68
Total	\$1,124,997.31
Total	\$1,938,699.24
LONG TERM DEBT LESS CURRENT LIABILITIES	\$259,528.90
<b>NET ASSETS</b>	
UNRESTRICTED	\$18,934,480.11
TEMPORARILY RESTRICTED	\$56,524.00
PERMANENTLY RESTRICTED	\$898,134.80
Total	\$19,889,138.91
TOTAL LIABILITIES AND NET ASSETS	\$22,087,367.05

AS OF OCTOBER 31, 2016

**Accessible Space, Inc.**  
**ASI TOTAL AGENCY SUMMARY**  
 CURRENT MONTH & YTD ENDED OCTOBER 31, 2016

	CURRENT MONTH		ACTUAL	YEAR TO DATE		ANNUAL BUDGET
	ACTUAL	BUDGET		VARIANCE	BUDGET	
<b>SUPPORT AND REVENUE</b>						
<b>SUPPORT</b>						
MN MEDICAL ASSISTANCE	\$696,129.92	\$701,641.67	\$6,882,987.99	\$7,016,415.69	(\$133,427.70)	\$8,419,699.00
MONTANA MEDICAID	\$12,252.15	\$15,167.42	\$139,363.33	\$151,674.16	(\$12,310.83)	\$182,009.00
NEVADA MEDICAID	\$243,082.00	\$188,791.52	\$1,846,910.21	\$1,887,914.96	(\$41,004.75)	\$2,265,498.00
NEVADA STATE GRANTS	\$67,698.00	\$47,520.84	\$649,200.11	\$475,208.32	\$173,991.79	\$570,250.00
MN CADI WAIVER SERVICES	\$19,359.94	\$17,940.00	\$216,311.45	\$179,400.00	\$36,911.45	\$215,280.00
UNITED WAY	\$3,000.00	\$458.40	\$28,963.34	\$29,583.22	(\$619.88)	\$30,500.00
DEVELOPMENT SUPPORT	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,287,571.00
UNRESTRICTED SUPPORT	\$10,000.00	\$24,750.01	\$100,000.00	\$247,499.98	(\$147,499.98)	\$297,000.00
DONATIONS	\$64,972.45	\$17,291.68	\$120,725.17	\$172,916.64	(\$52,191.47)	\$207,500.00
<b>TOTAL SUPPORT</b>	<b>\$1,116,494.46</b>	<b>\$1,013,561.54</b>	<b>\$9,984,461.60</b>	<b>\$10,160,612.97</b>	<b>(\$176,151.37)</b>	<b>\$18,475,307.00</b>
<b>REVENUE</b>						
RESIDENT PAYMENTS	\$196,939.51	\$225,439.37	\$2,447,357.11	\$2,254,402.26	\$192,954.85	\$2,705,284.00
HUD MANAGEMENT & MAINTENANCE FEES	\$269,611.02	\$235,603.00	\$2,577,420.13	\$2,356,030.00	\$221,390.13	\$2,827,236.00
INTEREST/DIVIDENDS	\$1,990.03	\$10,250.01	\$40,100.41	\$102,499.98	(\$62,399.57)	\$123,000.00
DEVELOPMENT FEES	\$50,517.47	\$125,000.00	\$1,644,141.55	\$1,250,000.00	\$394,141.55	\$1,500,000.00
OTHER INCOME	\$15,034.98	\$9,991.84	\$184,932.55	\$99,918.32	\$85,014.23	\$119,902.00
<b>TOTAL REVENUE</b>	<b>\$534,093.01</b>	<b>\$606,284.22</b>	<b>\$6,893,951.75</b>	<b>\$6,062,850.56</b>	<b>\$831,101.19</b>	<b>\$7,275,422.00</b>
<b>TOTAL SUPPORT AND REVENUE</b>	<b>\$1,650,587.47</b>	<b>\$1,619,845.76</b>	<b>\$16,878,413.35</b>	<b>\$16,223,463.53</b>	<b>\$654,949.82</b>	<b>\$25,750,729.00</b>
<b>EXPENSES</b>						
SALARIES	\$1,080,810.93	\$1,081,499.79	\$10,523,302.98	\$10,814,996.42	(\$291,693.44)	\$12,977,996.00
BENEFITS/FRINGE	\$165,489.61	\$199,082.53	\$1,780,011.89	\$1,990,822.96	(\$210,811.07)	\$2,388,988.00
PURCHASED SERVICES	\$38,747.45	\$38,083.32	\$347,108.01	\$380,832.36	(\$33,724.35)	\$456,999.00
RENT/LEASES/UTILITIES	\$50,695.82	\$57,323.05	\$531,706.59	\$573,229.90	(\$41,523.31)	\$687,876.00
SUPPLIES	\$105,882.08	\$37,741.56	\$441,801.56	\$377,414.88	\$64,386.68	\$452,898.00
TRAVEL/TRANSPORTATION	\$38,080.99	\$33,575.04	\$328,220.55	\$335,749.92	(\$7,529.37)	\$402,900.00
INTEREST EXPENSE	\$464.32	\$3,523.92	\$10,495.98	\$35,239.16	(\$24,743.18)	\$42,287.00
REAL ESTATE TAXES	(\$1,860.26)	\$854.51	\$7,682.60	\$8,544.98	(\$862.38)	\$10,254.00
INSURANCE	\$22,213.58	\$21,169.51	\$164,296.79	\$211,693.98	(\$47,397.19)	\$254,033.00
DEPRECIATION EXPENSE	\$25,687.88	\$27,134.18	\$246,428.21	\$271,341.64	(\$24,913.43)	\$325,610.00
SPONSOR DONATION TO AFFILIATE	\$54,015.00	\$50,098.00	\$514,601.08	\$505,980.00	\$8,621.08	\$7,112,571.00
OTHER	\$30,740.38	\$28,602.31	\$269,911.59	\$285,021.36	(\$16,109.77)	\$343,226.00
<b>TOTAL EXPENSES</b>	<b>\$1,610,967.78</b>	<b>\$1,578,687.72</b>	<b>\$15,165,567.83</b>	<b>\$15,791,867.56</b>	<b>(\$626,299.73)</b>	<b>\$25,455,638.00</b>
<b>NET SURPLUS/(DEFICIT)</b>	<b>\$99,619.69</b>	<b>\$41,158.04</b>	<b>\$1,712,845.52</b>	<b>\$431,595.97</b>	<b>\$1,281,249.55</b>	<b>\$295,091.00</b>

7	<b>Funding commitment letters and/or letters of support (if applicable)</b>
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## Nevada Community Enrichment Program

*Specializing in Neurological Rehabilitation*

1/12/17

To Whom It May Concern,

I am writing to offer my support of the Accessible Space, Inc. (ASI) CDBG application for their accessible, affordable and service enriched Frost Yasmer Estates in Carson City, Nevada. I am the Director of the Nevada Community Enrichment Program (NCEP), a neurological rehabilitation center based in Las Vegas. We have referred clients to the Frost Yasmer Estates and I am familiar with their services and housing; Frost Yasmer Estates is an important part of the Carson City Community and has been providing services to adults with physical disabilities and brain injuries for 20 years.

My understanding is that the elevator at Frost Yasmer Estates is in dire need of repair. Many of the residents at Frost Yasmer use wheelchairs, and they are dependent on that elevator for their accessibility to daily activities. In fact, some of our former clients with brain injuries call Frost Yasmer Estates home. Ensuring the elevator is working properly is of paramount importance and I strongly support Accessible Space, Inc.'s (ASI) CDBG application to replace the current elevator and modernize it.

Frost Yasmer Estates is a wonderful community that provides homes to 23 very low-income adults with a variety of physical disabilities, mobility impairments and traumatic brain injuries. Preserving the building is extremely important for current and future residents who may need an accessible, affordable service enriched apartment in Carson City, Nevada. Our ongoing partnership not only provides support to those in need in Nevada, but ensures the highest quality of services for our residents.

I thank you in advance for your serious consideration of this request.

Sincerely,

Mr. Jerry Kappeler, MSW  
Director, Nevada Community Enrichment Program

To Whom It May Concern,

I am writing to offer my support of the Accessible Space, Inc. (ASI) Carson City 2017 CDBG application. I am the Manager of the Nevada Supportive Services program and we provide 24 hour shared living services to the residents at Frost Yasmer. The Frost Yasmer Estates is an important part of the Carson City community; the apartment community has been providing accessible, affordable and service enriched housing to very low-income adults with physical disabilities since 1997.

The elevator at Frost Yasmer Estates is in dire need of repair. Many of the parts of the elevator are obsolete and out of date. Many of the residents at Frost Yasmer use wheelchairs, and they are very dependent on that elevator for their daily activities. If something were to happen to the elevator it's possible it would not be able to be put back in operation, causing many problems for our residents who rely on the elevator every day.

I strongly support Accessible Space, Inc.'s (ASI) CDBG application to replace the current elevator and modernize it. Frost Yasmer Estates is a wonderful community that provides homes to 23 very low-income adults with a variety of physical disabilities, mobility impairments and traumatic brain injuries. Keeping the building updated and functioning properly is vital for current and future residents of Frost Yasmer Estates.

I thank you in advance for your serious consideration of this request.

Sincerely,

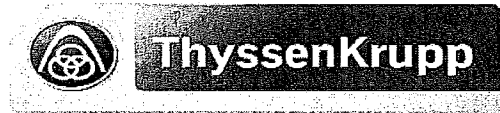
Shelle L Sponseller  
Nevada Supportive Housing Services Mgr.  
702-259-1903 ext. 323







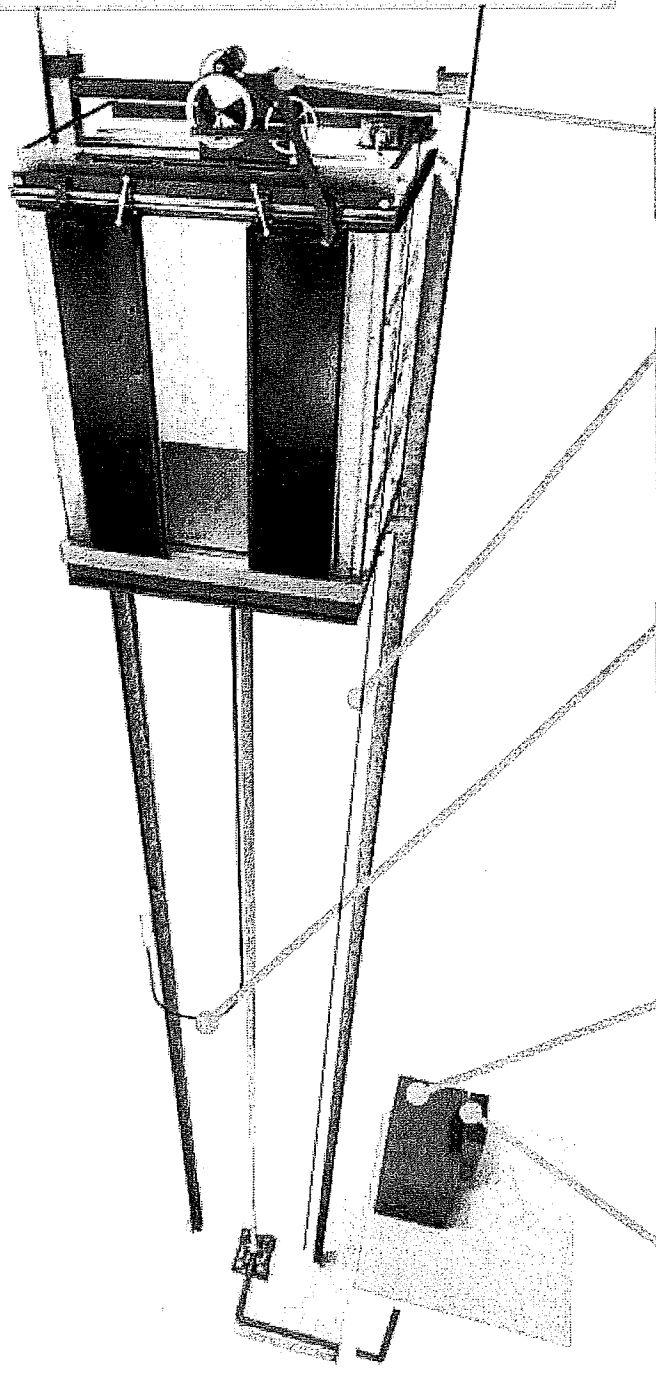
# ThyssenKrupp Elevator Americas



## HYpower Proposal

brian.hodges@thyssenkrupp.com

Visual Overview of Major Components



New Closed Loop Door Operator.

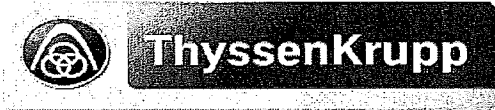
New Selector controlled through solid state operation.

New Travel Wiring as shown. 100% of all elevator wiring will be replaced in all area of the elevator as required.

New Power Unit including Reservoir, Motor, Valve, & Pump.

New ThyssenKrupp Tac-32 Microprocessor Controller.

# ThyssenKrupp Elevator Americas



EQUIPMENT SUMMARY	
TYPE:	HYDRAULIC
DESIGNATION	PASSENGER
State#	7337 NV
TKE – US#	US281953
Quantity of Elevators	ONE(1)
Speed/Capacity	125 FPM / 2500 CAP
Stops/Opening	3/3

## SUBMITTALS

Drawings. ThyssenKrupp Elevator will prepare drawings and/or cut sheets at owners request showing the general arrangement of the elevator equipment at no additional charge.

Wiring diagrams. One (1) complete sets of "made final" wiring diagrams including input and output signals will be furnished to the Purchaser.

## KEYS

Two (2) keys for each key switch specified will be furnished to the Purchaser.

## SCOPE OF WORK

### CAR

**CAR FRAME AND PLATFORM:** Retain existing car sling and platform. Modify as required to accommodate any new accessories or control equipment installed.

**CAR GUIDES:** Retain existing car guides. Adjust for proper weight distribution to for optimal ride quality.

**CAR TOP INSPECTION:** One (1) new car top inspection station will be installed and or integrated with the door operation equipment.

**TOE GUARD (APRON):** New. Install new code compliant toe guard as required by code.

### CAR ENCLOSURE

**CAB INTERIOR:** Retain existing. See Alternate #1 if new cab interior is desired.



## CAR SIGNAL FIXTURES

### All Fixture Finishes Shall Be Brushed Stainless Steel

**CAR OPERATING PANEL:** Furnish and install one (1) new car operating station in elevator as described herein. The new car operating station shall be manufactured and installed in accordance with Americans with Disabilities Act (ADA), ANSI Code A17.1, C.A.C. Title 24 and other applicable state and local codes. The new car station shall be constructed of Stainless Steel #4 brush finish and vertical grain. The car station shall have the following integrally mounted components:

- Illuminating, self canceling floor call buttons one (1) for each landing served. Each button shall be clearly marked with the designation for the floor that the button serves. The buttons shall have black indications on a contrasting white background. The highest call button shall not exceed 54" above finish floor.
- Alarm button. The Alarm button shall illuminate & extinguish when pushed & released.
- Non-Illuminating buttons labeled Door Open, Door Close, Emergency Stop. These buttons shall be grouped at the bottom of the panel at 35" centerline as required by code. The Emergency Stop and Alarm buttons shall have red characters on contrasting white backgrounds. The Door Open and Door Close buttons shall have black indications on a white background.
- Braille indication to the left of and adjacent to each button designating the function and operation of that button.
- Firefighters Service Cabinet with the following devices behind a locked, hinged, door: Key operated 3 position (Off-Hold-On) Fire Service switch with Fire jewel, Door Open, Door Close and Call Cancel buttons with buzzer that shall operate as required by code in the event of a fire. The firefighters cabinet door shall have One (1) signage plate with Fire Emergency Operation instructions mounted on its interior side.
- One (1) Emergency Light unit with battery backup to provide lighting in the interior of the elevator in the event of a loss of power to the elevator light circuit. The emergency light unit shall also be capable of supplying power to the alarm bell.
- One (1) telephone cabinet with hinged door and ADA compliant handle and telephone symbol integrally mounted in the new car station.
- One (1) programmable ADA compliant hands free speaker phone assembly.
- One (1) Capacity Plate indicating the weight, in pounds, that the elevator is rated to safely carry.
- One (1) floor passing gong.
- One (1) two position key operated switch labeled Inspection
- One (1) three position key operated switch labeled Light, Fan, Off
- One (1) Inspection key operated switch for Elevator Inspectors use as required by code.
- One (1) Independent Service key operated switch which will allow the elevator to be removed from automatic service and placed on manual operation from inside the elevator.
- Additional key or toggle switches as required to match the existing function of any key or toggle switches.

**CAR POSITION INDICATOR:** The new Car Operating panel will have a digital position indicator integrally mounted.

**CAR JAM LANTERN** – New Car Jam Lantern(s) to replace existing.

## HALL SIGNAL FIXTURES

**HALL FIXTURES:** Furnish and install one (1) new surface mounted hall station at each floor to comply with ANSI 2004 Code. The new hall stations shall be manufactured of Stainless Steel #4. The new hall stations shall have a combination of the following components:

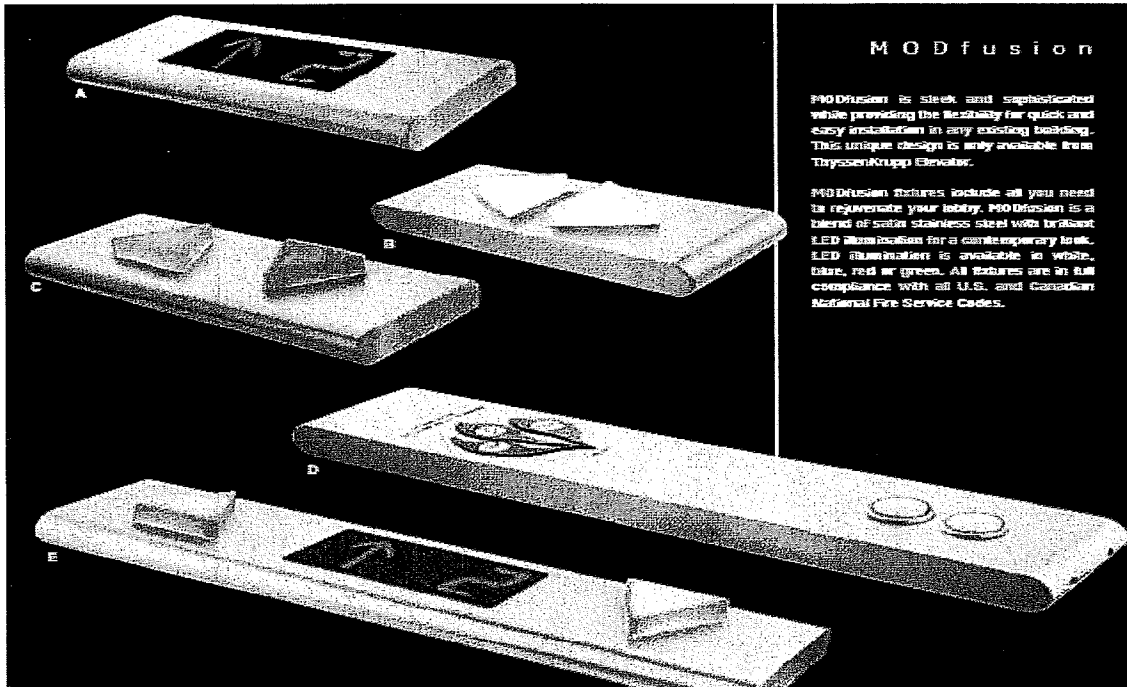
## ThyssenKrupp Elevator Americas

- Illuminating up and/or down buttons.
- Fire emergency recall switch at the designated landing.
- Fire Service Operating signage as required by ANSI Code.
- Fire Service Indicator
- Surface-mount design to facilitate easy installation in existing buildings.
- All fixtures will be mounted to meet ADA height requirements.

**HOISTWAY ACCESS FIXTURES** – New Hoistway Access switches at all terminal landings.

**BRILLE:** New ADA/Title 24- black on white.

*All products will be built with Visual and Audible features for ADA compliance as required.*



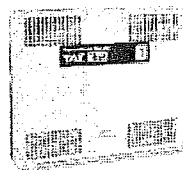


## CONTROL

### **MICROPROCESSOR CONTROLLER:**

Furnish and install one Non Proprietary (1) microprocessor based group control system and wiring. The new controllers shall provide the following features and benefits:

- Isolated inputs and outputs to provide maximum protection of the processor.
- State of the art technology with a proven track record of reliability.
- Replacement parts availability off the shelf.
- Current code compliant and ADA compatible for future upgrades.
- Software is programmable and can be modified to meet changing conditions or building owner requirements.
- Provides motor timers to protect the motor from running too long.
- Computerized dispatching to provide minimum response time to car and hall calls.
- Complies with California Administrative Code Title 8 and 24.
- Proposal includes new car and hoistway wiring.



#### TAC330 Controller

Microprocessor-based system with diagnostic capabilities and easier troubleshooting than other control systems.



#### Non-Proprietary User-Interface Tools

User-friendly tool that allows unrestricted access for on-board adjusting and troubleshooting.



#### Battery Lowering Unit

Unit prevents entrapments and provides supplemental power to the controller in case of an outage. Also, the unit eliminates or reduces the need for a costly power generator.



#### Solid State Starter

Energy efficient motor starter that minimizes power surges with smooth, quiet and reliable operation.



#### Elevator Positioning Encoder

Teflon-coated, perforated tape runs the length of the hoistway and digitally communicates the elevator's location, providing a safe and level landing for passengers when boarding and exiting.

**DIAGNOSTICS:** Each controller shall have an integrally mounted diagnostic keypad / monitor which shall be used to display and review all faults, parameters, and settings. The keypad / monitor shall also be utilized to change parameters and settings for the purpose of adjusting the elevator(s).

**SELECTOR:** Furnish and install one (1) new solid state tape APS (Absolute Positioning System) selector. Unit to be SIL-3 rated which provides the highest floor leveling accuracy. The tape mounted selector is car top mounted selector conversion utilizing state of the art electronic design to achieve faster, more accurate, more consistent stepping, deceleration, and leveling of the elevator. The tape mounted selector consists of the following components:





## ThyssenKrupp Elevator Americas

- One (1) car top mounted solid state control box that provides the power supply and signals for the elevator control system to step up, step down, slowdown, and stop at the floor.
- One (1) hoistway mounted tape with embedded magnets that are suspended adjacent to the guide rail.

### DOORS & ENTRANCES

**HOISTWAY DOORS PANELS:** Retain. Adapt any new mounting hardware for changes within the scope of work.

**HOISTWAY DOOR ROLLERS, AND TRACKS:** Install new door rollers for smooth motion. All hoistway door tracks shall be cleaned and degreased. Any surface irregularities on the hoistway door tracks such as waves or ripples shall be either sanded or filed to remove them.

**HOISTWAY DOOR INTERLOCKS:** Replace all hoistway door interlock contacts.

**HOISTWAY DOOR PICK-UP ROLLERS:** New pick up rollers at all landings. Clean and sand the pickup roller posts located on the pickup roller mounting plate to remove any accumulated dust, grease, oil, or other contaminants that may interfere with the free and easy operation of the pickup roller assembly.

**HOISTWAY DOOR GIBS:** New.

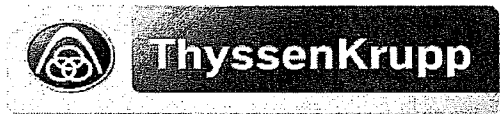
### DOOR OPERATION

**DOOR OPERATOR:** Furnish and install one (1) new GAL MOVFR Closed Loop Door Operator and required equipment on each elevator to provide smooth, reliable door operation.

THE NEW DOOR EQUIPMENT WILL PROVIDE THE FOLLOWING FEATURES AND BENEFITS:

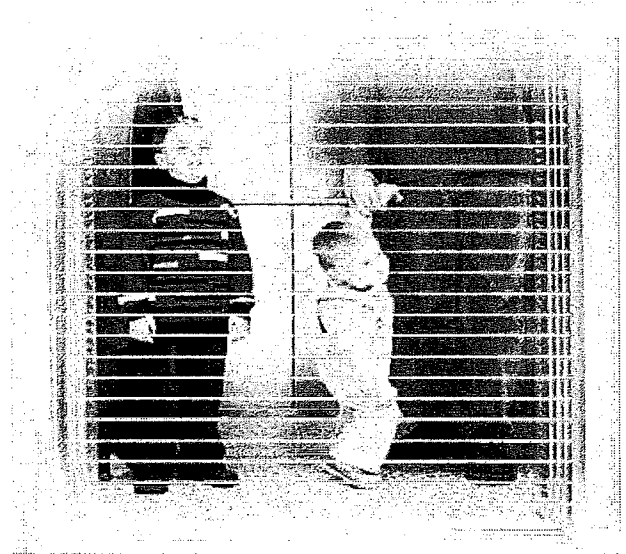
- Current technology and proven design with a proven record of reliability.
- Smoother opening and closing of doors to provide faster operation.
- Quiet operation to minimize noise created by opening and closing of hoistway doors.
- Wider range of adjustments to accommodate different building needs and insure desired operation of the doors based on building requirements.
- Safe adjustable code compliant closing torque and kinetic energy to reduce the possibility of injury to officers, administrative personnel, detainees, etc. as a result of being struck by doors.
- Replacement parts available off the shelf.
- Current code compliant.
- Proposal includes new door operator wiring.

**DOOR PROTECTION:** Furnish and install one (1) new infrared detector edge on each elevator. The new detector edge is an infrared detector screen that utilizes in excess of 40 beams of infrared light beams. The beams are vertically spaced at one inch intervals. The infrared beams span the path of travel through the elevator entrance. When any one of the beams is broken the doors shall automatically reopen. No contact with the person or object entering or exiting the elevator is necessary to activate the reopen signal. The new detector edge consists of the following components:



## ThyssenKrupp Elevator Americas

- One (1) car top mounted solid state control box that provides the power supply and signals for the elevator control system indicating that the door path is clear or is blocked.
- One (1) beeper that can be enabled or disabled to indicate that the beam(s) are blocked. Operation of the beeper is at the purchaser's discretion. When activated the beeper will sound whenever a person or object passes through the entrance or blocks same.
- One (1) car door mounted transmitter connected to the car top control box. Flexible shielded wiring is utilized for all connections between the devices. The transmitter replaces the safe edge and photo-eye assemblies which are removed from the elevator permanently. There are no moving objects on the transmitter. The transmitter is mounted flush or slightly behind the leading edge of the elevator car door.
- One (1) receiver that detects and reflects the infrared beams providing the car top mounted control box with a broken beam signal when the beam(s) are blocked.



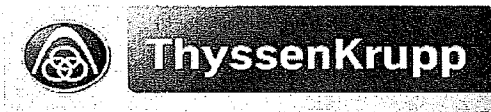
**CAR DOOR Panels:** Retain. Adapt any new mounting hardware for changes within the scope of work.

**CAR DOOR ROLLERS, AND TRACKS:** Install new door rollers for smooth motion. All car door tracks shall be cleaned and degreased. Any surface irregularities on the hoistway door tracks such as waves or ripples shall be either sanded or filed to remove them.

**DOOR CLUTCH-** Install one (1) new clutch assembly.

**CAR DOOR GIBS:** New

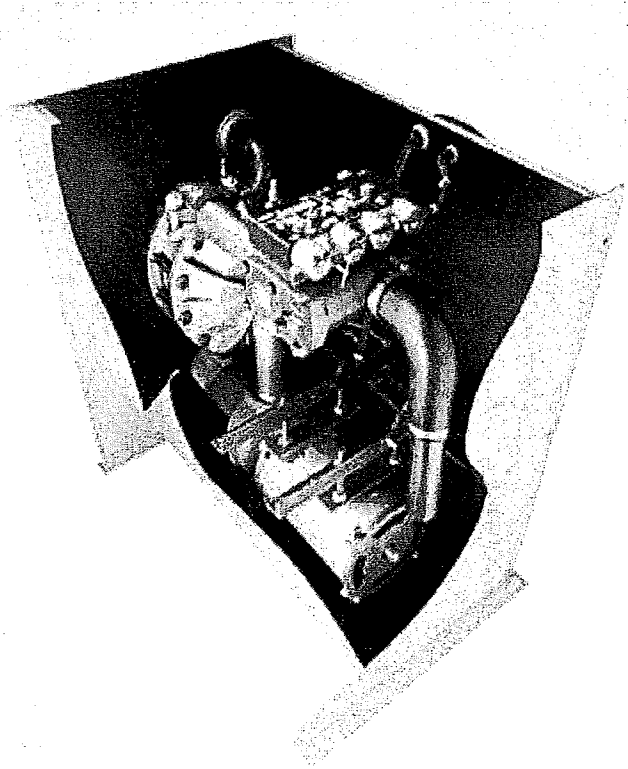
## ThyssenKrupp Elevator Americas



### HYDRAULIC SYSTEM

**POWER UNIT:** We propose to furnish and install one (1) new hydraulic power unit. The new submersible power unit shall replace the existing unit. The new power units will be comprised of the following components:

- 1- New tank and reservoir which shall be manufactured of sheet metal of a size and thickness capable of withstanding and holding the oil required to operate the elevator. All seams shall be welded and pressure tested to insure integrity.
- 2- A new high output pump which shall be manufactured to provide the proposed speed and shall be driven by an electric motor. The new motor shall utilize sealed ball bearings to provide quiet long life and shall be supported on an isolated frame to minimize the transmission of noise to the building.
- 3- A new motor which shall be capable of operating the elevator at the specified speed. The new motor shall utilize sealed bearing to insure long life and reliable operation and shall be supported on an isolated frame to minimize the transmission of noise to the building structure.
- 4- A new ThyssenKrupp hydraulic control valve assembly which shall be constructed as follows. The new valve will be manufactured with the following features and integrally mounted components:
  - Unit body construction
  - Removable seats and sleeves
  - "O" Ring seals
  - Threaded connections
  - Feedback control to minimize stalling in leveling
  - Separate and individualized control block adjustments.



This work includes all piping and fittings that may be required to modify the existing piping to the new valve assembly.

**HYDRAULIC FLUID-** New Hydraulic Fluid will be installed for all units. Price includes disposing of the existing fluid via the proper environmental procedures.

### HOISTWAY AND PIT EQUIPMENT

**PIT SWITCH:** Furnish and install an Emergency Stop switch in the elevator pit.

**PIT BUFFERS:** Retain the existing pit buffers.

**PIT OVER SPEED VALVE :** Furnish and install one (1) new over speed valve in the elevator pit. The over speed valve shall be designed and adjusted to shut off the flow of oil in the event of an uncontrolled flow of oil out of the elevator cylinder.

**MACHINE ROOM SHUT OFF VALVE:** Furnish and install one (1) new machine room shut off valve in the oil line, adjacent to the power unit, as required by code.

# ThyssenKrupp Elevator Americas



## RAILS

**GUIDE RAILS:** Retain the existing guide rails..

## WIRING

**Traveling Cable and Hoistway Wiring:** All Wiring will be replaced as part of this Scope of Work. The work shall include the installation of new traveling cable. Furnish and install new traveling cables on each elevator as follows:

- New traveling cable utilizing a minimum of one 10 18 Awg. Stranded copper wire conductor for each connection required.
- Minimum of 4 shielded pair 20 Awg. wire.
- Minimum of 6 14 Awg. wires for lights and fan operation.
- Oil and water resistant jacket to prevent water intrusion into the cable.
- Jute core to support cable and minimize strain on the conductors.
- Terminated at both ends with "Kellam" type grips.

The traveling cable will be hung in such a manner as to prevent twist of the cable or harmonic vibration and entanglement with the existing traveling cable.

## SYSTEM FEATURES

**TENANT SECURITY:** The new elevator controller will come with equipped with the proper electronics to incorporate most existing or future security devices into the elevator car. Hardware and wiring is by others.

**FIREMAN'S SERVICE:** Provide all controller and fixture modifications as necessary to obtain Code-Compliant, fireman's service operation. Note: All smoke/heat detector installation and/or modifications required for a Code-Compliant fire recall system is by others.

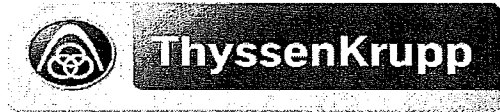
**INDEPENDENT SERVICE:** Retain existing independent service operation.

**HOISTWAY ACCESS AND INSPECTION:** Provide new, key operated, self centering, spring return, switches at the top and bottom landings labeled "Access". Key switches shall have three (3) positions labeled "Up", "Down", and "Off". The key shall be removable in the center or "off" position only. To utilize this mode of operation the following steps shall be performed:

- Locate the elevator at the top or bottom landing.
- With the doors open, turn the key switch labeled "Access", in the car operating panel, to the "on" position. The doors shall be disabled and remain open.
- Step out of the elevator. Insert the "Access" key in the "Access" key switch located in the upper corner of the elevator door frame. Turning the key switch in the desired direction shall cause the elevator to go up or down. If the elevator is at the bottom floor it shall not be capable of moving in the down direction more than a few inches. Moving the elevator up from an upper landing shall have the same affect.

**Testing and Certification:** Included. ThyssenKrupp will test and certify the unit for compliance.

# ThyssenKrupp Elevator Americas



**ALTERNATE 1 – New Cab Interior**

**Cab Interior:**  
 (Price valid with modernization package only) Installing a new cab interior will increase completion time by 2-3 days.

Price: \$20,572.00

At customer discretion to improve cab interior esthetics. Acceptance: Initial \_\_\_\_\_ Date \_\_\_\_\_

**Scope of Work:**

**Cab Panels:** New Panels are fire rated, elevator code and LEED compliant, and faced with customer's choice of standard plastic laminate, with 1/8" black shadow lines set into the surface.

**Car Fixtures:** Fixtures are replaced as Part of the Modernization.

**Toe Kicks & Reveals:** Stainless Steel #4 corner and front reveals.

**Hand Rail on all three Walls:** 1.5" diameter round, with returned ends, in a Stainless Steel #4.

**Return Panels:** Reskin existing car return panel where the Car Operating Panel resides in Stainless Steel #4 to provide a finished look.

**Transom:** Reskin existing transom in Stainless Steel #4 to provide a finished look. (Area above the car door)

**Car Doors:** Install new Car Doors Skinned in Stainless Steel #4

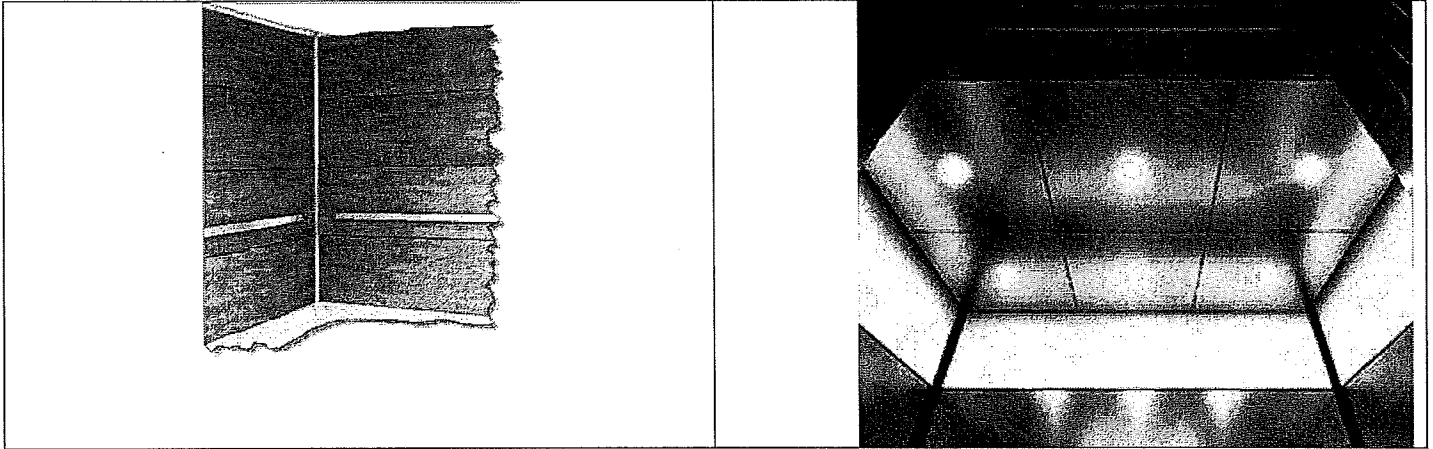
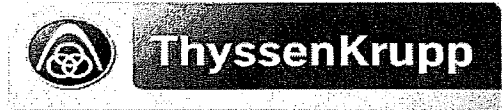
**Modular Ceiling:** NEW Downlight LED Stainless Steel #4.

**Approval Drawing:** CAD drawing showing interior that will be provided. Customer will have creative control of the final interior look. Significant Deviation from the initial specification can alter the cost.

**Cab Pads:** Provide purchaser with one set of new cab interior pads per cab type to protect cab surfaces when the elevator is used to move materials.

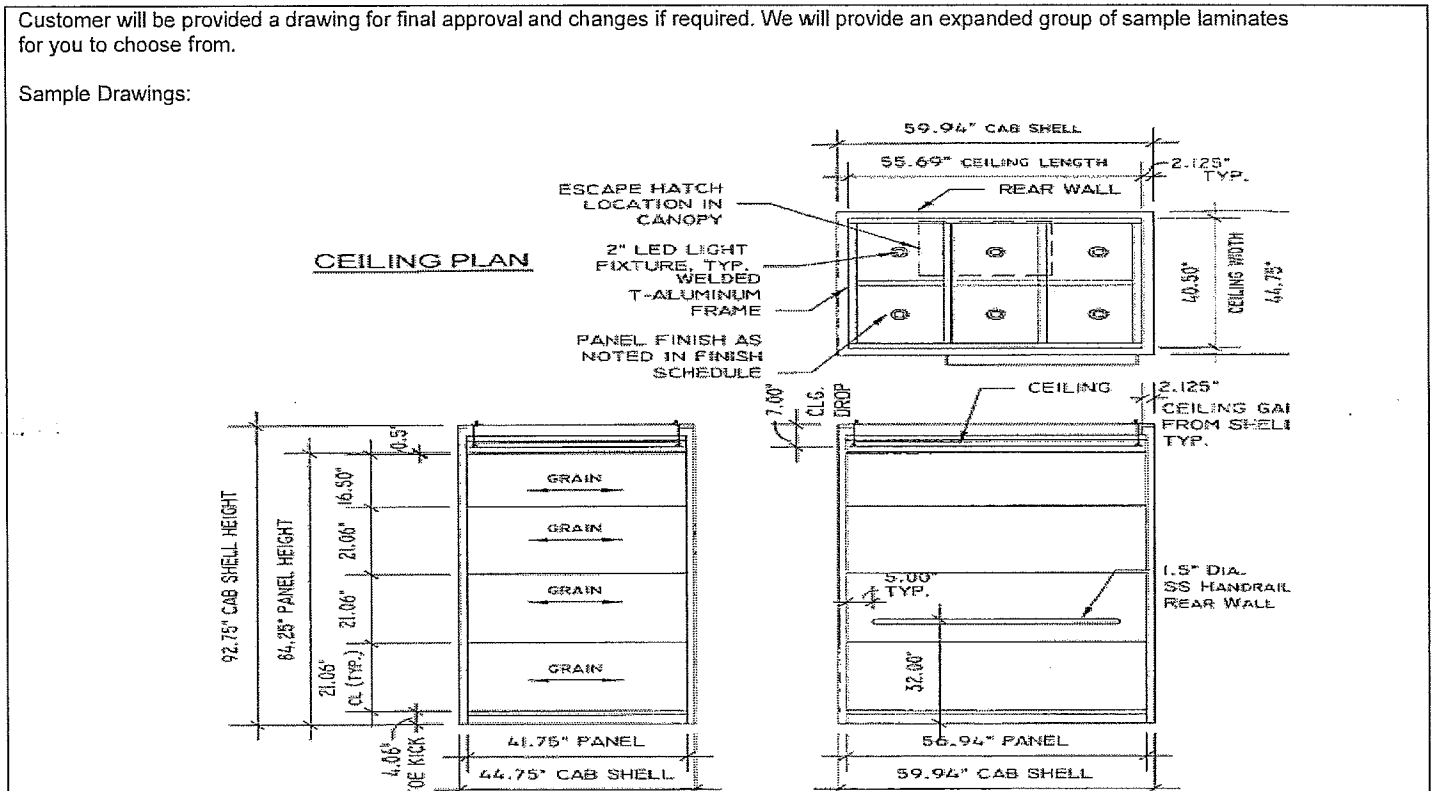
Picture below are intended to be close interpretation of what the final product will look like. They are not illustrated to exact specification.

Sample Right and rear wall. Wall panels will be a horizontal System. Final design and finish by customer.	Typical down light Ceiling
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Customer will be provided a drawing for final approval and changes if required. We will provide an expanded group of sample laminates for you to choose from.

Sample Drawings:





Be advised of the following approximate and estimated lead times in effect as of the date of this proposal

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Fabrication time from receipt of all approvals, fully executed contract, and payment of pre-production and engineering invoice:	8-12 Weeks
Approximate repair of elevator system: this proposal is based on Expedited Installation. <i>(After completion of all required preparatory work by others)</i>	1 WEEK EXPEDITED 3 WEEKS IS STANDARD

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Should the project completion occur after December 31, 2016, Purchaser agrees by executing this Proposal that the labor and material contained in this Proposal will be subject to escalation based on increased material and labor costs incurred by ThyssenKrupp Elevator after such date.

### INSTALLATION SEQUENCE AND SCHEDULE

All work specified herein will be performed during "regular working hours of regular working days as is customary in the elevator industry" defined as 8:00 AM to 4:30 PM, except scheduled holidays. Price assumes easy access to and from work area.

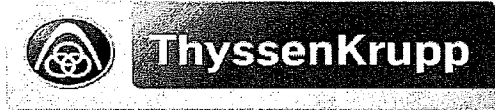
All vertical transportation equipment described in this Proposal will be out of service and unavailable to move passengers and/or property during entire duration of the performance of the work described in this Proposal. Temporary elevator service is not included in this Proposal.

Prior to commencing work, ThyssenKrupp Elevator will provide Purchaser with a written work schedule. That schedule and any changes to it shall be agreed to by both parties' authorized representatives in writing before becoming effective.

### WORK NOT INCLUDED

There are certain items that are not included in this Proposal, many of which must be completed by Purchaser prior to and as a condition precedent to ThyssenKrupp Elevator's performance of its work as described in this Proposal. It is Purchaser's sole responsibility to coordinate the performance of these items with ThyssenKrupp Elevator to ensure a successful completion of this project. The following is a list of those items that are not included in this Proposal:

1. Equipment Storage: the provision of a dry and secure area at the project site for storage of the elevator equipment at the time of delivery and the provision of adequate ingress and egress to this area. Any relocation of the equipment as directed by the Purchaser after its initial delivery will be at Purchaser's sole expense
2. Electrical:



## ThyssenKrupp Elevator Americas

- a. suitable connections from the power main to each controller and signal equipment feeders as required, including necessary circuit breakers and fused mainline disconnect switches per N.E.C. Suitable power supply capable of operating the new elevator equipment under all conditions;
  - b. the wiring to the controller for car lighting per N.E.C. Articles 620-22 and 620-51;
  - c. a means to automatically disconnect the main line and the emergency power supply to the elevator prior to the application of water in the elevator machine room that shall not be self-resetting;
  - d. wiring and conduit from life safety panel or any other monitor station to the elevator machine room or a suitable connection point in hoistway;
  - e. a bonded ground wire, properly sized, from the elevator controller(s) to the primary building ground; and all remote wiring to the outside alarm bell as requested by all applicable code provisions
  - f. a dry set of contacts which close 20 seconds prior to the transfer from normal power to emergency power or from emergency power to normal power whether in test mode or normal operating conditions in the event that an emergency power supply will be provided for the elevator;
  - g. automatic time delay transfer switch and auxiliary contacts with wiring to the designated elevator controller and
  - h. electrical cross connections between elevator machine rooms for emergency power purposes
  - i. the following emergency power provisions are not included: interface in controller, pre-testing and testing, emergency power keyswitches;
3. Machine Room: a legal machine room, adequate for the elevator equipment, including floors, trap doors, gratings, foundations, lighting and a machine room temperature maintained between 50 and 90 degrees Fahrenheit, with a relative humidity less than 95% non-condensing;
  4. Heat and Smoke Sensing Devices: heat and smoke sensing devices at elevator lobbies on each floor, machine room, and hoistways with normally open dry contacts terminating at a properly marked terminal in the elevator controller;
  5. Dedicated Telephone Lines: a dedicated telephone line to elevator each controller recognizing that the elevator telephone is required by code to be monitored 24 hours a day, 7 days a week; one additional telephone line per group of elevators for diagnostic capability wired to designated controller;
  6. Removal of Obstructions: the cutting and patching of walls, floors, etc. and removal of such obstructions as may be necessary for proper Repair of the elevator(s);
  7. Fire Rating: the furnishing, installing and maintaining of the required fire rating of elevator hoistway walls, including the penetration of firewall by elevator fixture boxes;
  8. Flooring: all work relating to the flooring including, but not limited to, the provision of materials and its installation to comply with all applicable codes;
  9. Painting: all painting, except as otherwise specifically included herein;
  10. Waterproofing: ensuring that the elevator Hoistway and pits are dewatered, cleaned and properly waterproofed;
  11. If entrances are replaced: adequate bracing of entrance frames to prevent distortion during wall construction and all sill



## ThyssenKrupp Elevator Americas



supports, steel angles, sill recesses, and the grouting of doorsills;

### **ASBESTOS AND SAFETY**

The Purchaser is solely responsible for the removal and disposal of asbestos containing material at the jobsite. It is agreed that in the event asbestos material is knowingly or unknowingly removed or disturbed in any manner at the jobsite, Purchaser will monitor ThyssenKrupp Elevator's work place and prior to and during ThyssenKrupp Elevator's manning of the job, Purchaser will certify that asbestos in the environment does not exceed .01 fibers per cc as tested by NIOSH 7400. In the event ThyssenKrupp Elevator's employees or those of ThyssenKrupp Elevator's subcontractors are exposed to an asbestos hazard, PCP's or other hazardous substances, Purchaser agrees to indemnify, defend, and hold ThyssenKrupp Elevator harmless from all damages, claims, suits, expenses, and payments resulting from such exposure. The Purchaser is solely responsible for ensuring that any governmentally-required safety provisions will be followed. ThyssenKrupp Elevator reserves the right to discontinue work on the jobsite whenever, in ThyssenKrupp Elevator's sole opinion, its personnel do not have a safe place to work.

### **PAYMENT TERMS**

This proposal is based on the following payment terms unless the customer requests a separate mutually agreed upon Schedule of Values:

Fifty Percent (50%) of the price set forth on page 1 of this Proposal as modified by options selected from the Section entitled Value Engineering Opportunities & Alternates (if applicable) will be due and payable as an initial progress payment within 30 days from ThyssenKrupp Elevator's receipt of a copy of this Proposal signed by the Purchaser. This initial payment will be applied to costs and fees associated with project management, permits, submittals, and raw material procurement, and its receipt will trigger the ordering of material to complete the scope of work described on pages 2 and 3.

An additional Fifty Percent (50%) of the price set forth on page 1 of this Proposal as modified by options selected from the Section entitled Value Engineering Opportunities & Alternates (if applicable) shall be due and payable when the material described above has been furnished. Material is considered furnished when it has been received at the jobsite, ThyssenKrupp Elevator staging facility, or any other location designated by the Purchaser at its sole expense. ThyssenKrupp Elevator's receipt of payment is required prior to mobilization of its labor associated with the work described on pages 2 and 3.

Any additional amount, including change orders, is due at the time of completion and approval by the local authority having jurisdiction (if applicable), but prior to turnover of the equipment by ThyssenKrupp Elevator to the Purchaser for use. If there is more than one unit that is the subject of this Proposal, final payment shall be made separately as each unit is completed.

ThyssenKrupp Elevator shall retain exclusive ownership and control over all equipment installed and/or repaired pursuant to this Proposal until such time as Purchaser has paid ThyssenKrupp Elevator 100% of the full Proposal amount set forth on page 1 as modified by options selected from the Section entitled Value Engineering Opportunities & Alternates (if applicable) along with all applicable change orders. Purchaser agrees to waive any and all claims to the turnover and/or use of that equipment until such time as those amounts are paid in full.

ThyssenKrupp Elevator reserves the right to discontinue its work at any time until payments have been made as agreed, and ThyssenKrupp Elevator has received assurance satisfactory to it that the subsequent payments will be made as they come due. Any payments not paid when due shall bear interest at 1 ½ % per month or the highest legal rate, whichever is less.

In the event the Purchaser defaults on any payment, or on any other provision of this Proposal, the unpaid balance of the Proposal price (including any change orders), less the cost of completing the work, as estimated by ThyssenKrupp Elevator, shall immediately become due and payable.

### **TESTS, GOVERNMENTAL APPROVAL, CLEANUP AND PURCHASER INSPECTION**

## ThyssenKrupp Elevator Americas



At the conclusion of its work described herein, ThyssenKrupp Elevator will perform safety, full load, Phase I and Phase II Fire Service tests (as applicable) to ensure that the equipment that is the subject matter of this Proposal conforms to applicable codes.

ThyssenKrupp Elevator will provide Purchaser with copies of reports generated in conjunction with completed tests.

ThyssenKrupp Elevator will perform all tests described herein during regular working hours of regular working days as is customary in the elevator industry.

Should the Purchaser require performance of these tests outside the regular working hours of regular working days as is customary in the elevator industry, ThyssenKrupp Elevator will provide Purchaser with a separate and additional proposal to accomplish those tasks at those times at an additional cost.

The price of this Proposal includes one (1) inspection by the local authority having jurisdiction. Should the local authority having jurisdiction refuse to issue written approval to Purchaser to use and operate the equipment due to items that are the responsibility of the Purchaser as set forth in this Proposal or are not specifically included in this Proposal, the Purchaser shall be financially responsible for (A) addressing those items, (B) the cost of the additional inspection(s) by the local authority having jurisdiction and (C) the labor incurred by ThyssenKrupp Elevator to attend those additional inspections at ThyssenKrupp Elevator's current billing rate as posted at its local office.

Should the Purchaser or the local authority having jurisdiction require ThyssenKrupp Elevator's presence at the inspection of equipment installed by others in conjunction with the work described in this Proposal, Purchaser agrees to compensate ThyssenKrupp Elevator for its time at ThyssenKrupp Elevator's current billing rate as posted at its local office.

ThyssenKrupp Elevator shall not be liable for any damage to the building structure or the elevator resulting from the performance of any tests it shall perform at any time under this Proposal.

At the conclusion of its work, ThyssenKrupp Elevator will remove all equipment and unused or removed materials from the project site and leave its work area in a condition that, in ThyssenKrupp Elevator's sole opinion, is neat and clean.

Upon notice from ThyssenKrupp Elevator that the work described herein has been completed, Purchaser will arrange to complete an inspection of the work with ThyssenKrupp Elevator and will provide Purchaser's final acceptance thereof in writing by Purchaser's duly authorized representative at that time if the work is acceptable. The date and time for such an inspection shall be mutually agreed upon. In no event shall that inspection occur more than ten (10) business days after the date of ThyssenKrupp Elevator's written notice to Purchaser that the work herein has been completed unless both parties agree otherwise in writing. Immediately following its inspection of the work, Purchaser's duly authorized representative shall execute ThyssenKrupp Elevator's "Final Acceptance" form(s) prior to turnover and use of the equipment described in this Proposal. Purchaser shall not unreasonably delay or withhold such final inspection or its written acceptance of the work.

### **WARRANTY**

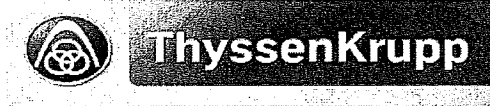
*ThyssenKrupp Elevator warrants the equipment it installs under this Proposal against defects in material and workmanship for a period of one (1) year from the date of Purchaser's execution of ThyssenKrupp Elevator's "Final Acceptance" form(s) mentioned above on the express condition that all payments made under both this Proposal and any mutually agreed-to change orders have been made in full, or two (2) years from the date material ships from the manufacturer. This warranty is in lieu of any other warranty or liability for defects. ThyssenKrupp Elevator makes no warranty of merchantability and no warranties which extend beyond the description in this Proposal, nor are there any other warranties, expressed or implied, by operation of law or otherwise. Like any piece of fine machinery, this equipment should be periodically inspected, lubricated, and adjusted by competent personnel. This warranty is not intended to supplant normal maintenance service and shall not be construed to mean that ThyssenKrupp Elevator will provide free service for periodic examination, lubrication, or adjustment, nor will ThyssenKrupp Elevator correct, without a charge, breakage, maladjustments, or other trouble arising from normal wear and tear or abuse, misuse, improper or inadequate maintenance, or any other causes other than defective material or workmanship. In order to make a warranty claim, Purchaser must give ThyssenKrupp Elevator prompt written notice at the address listed*



## ThyssenKrupp Elevator Americas

*on the cover page of this Proposal and provided all payments due under the terms of this Proposal and any mutually agreed to written change orders have been made in full, ThyssenKrupp Elevator shall, at its own expense, correct any proven defect by repair or replacement. ThyssenKrupp Elevator will not, under any circumstances, reimburse Purchaser for cost of work done by others, nor shall ThyssenKrupp Elevator be responsible for the performance of any equipment that has been the subject of revisions or alterations by others. If there is more than one (1) unit which is the subject of work described in this Proposal, this section shall apply separately to each unit as accepted.*

## ThyssenKrupp Elevator Americas



### TERMS AND CONDITIONS

All work described in this Proposal will be performed in a workmanlike manner and will include all labor and material as specified herein.

This Proposal does not include any maintenance, service or repair of the equipment or any other work not expressly described herein. ThyssenKrupp Elevator will submit a separate proposal to Purchaser covering the maintenance and repair of this equipment to be supplied to Purchaser at an additional cost.

ThyssenKrupp Elevator retains title to all equipment supplied by ThyssenKrupp Elevator under this Proposal and a security interest therein, (which, it is agreed, can be removed without material injury to the real property) until all payments under the terms of both this Proposal and any mutually agreed to-change orders have been made. In the event of any default by Purchaser with respect to any payment, or under any other provision of this Proposal, Purchaser authorizes ThyssenKrupp Elevator to take immediate possession of the equipment and enter upon the premises where it is located (without legal process) and remove such equipment or portions thereof irrespective of the manner of its attachment to the real estate or the sale, mortgage, or lease of the real estate. Pursuant to the Uniform Commercial Code, at ThyssenKrupp Elevator's request, Purchaser agrees to join with ThyssenKrupp Elevator in executing any financial or continuation statements which may be appropriate for ThyssenKrupp Elevator to file in public offices in order to perfect its security interest in such equipment.

In the event a third party is retained to enforce, construe or defend any of the terms and conditions of this Proposal or to collect any monies due hereunder, either with or without litigation, the prevailing party shall be entitled to recover all costs and reasonable attorney's fees. The Purchaser does hereby waive trial by jury and does further hereby consent that venue of any proceeding or lawsuit under this Proposal shall be in the county in which the ThyssenKrupp Elevator branch office that is performing the work in question is located.

ThyssenKrupp Elevator shall not be liable for any loss, damage, or delay caused by acts of government, labor troubles, strikes, lockouts, fire, explosion, theft, floods, riot, civil commotion, war, malicious mischief, acts of God or any cause beyond its control. ThyssenKrupp Elevator shall automatically receive an extension of time commensurate with any delay regarding the aforementioned.

Performance of this Proposal is contingent upon Purchaser furnishing ThyssenKrupp with any necessary permission or priority required under the terms and conditions of government regulations affecting the acceptance of this order or the manufacture, delivery or installation of the equipment described in this Proposal.

Should loss of or damage to ThyssenKrupp Elevator's materials, tools or work occur at the job site, Purchaser shall compensate ThyssenKrupp Elevator, unless such loss or damage is caused solely by ThyssenKrupp Elevator's negligence.

Certificates of Workmen's Compensation, Bodily Injury and Property Damage liability Insurance coverage will be furnished to Purchaser upon request. The premium for any bonds or insurance beyond ThyssenKrupp Elevator's standard coverage and limits will be an addition to this Proposal's price.

In consideration of ThyssenKrupp Elevator performing the services herein specified, Purchaser, to the fullest extent permitted by law, expressly agrees to indemnify, defend, save harmless, discharge, release and forever acquit ThyssenKrupp Elevator Corporation, ThyssenKrupp Elevator Manufacturing, Inc., their respective employees, officers, agents, affiliates, and subsidiaries from and against any and all claims, demands, suits, and proceedings for loss, property damage (including damage to the equipment which is the subject matter of this Proposal), personal injury or death that are alleged to have arisen out of the presence, use, misuse, maintenance, installation, removal, Repair, manufacture, design, operation or condition of the equipment that is the subject matter of this Proposal or any equipment located in the elevator machine room and/or hoistways of the project location. Purchaser's duty to indemnify does not apply to the extent that the loss, property damage (including damage to the equipment which is the subject matter of this Proposal), personal injury or death is determined to be caused by or resulting from the sole negligence of ThyssenKrupp Elevator and/or its employees. Purchaser recognizes that its obligation to ThyssenKrupp Elevator under this clause includes payment of all attorneys' fees,



## ThyssenKrupp Elevator Americas

court costs, judgments, settlements, interest and any other expenses of litigation arising out of such claims, demands, suits or proceedings.

Purchaser further expressly agrees to name ThyssenKrupp Elevator Corporation and ThyssenKrupp Elevator Manufacturing, Inc. along with their respective officers, agents, affiliates and subsidiaries as additional insureds in Purchaser's liability and any excess (umbrella) liability insurance policy(ies). Such insurance must insure the above-referenced additional insureds for those claims and/or losses referenced in the above paragraph, and for claims and/or or losses arising from the additional insureds' sole negligence or responsibility. Such insurance must specify that its coverage is primary and non-contributory. Purchaser hereby waives its right of subrogation.

By executing this Proposal, Purchaser agrees that in no event shall ThyssenKrupp Elevator be liable for any consequential, indirect, incidental, exemplary, special or liquidated damages of any type or kind under any circumstances.

If any drawings, illustrations or other descriptive materials were furnished in conjunction with this Proposal, they were intended solely as approximations and to illustrate the general style and arrangement of equipment being offered and should, under no circumstances, be relied upon for their accuracy.

Purchaser's acceptance of this Proposal and its approval by an authorized manager of ThyssenKrupp Elevator will constitute exclusively and entirely the agreement between the parties for the goods and services herein described. All other prior representations or Proposals, whether written or verbal, will be deemed to be merged herein and no other changes in or additions to this Proposal will be recognized unless made in writing and properly executed by both parties as a change order. Should Purchaser's acceptance be in the form of a purchase order or other similar document, the provisions of this Proposal will exclusively govern the relationship of the parties with respect to this transaction. No agent or employee shall have the authority to waive or modify any of the terms of this Proposal without the prior written approval of an authorized ThyssenKrupp Elevator manager.

ThyssenKrupp Elevator Corporation:	Accessible Space, Inc	ThyssenKrupp Elevator Corporation Approval:
<p>By: _____ (Signature of ThyssenKrupp Elevator Representative)</p> <p>Brian Hodges Sales Representative brian.hodges@thyssenkrupp.com</p> <p>_____ (Date Submitted)</p>	<p>By: _____ (Signature of Authorized Individual)</p> <p>_____ (Print or Type Name)</p> <p>_____ (Print or Type Title)</p> <p>_____ (Date of Approval)</p>	<p>By: _____ (Signature of Authorized Individual)</p> <p>_____ (Print or Type Name)</p> <p>_____ (Print or Type Title)</p> <p>_____ (Date of Approval)</p>



1105 South Rock Blvd  
Ste 127 Brookside  
RENO, NV 89502-7166  
(775) 331 0590  
FAX: (775) 331 4093  
www.simplexgrinnell.com

## SimplexGrinnell Quotation

TO:  
Accessible Space Inc.  
2550 University Ave W, #3  
Attn: Accounts Payable  
SAINT PAUL, MN 551140000

Project: ASI: Frost Yasmer FA  
Customer Reference: 454-0816-E29  
SimplexGrinnell Reference: L36386-000048  
Proposal #: P36386-000104  
Date: 12/05/2016  
Page 1 of 6

SimplexGrinnell is pleased to offer for your consideration this quotation for the above project.

The following Fire Alarm proposal is offered pursuant to Owner request for the following facility (Project Location): **Frost Yasmer Estates, 1009 E. 5<sup>th</sup> Street, Carson City, Nevada.**

SimplexGrinnell (SG) proposes to replace the existing conventional Fire Alarm system with an addressable Simplex brand system using a 4007ES model control panel. Other FAS field devices will be replaced as described in the Statement of Work below. Types and quantities of FAS components are proposed per SG best practices of design and configuration.

Our scope of work is proposed as "turnkey". Our proposal has certain limitations, and there is work that must be done by others in order to provide full system functionality within the project area. Please refer to our "Clarifications and Limitations" section below for more details.

Thank you for the opportunity to submit this proposal to your attention. We look forward to your favorable consideration. If you have any questions, or require further clarification, please do not hesitate to contact Guy Torrey at [gtorrey@simplexgrinnell.com](mailto:gtorrey@simplexgrinnell.com).

### Statement of Work

SimplexGrinnell (SG) proposes to furnish a new Simplex brand FAS for the prescribed Project Location.

The installation process will consist of a removal of the existing Fire Alarm control panel, annunciator panel and initiating devices (i.e. smoke/heat detectors and pull stations). All existing Fire Alarm notification appliances (i.e. horn strobes) will be left in place and connected to the new FAS. Addressable modules will be furnished for connection to fire sprinkler switches (if any), rooftop units (if any) and new elevator controls.

New boxes and cabling will be furnished by SG for all new devices that are not directly replacing existing devices. Otherwise, all existing raceway (i.e. conduits and boxes) and Fire Alarm cabling will be tested and reused. If existing raceway and/or cabling is found to not be in reusable condition, the Owner will be notified and repairs will be offered on a Time and Materials basis separate from this proposal.

THIS QUOTATION AND ANY RESULTING CONTRACT SHALL BE SUBJECT TO THE GENERAL TERMS AND CONDITIONS ATTACHED HERETO.  
Fire, Security, Communications, Sales & Service  
Offices & Representatives in Principal Cities throughout North America



Project: ASI: Frost Yasmer FA  
Customer Reference: 454-0816-E29  
SimplexGrinnell Reference: L36386-000048  
Date: 12/05/2016  
Page 2 of 6

## SimplexGrinnell Quotation

As part of this proposal, SG will furnish the following equipment and accessories:

**Existing 120V power will be reused for the Fire Alarm control panel. All other electrical work is excluded from this proposal and shall be furnished by Owner if required. All telephony and IT/Network equipment and connectivity shall be furnished by Owner.**

### Fire Alarm System Scope of Work

SG will supply the following as part of our FAS proposal:

1. Design services to include: CAD work for production of floor plans, product data submittal, shop drawings, submittal to AHJ with associated standard (i.e. non-expedited) plan review fees.
2. Installation and programming by factory-certified technicians, in accordance with applicable codes and standards.
3. Pre-test with Owner and final testing with AHJ.
4. Work conducted during of normal SG working hours of 0700-1600, Mon-Fri excluding holidays.
5. One (1) one-hour Customer Training Session for FAS.

### Clarifications and Limitations

1. This proposal is submitted under SimplexGrinnell terms and conditions as provided below. The language of this proposal shall be included in any contract/subcontract documents issued by the Contractor.
2. **Prevailing Wage hourly rates applicable to this proposal will be \$135.00 per hour (onsite work only). All other labor will be at standard National Account rate of \$125.00 per hour.**
3. Furnish = Supply and Install. FBO = Furnished by Others.
4. In addition to the scope(s) of work specified above, this proposal also includes:
  - a. Applicable sales/use taxes.
  - b. FOB Freight.
  - c. Project management and documentation.
  - d. Prevailing wage. Wage determinations shall be those of the Davis-Bacon Act (DBA), applicable to work performed onsite by SG and current at time of bid.
  - e. Certified payroll.
  - f. One (1) year warranty on workmanship and equipment, from date of AHJ final inspection.
5. In addition to any FBO items noted above, the following additional items are expressly excluded from SG scope of work:
  - a. Patch and paint.
  - b. All fire stopping material and fire stop penetrations.
  - c. Signage of any kind.
  - d. Fire watch, if required.
  - e. Work conducted outside of normal TSG working hours as defined above.
  - f. Bonding (i.e. bid and performance bonds) and associated fees.
6. End User Training (EUT) provided by SG would be conducted per specification and scheduled with Owner designated personnel during the normal SG commissioning process.
7. All Fire Alarm testing will be per a mutually agreeable schedule as determined by Owner, AHJ and SG.
8. All coordination required for elevator testing will be per a mutually agreeable schedule as determined by Owner, State Elevator inspector, elevator contractor and SG.
9. This proposal is valid for a period of thirty (30) days, after which it will be subject to review and amendment.



Project: ASI: Frost Yasmer FA  
Customer Reference: 454-0816-E29  
SimplexGrinnell Reference: L36386-000048  
Date: 12/05/2016  
Page 3 of 6

## SimplexGrinnell Quotation

### Fire Alarm

QUANTITY	MODEL NUMBER	DESCRIPTION
1	4007-9101	4007ES HYBRID FACP, RED
2	4007-9801	ZONE-RELAY MODULE
1	4007-9802	25V REGULATOR MODULE
1	4007-9806	SDACT MODULE
1	ETHEDROP	ETHERNET - NETWORK COMPATIBLE
2	2081-9288	BATTERY 12.7AH
1	4606-9202	4007ES COLOR LCD ANNUN, RED
2	4098-9792	SENSOR BASE
2	4098-9714	PHOTO SENSOR
1	4098-9792E	SENSOR BASE
1	4098-9733	HEAT SENSOR
1	4099-9006	STATION-LED, DA PUSH ADDR
1	4090-9001	SUPERVISED IAM
4	4090-9002	RELAY IAM
1	DPIM	INSTALLATION MATERIALS

**Net selling price for BOM, FOB shipping point, \$3,390.00**

**Net selling price for LABOR, FOB shipping point, \$7,240.00**

**Net selling price for PERMIT, FOB shipping point, \$250.00**

**Total net selling price, FOB shipping point, \$10,880.00**



### TERMS AND CONDITIONS

**1. Payment.** Payments shall be invoiced and due in accordance with the terms and conditions set forth above. Work performed on a time and material basis shall be at the then-prevailing Company rate for material, labor, and related items, in effect at the time supplied under this Agreement. Company shall invoice Customer for progress payments to one hundred (100%) percent based upon equipment delivered or stored, and services performed. Customers without established satisfactory credit shall make payments of cash in advance, upon delivery or as otherwise specified by Company. Where Customer establishes and maintains satisfactory credit, payments shall be due and payable thirty (30) days from date of invoice. Company reserves the right to revoke or modify Customer's credit at its sole discretion. The Customer's failure to make payment when due is a material breach of this Agreement.

If Customer fails to make any payment when due, in addition to any other rights and remedies available, Company shall have the right, at Company's sole discretion, to stop performing any Services and/or withhold further deliveries of materials, until the account is current. In the event payment is not received when due, Company may, at its discretion, assess late fees at the rate of 1.5% per month or the maximum rate allowed by law. Customer agrees to pay all costs of collection, including without limitation costs, fees, and attorneys' fees. Customer's failure to make payment when due is a material breach of this Agreement until the account is current.

**2. Pricing.** The pricing set forth in this Agreement is based on the number of devices to be installed and services to be performed as set forth in the Scope of Work ("Equipment" and "Services"). If the actual number of devices installed or services to be performed is greater than that set forth in the Scope of Work, the price will be increased accordingly. If this Agreement extends beyond one year, SimplexGrinnell may increase prices upon notice to the Customer. Customer agrees to pay all taxes, permits, and other charges, including but not limited to state and local sales and excise taxes, however designated, levied or based on the service charges pursuant to this Agreement.

**3. Alarm Monitoring Services.** Any reference to alarm monitoring services in this Agreement is included for pricing purposes only. Alarm monitoring services are performed pursuant to the terms and conditions of Company's standard alarm monitoring services agreement.

**4. Code Compliance.** Company does not undertake an obligation to inspect for compliance with laws or regulations unless specifically stated in the Scope of Work. Customer acknowledges that the Authority Having Jurisdiction (e.g. Fire Marshal) may establish additional requirements for compliance with local codes. Any additional services or equipment required will be provided at an additional cost to Customer.

**5. Limitation of Liability; Limitations of Remedy.** It is understood and agreed by the Customer that Company is not an insurer and that insurance coverage, if any, shall be obtained by the Customer and that amounts payable to company hereunder are based upon the value of the services and the scope of liability set forth in this Agreement and are unrelated to the value of the Customer's property and the property of others located on the premises. Customer agrees to look exclusively to the Customer's insurer to recover for injuries or damage in the event of any loss or injury and that Customer releases and waives all right of recovery against Company arising by way of subrogation. Company makes no warranty or Warranty, including any implied warranty of merchantability or fitness for a particular purpose that equipment or services supplied by Company will detect or avert occurrences or the consequences therefrom that the equipment or service was designed to detect or avert. It is impractical and extremely difficult to fix the actual

damages, if any, which may proximately result from failure on the part of Company to perform any of its obligations under this Agreement. Accordingly, Customer agrees that, Company shall be exempt from liability for any loss, damage or injury arising directly or indirectly from occurrences, or the consequences therefrom, which the equipment or service was designed to detect or avert. Should Company be found liable for any loss, damage or injury arising from a failure of the equipment or service in any respect, Company's liability shall be limited to an amount equal to the Agreement price (as increased by the price for any additional work) or where the time and material payment term is selected, Customer's time and material payments to Company. Where this Agreement covers multiple sites, liability shall be limited to the amount of the payments allocable to the site where the incident occurred. Such sum shall be complete and exclusive. If Customer desires Company to assume greater liability, the parties shall amend this Agreement by attaching a rider setting forth the amount of additional liability and the additional amount payable by the Customer for the assumption by Company of such greater liability, provided however that such rider shall in no way be interpreted to hold Company as an insurer. IN NO EVENT SHALL COMPANY BE LIABLE FOR ANY DAMAGE, LOSS, INJURY, OR ANY OTHER CLAIM ARISING FROM ANY SERVICING, ALTERATIONS, MODIFICATIONS, CHANGES, OR MOVEMENTS OF THE COVERED SYSTEM(S) OR ANY OF ITS COMPONENT PARTS BY THE CUSTOMER OR ANY THIRD PARTY. COMPANY SHALL NOT BE LIABLE FOR INDIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES OF ANY KIND, INCLUDING BUT NOT LIMITED TO DAMAGES ARISING FROM THE USE, LOSS OF THE USE, PERFORMANCE, OR FAILURE OF THE COVERED SYSTEM(S) TO PERFORM. The limitations of liability set forth in this Agreement shall inure to the benefit of all parents, subsidiaries and affiliates of company, whether direct or indirect, company's employees, agents, officers and directors.

**6. Reciprocal Waiver of Claims (SAFETY Act).** Certain of SimplexGrinnell's systems and services have received Certification and/or Designation as Qualified Anti-Terrorism Technologies ("QATT") under the Support Anti-terrorism by Fostering Effective Technologies Act of 2002, 6 U.S.C. §§ 441-444 (the "SAFETY Act"). As required under 6 C.F.R. 25.5 (e), to the maximum extent permitted by law, SimplexGrinnell and Customer hereby agree to waive their right to make any claims against the other for any losses, including business interruption losses, sustained by either party or their respective employees, resulting from an activity resulting from an "Act of Terrorism" as defined in 6 C.F.R. 25.2, when QATT have been deployed in defense against, response to, or recovery from such Act of Terrorism.

**7. General Provisions.** Customer has selected the service level desired after considering and balancing various levels of protection afforded, and their related costs. Customer acknowledges and agrees that by this Agreement, Company, unless specifically stated, does not undertake any obligation to maintain or render Customer's system or equipment as Year 2000 compliant, which shall mean, capable of correctly handling the processing of calendar dates before or after December 31, 1999. All work to be performed by Company will be performed during normal working hours of normal working days (8:00 a.m. - 5:00 p.m., Monday through Friday, excluding Company holidays), as defined by Company, unless additional times are specifically described in this Agreement.

Company will perform the services described in the Scope of Work section ("Services") for one or more system(s) or

equipment as described in the Scope of Work section or the listed attachments ("Covered System(s)").

The Customer shall promptly notify Company of any malfunction in the Covered System(s) which comes to Customer's attention. This Agreement assumes the Covered System(s) are in operational and maintainable condition as of the Agreement date. If, upon initial inspection, Company determines that repairs are recommended, repair charges will be submitted for approval prior to any work. Should such repair work be declined Company shall be relieved from any and all liability arising therefrom. UNLESS OTHERWISE SPECIFIED IN THIS AGREEMENT, ANY INSPECTION (AND, IF SPECIFIED, TESTING) PROVIDED UNDER THIS AGREEMENT DOES NOT INCLUDE ANY MAINTENANCE, REPAIRS, ALTERATIONS, REPLACEMENT OF PARTS, OR ANY FIELD ADJUSTMENTS WHATSOEVER, NOR DOES IT INCLUDE THE CORRECTION OF ANY DEFICIENCIES IDENTIFIED BY COMPANY TO CUSTOMER. COMPANY SHALL NOT BE RESPONSIBLE FOR EQUIPMENT FAILURE OCCURRING WHILE COMPANY IS IN THE PROCESS OF FOLLOWING ITS INSPECTION TECHNIQUES, WHERE THE FAILURE ALSO RESULTS FROM THE AGE OR OBSOLESCENCE OF THE ITEM OR DUE TO NORMAL WEAR AND TEAR. THIS AGREEMENT DOES NOT COVER SYSTEMS, EQUIPMENT, COMPONENTS OR PARTS THAT ARE BELOW GRADE, BEHIND WALLS OR OTHER OBSTRUCTIONS OR EXTERIOR TO THE BUILDING, ELECTRICAL WIRING, AND PIPING.

**8. Customer Responsibilities.** Customer shall furnish all necessary facilities for performance of its work by Company, adequate space for storage and handling of materials, light, water, heat, heat tracing, electrical service, local telephone, watchman, and crane and elevator service and necessary permits. Where wet pipe system is installed, Customer shall supply and maintain sufficient heat to prevent freezing of the system. Customer shall promptly notify Company of any malfunction in the Covered System(s) which comes to Customer's attention. This Agreement assumes any existing system(s) are in operational and maintainable condition as of the Agreement date. If, upon initial inspection, Company determines that repairs are recommended, repair charges will be submitted for approval prior to any work. Should such repair work be declined Company shall be relieved from any and all liability arising therefrom.

Customer shall further:

- supply required schematics and drawings unless they are to be supplied by Company in accordance with this Agreement;
- Provide a safe work environment, in the event of an emergency or Covered System(s) failure, take reasonable safety precautions to protect against personal injury, death, and property damage, continue such measures until the Covered System(s) are operational, and notify Company as soon as possible under the circumstances.
- Provide Company access to any system(s) to be serviced,
- Comply with all laws, codes, and regulations pertaining to the equipment and/or services provided under this agreement.

**9. Excavation.** In the event the Work includes excavation, Customer shall pay, as an extra to the contract price, the cost of any additional work performed by Company dues to water, quicksand, rock or other unforeseen condition or obstruction encountered or shoring required.

**10. Structure and Site Conditions.** While employees of Company will exercise reasonable care in this respect, Company shall be under not responsibility for loss or damage due to the character, condition or use of foundations, walls, or other structures not erected by it or resulting from the excavation in proximity thereto, or for damage resulting from concealed piping, wiring, fixtures, or other equipment or condition of water pressure. All shoring or protection of

## SALE AND INSTALLATION AGREEMENT (continued)

foundation, walls or other structures subject to being disturbed by any excavation required hereunder shall be the responsibility of Customer. Customer shall have all things in readiness for installation including, without limitation, structure to support the sprinkler system and related equipment (including tanks), other materials, floor or suitable working base, connections and facilities for erection at the time the materials are delivered. In the event Customer fails to have all things in readiness at the time scheduled for receipt of materials, Customer shall reimburse Company for all expenses caused by such failure. Failure to make areas available to Company during performance in accordance with schedules that are the basis for Company's proposal shall be considered a failure to have things in readiness in accordance with the terms of this Agreement.

**11. Confined Space.** If access to confined space by Company is required for the performance of Services, Services shall be scheduled and performed in accordance with Company's then-current hourly rate.

**12. Hazardous Materials.** Customer represents that, except to the extent that Company has been given written notice of the following hazards prior to the execution of this Agreement, to the best of Customer's knowledge there is no:

- "permit confined space," as defined by OSHA,
- risk of infectious disease,
- need for air monitoring, respiratory protection, or other medical risk,
- asbestos, asbestos-containing material, formaldehyde or other potentially toxic or otherwise hazardous material contained in or on the surface of the floors, walls, ceilings, insulation or other structural components of the area of any building where work is required to be performed under this Agreement.

All of the above are hereinafter referred to as "Hazardous Conditions".

Company shall have the right to rely on the representations listed above. If hazardous conditions are encountered by Company during the course of Company's work, the discovery of such materials shall constitute an event beyond Company's control and Company shall have no obligation to further perform in the area where the hazardous conditions exist until the area has been made safe by Customer as certified in writing by an independent testing agency, and Customer shall pay disruption expenses and re-mobilization expenses as determined by Company.

This Agreement does not provide for the cost of capture, containment or disposal of any hazardous waste materials, or hazardous materials, encountered in any of the Covered System(s) and/or during performance of the Services. Said materials shall at all times remain the responsibility and property of Customer. Company shall not be responsible for the testing, removal or disposal of such hazardous materials.

**13. OSHA Compliance.** Customer shall indemnify and hold Company harmless from and against any and all claims, demands and/or damages arising in whole or in part from the enforcement of the Occupational Safety Health Act (and any amendments or changes thereto) unless said claims, demands or damages are a direct result of causes within the exclusive control of Company.

**14. Interferences.** Customer shall be responsible to coordinate the work of other trades (including but not limited to ducting, piping, and electrical) and for and additional costs incurred by Company arising out of interferences to Company's work caused by other trades.

**15. Modifications and Substitutions.** Company reserves the right to modify materials, including substituting materials of later design, providing that such modifications or substitutions will not materially affect the performance of the Covered System(s).

**16. Changes, Alterations, Additions.** Changes, alterations and additions to the Scope of Work, plans, specifications or construction schedule shall be invalid unless approved in writing by Company. Should changes be approved by Company, that increase or decrease the cost of the work to Company, the parties shall agree, in writing, to the change in price prior to

performance of any work. However, if no agreement is reached prior to the time for performance of said work, and Company elects to perform said work so as to avoid delays, then Company's estimate as to the value of said work shall be deemed accepted by Customer. In addition, Customer shall pay for all extra work requested by Customer or made necessary because of incompleteness or inaccuracy of plans or other information submitted by Customer with respect to the location, type of occupancy, or other details of the work to be performed. In the event the layout of Customer's facilities has been altered, or is altered by Customer prior to the completion of the Work, Customer shall advise Company, and prices, delivery and completion dates shall be changed by Company as may be required.

**17. Commodities Availability.** Company shall not be responsible for failure to provide services, deliver products, or otherwise perform work required by this Agreement due to lack of available steel products or products made from plastics or other commodities. 1) In the event Company is unable, after reasonable commercial efforts, to acquire and provide steel products, or products made from plastics or other commodities, if required to perform work required by this Agreement, Customer hereby agrees that Company may terminate the Agreement, or the relevant portion of the Agreement, at no additional cost and without penalty. Customer agrees to pay Company in full for all work performed up to the time of any such termination. 2) If Company is able to obtain the steel products or products made from plastics or other commodities, but the price of any of the products has risen by more than 10% from the date of the bid, proposal or date Company executed this Agreement, whichever occurred first, then Company may pass through that increase through a reasonable price increase to reflect increased cost of materials.

**18. Project Claims.** Any claim of failure to perform against Company arising hereunder shall be deemed waived unless received by Company, in writing specifically setting forth the basis for such claim, within ten (10) days after such claims arises.

**19. Backcharges.** No charges shall be levied against the Seller unless seventy-two (72) hours prior written notice is given to Company to correct any alleged deficiencies which are alleged to necessitate such charges and unless such alleged deficiencies are solely and directly caused by Company.

**20. System Equipment.** The purchase of equipment or peripheral devices (including but not limited to smoke detectors, passive infrared detectors, card readers, sprinkler system components, extinguishers and hoses) from Company shall be subject to the terms and conditions of this Agreement. If, in Company's sole judgment, any peripheral device or other system equipment, which is attached to the Covered System(s), whether provided by Company or a third party, interferes with the proper operation of the Covered System(s), Customer shall remove or replace such device or equipment promptly upon notice from Company. Failure of Customer to remove or replace the device shall constitute a material breach of this Agreement. If Customer adds any third party device or equipment to the Covered System(s), Company shall not be responsible for any damage to or failure of the Covered System(s) caused in whole or in part by such device or equipment.

**21. Reports.** Where inspection and/or test services are selected, such inspection and/or test shall be completed on Company's then current Report form, which shall be given to Customer, and, where applicable, Company may submit a copy thereof to the local authority having jurisdiction. The Report and recommendations by Company are only advisory in nature and are intended to assist Customer in reducing the risk of loss to property by indicating obvious defects or impairments noted to the system and equipment inspected and/or tested. They are not intended to imply that no other defects or hazards exist or that all aspects of the Covered System(s), equipment, and components are under control at the time of inspection. Final responsibility for the condition and operation of the Covered System(s) and equipment and components lies with Customer.

**22. Limited Warranty.** Subject to the limitations below, Company warrants any equipment (as distinguished from the Software) installed pursuant to this Agreement to be free from defects in material and workmanship under normal use for a period of one (1) year from the date of first beneficial use or all or any part of the Covered System(s) or 18 months after Equipment shipments, whichever is earlier, provided however, that Company's sole liability, and Customer's sole remedy, under this limited warranty shall be limited to the repair or replacement of the Equipment or any part thereof, which Company determines is defective, at Company's sole option and subject to the availability of service personnel and parts, as determined by Company. Company warrants expendable items, including, but not limited to, video and print heads, television camera tubes, video monitor displays tubes, batteries and certain other products in accordance with the applicable manufacturer's warranty. Company does not warrant devices designed to fail in protecting the System, such as, but not limited to, fuses and circuit breakers.

Company warrants that any Company software described in this Agreement, as well as software contained in or sold as part of any Equipment described in this Agreement, will reasonably conform to its published specifications in effect at the time of delivery and for ninety (90) days after delivery. However, Customer agrees and acknowledges that the software may have inherent defects because of its complexity. Company's sole obligation with respect to software, and Customer's sole remedy, shall be to make available published modifications, designed to correct inherent defects, which become available during the warranty period.

If Repair Services are included in this Agreement, Company warrants that its workmanship and material for repairs made pursuant to this Agreement will be free from defects for a period of ninety (90) days from the date of furnishing.

**EXCEPT AS EXPRESSLY SET FORTH HEREIN, COMPANY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO THE SERVICES PERFORMED OR THE PRODUCTS, SYSTEMS OR EQUIPMENT, IF ANY, SUPPORTED HEREUNDER. COMPANY MAKES NO WARRANTY OR REPRESENTATION, AND UNDERTAKES NO OBLIGATION TO ENSURE BY THE SERVICES PERFORMED UNDER THIS AGREEMENT, THAT COMPANY'S PRODUCTS OR THE SYSTEMS OR EQUIPMENT OF THE CUSTOMER WILL CORRECTLY HANDLE THE PROCESSING OF CALENDAR DATES BEFORE OR AFTER DECEMBER 31, 1999.**

Warranty service will be performed during Company's normal working hours. If Customer requests warranty service at other than normal working hours, service will be performed at Company's then current rates for after ours services. All repairs or adjustments that are or may become necessary shall be performed by and authorized representative of Company. Any repairs, adjustments or interconnections performed by Customer or any third party shall void all warranties.

**23. Indemnity.** Customer agrees to indemnify, hold harmless and defend Company against any and all losses, damages, costs, including expert fees and costs, and expenses including reasonable defense costs, arising from any and all third party claims for personal injury, death, property damage or economic loss, including specifically any damages resulting from the exposure of workers to Hazardous Conditions whether or not Customer pre-notifies Company of the existence of said hazardous conditions, arising in any way from any act or omission of Customer or Company relating in any way to this Agreement, including but not limited to the Services under this Agreement, whether such claims are based upon contract, warranty, tort (including but not limited to active or passive negligence), strict liability or otherwise. Company reserves the right to select counsel to represent it in any such action.

**24. Insurance.** Customer shall name Company, its officers, employees, agents, subcontractors, suppliers, and



Project: ASI: Frost Yasmer FA  
 Customer Reference: 454-0816-E29  
 SimplexGrinnell Reference: L36386-000048  
 Date: 12/05/2016  
 Page 6 of 6

**SALE AND INSTALLATION AGREEMENT**  
 (continued)

representatives as additional insureds on Customer's general liability and auto liability policies.

**25. Termination.** Any termination under the terms of this Agreement shall be made in writing. In the event Customer terminates this Agreement prior to completion for any reason not arising solely from Company's performance or failure to perform, Customer understands and agrees that Company will incur costs of administration and preparation that are difficult to estimate or determine. Accordingly, should Customer terminate this Agreement as described above, Customer agrees to pay all charges incurred for products and equipment installed and services performed, and in addition pay an amount equal to twenty (20%) percent of the price of products and equipment not yet delivered and Services not yet performed, return all products and equipment delivered and pay a restocking fee of twenty (20%) percent of the price of products or equipment returned.

Company may terminate this Agreement immediately at its sole discretion upon the occurrence of any Event of Default as hereinafter defined. Company may also terminate this Agreement at its sole discretion upon notice to Customer if Company's performance of its obligations under this Agreement becomes impracticable due to obsolescence of equipment at Customer's premises or unavailability of parts.

**26. No Option to Solicit.** Customer shall not, directly or indirectly, on its own behalf or on behalf of any other person, business, corporation or entity, solicit or employ any Company employee, or induce any Company employee to leave his or her employment with Company, for a period of two years after the termination of this Agreement.

**27. Default.** An Event of Default shall be 1) failure of the Customer to pay any amount within ten (10) days after the amount is due and payable, 2) abuse of the System or the Equipment, 3) dissolution, termination, discontinuance, insolvency or business failure of Customer. Upon the occurrence of an Event of Default, Company may pursue one or more of the following remedies, 1) discontinue furnishing Services, 2) by written notice to Customer declare the balance of unpaid amounts due and to become due under the this Agreement to be immediately due and payable, provided that all past due amounts shall bear interest at the rate of 1 1/2% per month (18% per year) or the highest amount permitted by law, 3) receive immediate possession of any equipment for which Customer has not paid, 4) proceed at law or equity to enforce performance by Customer or recover damages for breach of this Agreement, and 5) recover all costs and expenses, including without limitation reasonable attorneys' fees, in connection with enforcing or attempting to enforce this Agreement.

**28. Exclusions.** Unless expressly included in the Scope of Work, this Agreement expressly excludes, without limitation, testing inspection and repair of duct detectors, beam detectors, and UV/IR equipment; provision of fire watches; clearing of ice blockage; draining of improperly pitched piping; replacement of batteries; recharging of chemical suppression systems; reloading of, upgrading, and maintaining computer software; system upgrades and the replacement of obsolete systems, equipment, components or parts; making repairs or replacements necessitated by reason of negligence or misuse of components or equipment or changes to Customer's premises, vandalism, corrosion (including but not limited to micro-bacterially induced corrosion ("MIC")), power failure, current fluctuation, failure due to non-Company installation, lightning, electrical storm, or other severe weather, water, accident, fire, acts of God or any other cause external to the Covered System(s). Repair Services provided pursuant to this Agreement do not cover and specifically excludes system upgrades and the replacement of obsolete systems, equipment, components or parts. All such services may be provided by Company at Company's sole discretion at an additional charge. If Emergency Services are expressly included in the scope of work section, the Agreement price does not include travel expenses.

**29. Force Majeure; Delays.** Company shall not be liable for any damage or penalty for delays or failure to perform work due to acts of God, acts or omissions of Customer, acts of civil or military authorities, Government regulations or priorities, fires, epidemics, quarantine, restrictions, war, riots, civil disobedience or unrest, strikes, delays in transportation, vehicle shortages, differences with workmen, inability to obtain necessary labor, material or manufacturing facilities, defaults of Company's subcontractors, failure or delay in furnishing complete information by Customer with respect to location or other details of work to be performed, impossibility or impracticability of performance or any other cause or causes beyond Company's control, whether or not similar to the foregoing. In the event of any delay caused as aforesaid, completion shall be extended for a period equal to any such delay, and this contract shall not be void or voidable as a result of the delay. In the event work is temporarily discontinued by any of the foregoing, all unpaid installments of the contract price, less an amount equal to the value of material and labor not furnished, shall be due and payable upon receipt of invoice by Customer.

**30. One-Year Limitation on Actions; Choice of Law.** It is agreed that no suit, or cause of action or other proceeding shall be brought against either party more than one (1) year after the accrual of the cause of action or one (1) year after the claim

arises, whichever is shorter, whether known or unknown when the claim arises or whether based on tort, contract, or any other legal theory. The laws of Massachusetts shall govern the validity, enforceability, and interpretation of this Agreement.

**31. Assignment.** Customer may not assign this Agreement without Company's prior written consent. Company may assign this Agreement to an affiliate without obtaining Customer's consent.

**32. Entire Agreement.** The parties intend this Agreement, together with any attachments or Riders (collectively the "Agreement") to be the final, complete and exclusive expression of their Agreement and the terms and conditions thereof. This Agreement supersedes all prior representations, understandings or agreements between the parties, written or oral, and shall constitute the sole terms and conditions of sale for all equipment and services. No waiver, change, or modification of any terms or conditions of this Agreement shall be binding on Company unless made in writing and signed by an Authorized Representative of Company.

**33. Severability.** If any provision of this Agreement is held by any court or other competent authority to be void or unenforceable in whole or in part, this Agreement will continue to be valid as to the other provisions and the remainder of the affected provision.

**34. Legal Fees.** Company shall be entitled to recover from the customer all reasonable legal fees incurred in connection with Company enforcing the terms and conditions of this Agreement.

**35. License Information (Security System Customers):** AL Alabama Electronic Security Board of Licensure 7956 Vaughn Road, Pmb 392, Montgomery, Alabama 36116 (334) 264-9388; AR Regulated by: Arkansas Board of Private Investigators And Private Security Agencies, #1 State Police Plaza Drive, Little Rock 72209 (501)618-8600; CA Alarm company operators are licensed and regulated by the Bureau of Security and Investigative Services, Department of Consumer Affairs, Sacramento, Ca, 95814. Upon completion of the installation of the alarm system, the alarm company shall thoroughly instruct the purchaser in the proper use of the alarm system. Failure by the licensee, without legal excuse, to substantially commence work within 20 days from the approximate date specified in the agreement when the work will begin is a violation of the Alarm Company Act: NY Licensed by N.Y.S. Department of the State: TX Texas Commission on Private Security, 5805 N. Lamar Blvd., Austin, 78752-4422, 512-424-7710. License numbers available at [www.simplexgrinnell.com](http://www.simplexgrinnell.com) or contact your local SimplexGrinnell office.

(Rev. 10/08)

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**IMPORTANT NOTICE TO CUSTOMER**

In accepting this Proposal, Customer agrees to the terms and conditions contained herein including those on the following pages of this Agreement and any attachments or riders attached hereto that contain additional terms and conditions. It is understood that these terms and conditions shall prevail over any variation in terms and conditions on any purchase order or other document that the Customer may issue. Any changes in the system requested by the Customer after the execution of this Agreement shall be paid for by the Customer and such changes shall be authorized in writing. **ATTENTION IS DIRECTED TO THE LIMITATION OF LIABILITY, WARRANTY, INDEMNITY AND OTHER CONDITIONS ON THE FOLLOWING PAGES.** This Proposal shall be void if not accepted in writing within thirty (30) days from the date of the Proposal.

<p>Offered By: SimplexGrinnell LP License#: C2-53679</p> <p>1105 South Rock Blvd Ste 127 Brookside RENO, NV 89502-7166 Telephone: (775) 331 0590 Fax: 775-331-4093</p> <p>Representative: <u>Guy E. Torrey IV</u></p> <p>Email: <u>gtorrey@simplexgrinnell.com</u></p>	<p>Accepted By: (Customer)</p> <p>Company: _____</p> <p>Address: _____</p> <p>Signature: _____</p> <p>Title: _____</p> <p>P.O.#: _____ Date: _____</p>
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Fire, Security, Communications, Sales & Service  
 Offices & Representatives in Principal Cities throughout North America

9	Statement of Financial Position, Frost Yasmer Estates
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# Frost Yasmer Estates Balance Sheet

	11/30/2016
TOTAL ASSET ACCOUNTS	
CURRENT ASSETS	
Petty Cash	\$75.00
Cash in Bank	\$1,786.95
Tenant Accounts Receivable	\$199.00
Accounts Receivable (HUD)	\$15,194.00
Other Accounts Receivable	\$289.00
Miscellaneous Current Assets	\$1,630.00
Tenant Security Deposits	\$7,750.00
Total Current Assets	\$26,923.95
FUNDED RESERVES	
Replacement Reserve	\$102,369.15
Residual Receipts	\$48,230.75
Total Funded Reserves	\$150,599.90
FIXED ASSETS	
Land	\$150,945.00
Buildings	\$1,907,609.58
Building Equipment	\$16,076.15
Furnishings	\$92,021.17
Maintenance Equipment	\$1,078.00
Accumulated Depreciation	(\$1,012,799.41)
Total Fixed Assets	\$1,154,930.49
TOTAL ASSET ACCOUNTS	\$1,332,454.34
LIABILITIES & NET ASSETS	
LIABILITY ACCOUNTS	
CURRENT LIABILITIES	
Accounts Payable - Operations	\$69,999.16
Accounts Payable - Section 8	\$3,381.00
Miscellaneous Current Liabilities	\$4,781.84
Tenant Security Deposits Held in Trust	\$7,659.68
Total Current Liabilities	\$85,821.68
Total Liability Accounts	\$85,821.68
NET ASSETS	
Net Assets	(\$553,067.34)
Capital Advance	\$1,799,700.00
Total Net Assets	\$1,246,632.66
TOTAL LIABILITIES & NET ASSETS	\$1,332,454.34





# Accessible Space, Inc.

2550 University Avenue West, Suite 330 N | St. Paul, Minnesota 55114

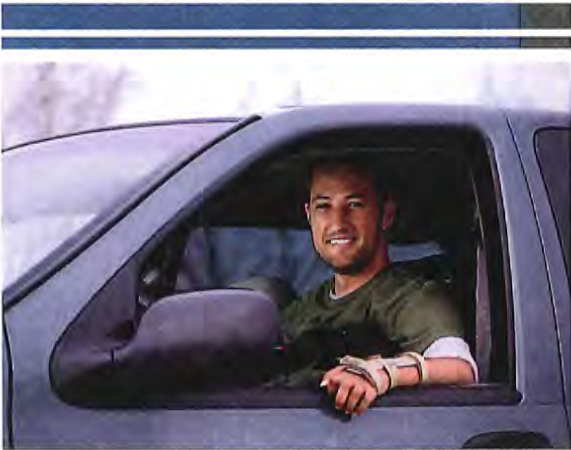
## OUR MISSION HOUSING WITH CARE

The mission of Accessible Space, Inc. (ASI) is to provide accessible, affordable, assisted/supportive and independent living opportunities for persons with physical disabilities and brain injuries, as well as seniors. This mission is accomplished through the development and cost-effective management of accessible, affordable housing, as well as the provision of assisted/supportive living and rehabilitation services.

## ACKNOWLEDGEMENTS FUNDING AND SUPPORT

Accessible Space, Inc. (ASI) gratefully acknowledges the following organizations for their funding and/or support:

The U.S. Department of Housing and Urban Development (HUD); Carson City, Nevada; Nevada Governor's Planning Council on Developmental Disabilities; Nevada Department of Employment, Training, and Rehabilitation; Nevada Department of Human Resources; Nevada Housing Division-Low Income Housing Trust Fund; Federal Home Loan Bank of San Francisco Affordable Housing Program/Norwest Bank Nevada, F.S.B.



Committed to the success of equal housing opportunities throughout the nation

ASI



Accessible Space, Inc. (ASI): Sponsor, Developer and Management Agent

## FROST YASMER ESTATES CARSON CITY, NEVADA



### *Accessible, Affordable Apartments For Adults With Qualifying Disabilities*

1009 East 5th Street  
Carson City, Nevada 89701



**Accessible Space, Inc.**  
**HOUSING WITH CARE**



# FROST YASMER ESTATES CARSON CITY, NEVADA

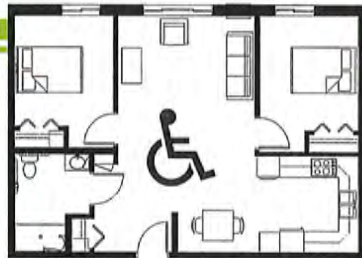
*Accessible, Affordable Apartments For Adults With Qualifying Disabilities*

## AFFORDABLE

- Qualifying households pay 30% of adjusted gross monthly income for rent
- Rent is subsidized by the U.S. Department of Housing and Urban Development (HUD)-Income limits apply
- Rent includes: Heat, water, sewer, trash & snow removal

## BASIC QUALIFICATIONS

- One household member must have a qualifying disability
- Applicants are screened for credit, rental and criminal history
- Households must be income qualified (income limits apply and security deposit required)



## APARTMENT FEATURES

- 24 one and two-bedroom apartments
- Large, accessible bathrooms
- Spacious accessible kitchens
- Carpeted bedroom & living room
- Generous closet & storage space
- Roll-in showers

## BUILDING FEATURES

- Accessible main entrance
- Controlled access entry system
- Elevator service
- Large community room, outdoor terrace and grill
- On-site laundry facilities

1009 East 5th Street  
Carson City, Nevada 89701



## CONVENIENT NEIGHBORHOOD LOCATION

- Grocery stores, shopping & restaurants
- Banking Services
- Hospitals, medical & professional clinics
- Churches

For more information or to request a housing application, please call

- toll-free 1-800-466-7722
- tty/tdd 1-800-627-3529



Apply online [www.accessiblespace.org](http://www.accessiblespace.org)

Accessible Space, Inc. (ASI)

2550 University Avenue West, Suite 330 North  
Saint Paul, Minnesota 55114



# Barrier-free Living

*A friend's tragedy leads three alumni to remove housing obstacles for the disabled*

by Kevin Brooks '89

**A**MONG THE HUNDREDS OF BOUND VOLUMES of honors projects in Macalester's DeWitt Wallace Library, one continues to carry a special meaning for Stephen Wiggins, Charles Berg and Stephen Vander Schaaf, all 1978 graduates.

In 1975, Wiggins' best childhood friend, Mike "Hondo" Pesch, broke his neck after diving into a drought-shallow lake in northern Minnesota. As a result, Pesch was paralyzed for the rest of his life. Wiggins left Macalester for a semester to look after his friend. He spent three weeks with Pesch at St. Mary's Hospital in Rochester, Minn., and later worked as a resident assistant when Pesch moved to Courage Center, a transitional rehabilitation facility in the Twin Cities.

"I talked whenever he was interested in talking," Wiggins recalled, "and I would try to get him out of the hospital for a few hours whenever his rehabilitation regimen was open."

At Courage Center, Wiggins began to see how Pesch and other young residents with impaired mobility — many of whom had been active and athletic before their accidents — wanted an



Stephen Wiggins

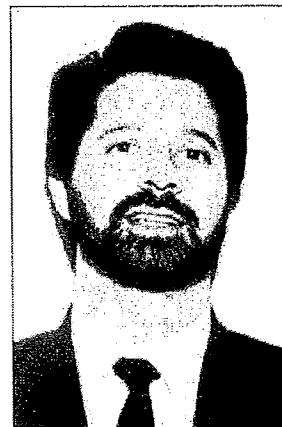
alternative to living in a strictly institutional setting.

"If you were young and handicapped, your choices were to live at home with your parents, or at a nursing home. There were always different places for physical therapy and day activities, but where do you live?" said Wiggins. Back at Macalester, roommates Wiggins and Berg wondered about a residential solution for young people with physical disabilities. Starting from an original idea by Pesch and other Courage Center residents, the two planned what became known as "The Project," an honors project encouraged by faculty advisers Chuck Green and David Lanegran '63.

"The Project" was a proposed organizational structure for a network of affordable, resident-man-

aged homes that would meet the needs of people with spinal cord injuries or mobility impairments. For funding, Wiggins and Berg turned to a rental assistance loan program at the U.S. Department of Housing and Urban Development. They also enlisted the aid of a Twin Cities neurologist, Lawrence Schut, who helped them secure financial backing from a consortium of Minnesota health care companies.

"The Project," inspired by Pesch, became the blueprint for Accessible Space



Charles Berg



Stephen Vander Schaaf

Inc., a nonprofit organization incorporated a few weeks before Wiggins and Berg graduated from Macalester — with honors. Three months later, the two received a \$1.1 million grant from HUD to build five “barrier-free” houses in the Twin Cities.

Wiggins downplays his role in founding ASI. “Mike Pesch came up with the idea of Accessible Space. Chuck and I were simply the people who executed on that concept,” he says.

**W**HEN BERG LEFT THE TWIN CITIES to attend Georgetown University Law School, Wiggins steered the organization through a rough year in 1980 as ASI’s first executive director. He had to deal with a series of disasters, including a tornado which struck one site, flooding that demolished the first floor of ASI’s management headquarters and a violent break-in at a third site. “The old maxim that ‘everything that can go wrong, will go wrong’ couldn’t have been more appropriate,” said Wiggins.

In 1982, Wiggins decided to pursue an M.B.A. at Harvard Business School. He encouraged his roommate, Stephen “Shep”

*“If you were young and handicapped, your choices were to live at home with your parents, or at a nursing home. There were always different places for physical therapy and day activities, but where do you live?”*

— Stephen Wiggins

Vander Schaaf, to interview for the executive director position at ASI. Vander Schaaf, an old friend from Austin, said there was one small problem. He didn’t have a suit. Undaunted, Wiggins loaned him his suit. It was an awkward fit at best, but the shoes — and the job — were a perfect match.

“It ended up being a natural fit, with ASI’s philosophy of resident management and self-reliance,” said Vander Schaaf, who had been instrumental in setting up community block clubs on St. Paul’s East Side.

Under Vander Schaaf’s leadership, ASI grew rapidly. Today, the ASI network includes 32 homes and apartment buildings in four states, and it is recognized nationally as a model for resident-managed care. “One of the biggest advantages, besides the fact that it saves the state money and provides housing, is that it gives many people with a disability a chance to give something back by sharing their care with others in a more efficient system,” says Vander Schaaf.

“Steve Vander Schaaf deserves all the credit for building ASI into the substantial organization it

has become,” says Wiggins, who has since moved on to other projects. After a brief stint in a Wall Street investment firm, he founded Oxford Health Plans Inc. in 1984. Oxford, which operates in New York, New Jersey and Connecticut, has become one of the fastest-growing health maintenance organizations in the country. The company has annual revenues in excess of \$500 million, employs 750 and is the region’s largest health care provider to the poor.

Last year, Wiggins and Berg again joined forces to start Health Partners Inc., a company providing capital and management services to medical groups.



Mike Pesch: The ASI home across the street from Courage Center carries his name.

“I’m bringing skills I developed in the corporate investment and acquisition area,” Berg says, “and Steve obviously has a lot of experience in the health care industry. We still have a great time working together.”

ASI continues to hold a special place in the hearts of Wiggins and Berg, both of whom serve on its board of directors, as well as Vander Schaaf. The organization, pivotal for each of their careers, honors the spirit of a good friend while setting new standards for accessible, affordable housing with supportive care services.

Mike Pesch died Jan. 6, 1992, a year before the opening of the ASI home that carries his name. Pesch Place, located across the street from Courage Center, is a lasting tribute to his memory. ●

# Art show features work of developmentally disabled

BY SANDI HOOPER

schoover@evadigital.com

Artist Gene Hughes doesn't believe in stereotyping, and he has devoted the past two years to proving that the developmentally disabled are not only part of the community, but part of the arts community.

An art exhibit held Friday afternoon at the Frost Yaskin Building on East Fifth Street featured the work of 10 students who live there.

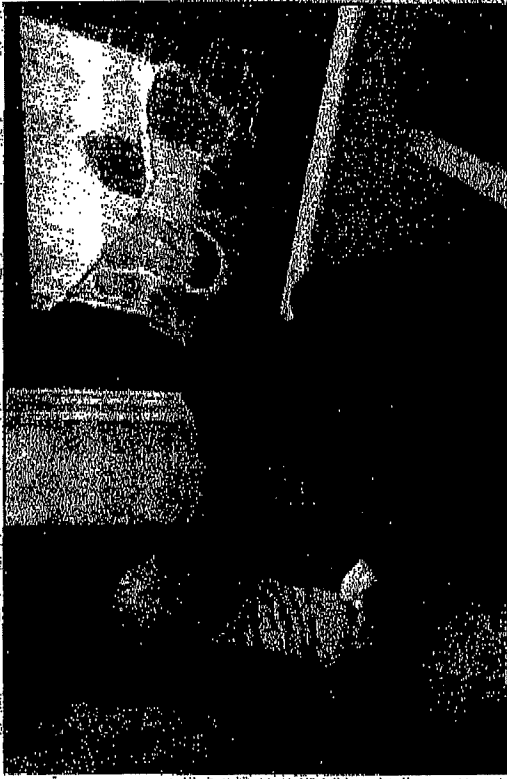
"I don't like the stereotypes that they can't do this or they can't do that, because they can. I have a voice through my art, and I've found that they can have a voice and create beautiful works of art if you are patient and pay attention to their sensibilities and be firm," Hughes said.

"You would not believe how sensitive they are to other people's feelings, and I try to encourage them to share their feelings through their art," he said.

Hughes, who drives to Carson City once a week from Reno, is originally from Chicago. He has been teaching art for 29 years, but has devoted an hour and a half every week for nearly three years to teaching different art media and styles to some of the residents of the Holdsworth Inc. facility.

"This exhibit is a celebration of artistic talent," Hughes said. "I hope it's a validation that these artists are a part of the community."

For the show, Hughes selected from



Francis Huggins, who is blind, feels the texture of his artwork while talking with instructor Gene Hughes at the art show at the Frost Yaskin Building on Friday.

an accumulation of work from the class. He picked some to mat and some to frame for the Friday show.

"I encourage them to try different mediums and to follow their own style," he said.

A number of friends and family members joined the artists during the reception.

Terri Garlan showed her two paintings of a quail dome in watercolor and Dalmatians done in mixed mediums.

"I did these a few months ago," Garlan said. "It helps me with my

hands.

Lez Rough showed her painting of horses.

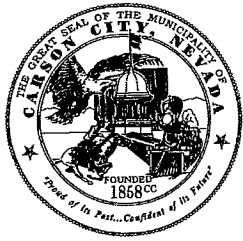
"I've been doing it for years. It helps me to relax," she said.

Ingrid Stearns said she created her white shark using pastels and chalk.

"I did it all by myself. The skills and learning are really educational, and I enjoy learning," Stearns said.

Hughes said he has enjoyed this class so much, he is planning to start another class with another organization soon.

SHANNON STZ/NEWDA/AFRICA



# Community Development Block Grant (CDBG) Program Application Fiscal Year 2017–2018

## GENERAL INFORMATION

PLEASE READ ATTACHED INSTRUCTIONS ON PAGE NN FOR MORE INFORMATION.  
 APPLICATIONS ARE DUE\*: **JANUARY 13, 2017, 4:00 P.M.**  
 PLEASE SUBMIT THE ORIGINAL PLUS 2 COPIES TO:

Carson City Dept. of Finance  
 201 N. Carson St., Ste. 3  
 Carson City, NV 89701

\*The deadline established is firm. Any application received after the deadline will not be considered for funding. Applications must be unstapled. An electronic version of this document is available at [CARSON.ORG/CDBG](http://CARSON.ORG/CDBG).

## APPLICANT INFORMATION

<b>Agency Name:</b> Carson City Public Works	
<b>Agency Mailing Address:</b> 3505 Butti Way, Carson City, NV 89701	
<b>Project Name:</b> North Carson Street Pedestrian Improvements	
<b>Project Address/Location:</b> North Carson Street from Bath Street to John Street	
<b>Agency Director:</b> Darren Schulz	
<b>Board Chairperson:</b> Brad Bonkowski, RTC Chair	
<b>Contact Person:</b> Patrick Pittenger	
<b>Phone Number:</b> 775-283-7396	<b>Email:</b> PPittenger@carson.org
<b>Fax:</b> 775-887-2112	<b>Website (if applicable):</b> www.carson.org
<b>How long has your organization been in existence?</b>	<b>In Carson City?</b> Yes

## PROJECT FUNDING

<b>Requested amount:</b>	\$230,327
<b>Other funding:</b>	N/A
<b>Total project cost:</b>	\$230,327

## PROJECT SUMMARY

Please provide a **brief** summary of the proposed project (not the organization), including what the project is, who will be served, how many will be served, and where will it take place. The description should be **no more than five sentences**.

The project will improve the accessibility of intersections and sidewalks along North Carson Street between Bath Street and John Street by reconstructing sidewalks, driveway access, and ramps to ADA standards. The North Carson Street corridor is a commercial center comprised of retail and service-oriented businesses, including Grocery Outlet and FISH. The corridor serves the entire City, but is located within an area that is predominately low to moderate income (53%). This project type and location is identified in the 5-Year Consolidated Plan as Priority Needs 5, 6, and 12.

## FUNDING CATEGORY

<input checked="" type="checkbox"/> Public Improvements	<input type="checkbox"/> Public Services
<input type="checkbox"/> Economic Development	<input type="checkbox"/> Housing

## PROJECT ELIGIBILITY

A. This project meets at least ONE of the HUD national objectives listed below (please check all that apply)

1. Benefits low/moderate income individuals/households  
 2. Addresses the prevention or elimination of slums or blight  
 3. Meets a particularly urgent community development need

B. Check **all** statements that describe HOW this project meets one of the National Objectives above:

**L/M Area Benefit:** the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. **Examples:** street improvements, water/sewer lines, neighborhood facilities, façade improvements in neighborhood commercial districts.

**L/M Limited Clientele:** the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. **Examples:** construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

**L/M Housing:** the project adds or improves permanent residential structures that will be occupied by L.M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family structures. Rental units for L/M income persons must be occupied at affordable rents. Examples: acquisition of property for permanent housing, rehabilitation of permanent housing, conversion of non-residential structures into permanent housing.

**L/M Jobs:** the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. **Examples:** loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close with resultant loss of jobs, a majority of which are held by L/M persons.

**Microenterprise Assistance:** the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. (A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

**Slum or Blighted Area:** the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area.

\_\_\_\_\_ **Spot Blight:** the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to the extent necessary to eliminate conditions detrimental to public health and safety. **Examples:** historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

**C. Project Category (check one):**

- \_\_\_\_\_ Public Service (i.e., a new service or an **increase** in the level of service)
- X** Public Facilities and Improvements (i.e., homeless shelter, water and sewer facilities, flood and drainage improvements, fire protection facilities/equipment, community centers, senior centers, health centers, parking, landscaping, streets, curbs, gutters and sidewalks, parks and playgrounds).
- \_\_\_\_\_ Acquisition of Real Property
- \_\_\_\_\_ Disposition of Real Property (sale, lease or donation)
- \_\_\_\_\_ Privately-Owned Utilities
- \_\_\_\_\_ Relocation Payments and Assistance to Displaced Persons
- \_\_\_\_\_ Removal of Architectural Barriers, Handicapped Accessibility
- \_\_\_\_\_ Housing Rehabilitation (weatherization)
- \_\_\_\_\_ Historic Preservation
- \_\_\_\_\_ Commercial or Industrial Rehabilitation, including façade improvements and correction of code violations
- \_\_\_\_\_ Special Economic Development or assistance to microenterprises

## PROJECT DESCRIPTION

The Five-year Consolidated Plan identifies priority community development needs for Carson City (see table on page 13). The need for your proposed project will be determined by identifying how the project impacts upon the adopted Consolidated Plan Priority Needs. Greater consideration will be given to projects that provide a clear description of the project with supporting data and methodology of how the project will meet these needs.

1. Describe the proposed project, including how the project will address the National Objective indicated and whether the project is new, ongoing, or expanded from previous years. **(please use allotted space)**

The project will enhance accessibility through ADA-compliant sidewalk improvements and address maintenance and deterioration. Improvements are located within a low to moderate income neighborhood with non-compliant ADA sidewalks, the overall neighborhood is 53% low to moderate income. This project will improve pedestrian safety and accessibility through the corridor and to essential goods and services.

2. If the proposed project already exists, please describe your success rates in providing services to low- to moderate-income persons:

Public Works has demonstrated success through the construction of other sidewalk improvement projects. This grant would promote future improvements to the corridor.

3. Describe who will benefit from the proposed project.

Beneficiaries of the project include low to moderate income residents of the neighborhood, business owners, and users of the corridor across all demographic groups.

4. If your project is designed to serve a specific or limited clientele, please indicate the population you will be serving with your project/program:

\_\_\_\_\_ Abused Children      \_\_\_\_\_ Illiterate Persons      \_\_\_\_\_ Homeless Persons  
\_\_\_\_\_ Battered Spouses      \_\_\_\_\_ Severely Disabled Adults      \_\_\_\_\_ Migrant Farm Workers  
\_\_\_\_\_ Elderly      \_\_\_\_\_ Other (Please explain)

5. If your project will not be serving a limited clientele, explain how you will document client income and how you will document that at least 51% of your clientele will be low-to-moderate income:

The project benefits a low to moderate income population on an area-wide basis. Additionally, the project improves access to low to moderate income housing and to a non-profit entity that benefits low to moderate income persons (FISH).

6. How will the funds be used on this project?

The funds will be used for the design, construction, and management of the proposed project.

7. Can your organization reduce the need for grant funding in the future and become self-sustaining? Explain.

The maintenance needs of the City's roadways and sidewalk infrastructure far exceeds the available budget to address all of the necessary improvements.

8. Can you still proceed with your project if you are awarded partial funding? Please provide a detailed explanation.

Any reduction in funding request would cause the project to be scaled down. However, grants such as these allow the City to make greater progress in improving infrastructure.

9. Are there other organizations that provide the same service as your organization? If so, how do you coordinate your services?

No.

10. What is the geographic target area that will be served by this project?

- Target Area (specify geographic area) Census Block Group 1-3, Tract 5.02  
 Community-wide



**For Public Improvement (construction) Projects ONLY:**

1. Is the proposed project part of a larger project or is it a stand-alone project? (If part of a larger project, please describe the entire project.)

This is a stand-alone project. However, significant transportation projects require infrastructure to be brought into compliance with ADA standards. The associated ADA improvements will support future improvements to this corridor. Additionally, the project addresses a priority intersection in the City's Transportation ADA Transition Plan.

2. Can this project be done in different phases?  Yes  No  
If YES, explain.

The proposed project could be done in different phases, although it is not ideal

3. Have CDBG funds been used for an earlier phase?  Yes  No

4. Who currently holds title to the property involved?

Carson City

5. With whom will title be vested upon completion?

Carson City

6. Do any rights-of-way, easements or other access rights need to be acquired?

Yes  No  N/A

7. If the project requires water rights or well permits, have they been acquired?

Yes  No  N/A

**For CDBG Economic Development projects ONLY:**

1. Identify the proposed employers that will be assisted with this project; (b) describe how they will comply with the requirement that at least 51% of the permanent full-time jobs created are either held by or made available to LMI persons; and (c) explain how they will document the jobs created and the income levels of the persons hired.

**For CDBG Housing Projects please indicate:**

The number of homes to be rehabilitated: \_\_\_\_\_

The number of persons to be benefited: \_\_\_\_\_

## PROJECT MEASUREMENT

Carson City has implemented a Performance and Outcome Measurement System into the application and grant/project administration process. When completing this section, keep in mind that **outputs** are specific descriptions of what your project is intended to accomplish (such as serve a total of 20 clients) and **outcomes** are the benefits or changes that result from the program (such as how well the service met the client needs).

1. What are the projected **outputs**, or total number of people served, from this project?

The improvements will improve ADA compliance and enhance the corridor's accessibility to businesses that provide essential goods and services. 1,640 low to moderate income residents will be served by this project. However, this is a commercial area that serves the entire City.

2. Of the total number of people in Question 1, how many of these are low-to-moderate income (LMI)? How many are Carson City residents?

Out of the total residents in the area, 1,640 are low to moderate income. All of which are Carson City residents.

3. What is the projected **outcome** of this project? (How will the outputs benefit the total number of people in Question 1?)

The result of this project will be improved sidewalk and intersection infrastructure. Improved connectivity will allow for residents to access essential goods and services such as Grocery Outlet and FISH.

4. How do you plan to track clients served?

Staff will track pedestrian use through a Complete Streets Monitoring Program. Pedestrian counters will be used to track current and future pedestrian levels.

**PROJECT BUDGET**

Complete the Budget Summary chart below. This information is mandatory in order to be considered for a CDBG Grant. Detailed calculations **must** be attached in support of the proposed budget. Other funding is not required but will increase your score. Amount must match "Other Funding" from page #1. **Also attach Profit and Loss Statement, General Ledger, and Balance Sheet. Attach copies of funding commitment letters or other evidence of funding support, if applicable.**

<b>Project Title:</b>	<b>Requested Amount</b>	<b>Other Funding</b>	<b>In-Kind</b>	<b>Total Funds</b>
<b>Project Expenses FY 2016-17</b>				
Project design, construction, and management	\$230,327			\$230,327
<b>TOTALS</b>	\$230,327			\$230,327

**AGENCY ASSETS**

<b>Unrestricted cash</b>	N/A
<b>Restricted cash*</b>	N/A
<b>Total cash on hand</b>	N/A

\*If restricted cash, attach description and amount of restriction

**Have you applied for or received any funds or in-kind contributions from Carson City? If so, please describe.**

## BUDGET JUSTIFICATION

Please list each project expense from the previous page and explain in more detail. Include calculations. Use additional pages if necessary.

PROJECT EXPENSE	AMOUNT BUDGETED	JUSTIFICATION OF EXPENSE
Please refer to Attachment C for a detailed cost estimate		

## PROJECT ADMINISTRATION

### AGENCY DIRECTOR

<b>Name:</b>	Darren Schulz
<b>Title:</b>	Public Works Director
<b>Address</b>	3505 Butti Way, Carson City, NV 89701
<b>Phone number:</b>	775-283-7391
<b>Email:</b>	dschulz@carson.org

### PROJECT MANAGER

<b>Name:</b>	Patrick Pittenger
<b>Title:</b>	Transportation Manager
<b>Address</b>	3505 Butti Way, Carson City, NV 89701
<b>Phone number:</b>	775-283-7396
<b>Email:</b>	ppittenger@carson.org

### FISCAL MANAGER

<b>Name:</b>	Dirk Goering
<b>Title:</b>	Senior Transportation Planner
<b>Address</b>	3505 Butti Way, Carson City, NV 89701
<b>Phone number:</b>	775-283-7431
<b>Email:</b>	dgoering@carson.org

### PERFORMANCE TRACKING CONTACT

<b>Name:</b>	Hailey Lang
<b>Title:</b>	Transportation Planner
<b>Address</b>	3505 Butti Way, Carson City, NV 89701
<b>Phone number:</b>	775-283-7387
<b>Email:</b>	hlang@carson.org

## AGENCY INFORMATION


Date of incorporation	N/A
Date of IRS certification	N/A
Tax exempt number	N/A
DUNS#: ( <a href="http://www.dnb.com/get-a-duns-number.html">http://www.dnb.com/get-a-duns-number.html</a> )	073787152

Attach items 1-6 to your application. Item 7 is optional. Please list and reference any additional attachments you are providing with your application. Do not include attachments unless they are needed to understand the project.

## INDEX OF ATTACHMENTS

Attachment Number	Attachment Description	Attachment Included (✓)
1	<b>IRS Tax Exempt 501(c)(3) letter (available to print from Secretary of State's website)</b>	N/A
2	<b>Proof of incorporation from Secretary of State (Certificate Only)</b> Go to <a href="https://www.nvsilverflume.gov/certificate">https://www.nvsilverflume.gov/certificate</a> You will need to register in order to get the certificate. Cost is \$50. <b>OR</b> Submit proof that your entity is active and in good standing. Go to <a href="http://nvsos.gov/sosentitysearch/">http://nvsos.gov/sosentitysearch/</a> and print your business entity information	N/A
3	<b>Current Organization Chart with names of staff members</b>	N/A
4	<b>Current Board of Directors and terms of office.</b> [If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CSSG funds.]	N/A
5	<b>501(c)(3) non-profits: Copy of the most recent Federal Tax Return. Attach FIRST 2 PAGES (Form 990 or 990EX)</b>	N/A
6	<b>Profit and Loss Statement, General Ledger, Balance Sheet</b>	N/A
7	<b>Funding commitment letters and/or letters of support (if applicable)</b>	N/A
A	<b>Map of Project Area</b>	X
B	<b>Photographs of Existing Roadway</b>	X
C	<b>Cost Estimate</b>	X
D	<b>Letter of Support</b>	X

Applicant certifies that to the best of his/her knowledge, all information submitted as part of this application is true. Applicant will comply with all grant and contract requirements if funding is approved.

 Signature of Authorized Official	1-12-17 Date
Patrick Pittenger, Transportation Manager Typed Name and Title of Authorized Official	775-283-7396 Phone Number

 Signature of President of Board of Directors	 Date
 Typed Name of President of Board of Directors	 Phone Number

**Table 2B: Priority Community Development Needs  
(This table is for your reference only. Do not fill out)**

Priority Need	Priority Need Level	Unmet Priority Need	Dollars to Address Need	5 Yr Goal Plan/Act	Annual Goal Plan/Act	Percent Goal Completed
Acquisition of Real Property	Medium					
Disposition	Low					
Clearance and Demolition	Low					
Clearance of Contaminated Sites	Low					
Code Enforcement	Low					
<b>Public Facility (General)</b>	<b>Measures by # of Projects/Facilities</b>					
Senior Centers	Medium					
Handicapped Centers	Medium					
Homeless Facilities	High	1		1		
Youth Centers	Medium					
Neighborhood Facilities	High	1		1		
Child Care Centers	Medium					
Health Facilities	Medium					
Mental Health Facilities	High					
Parks and/or Recreation Facilities	High	1		1		
Parking Facilities	Medium					
Tree Planting	Low					
Fire Stations/Equipment	Medium					
Abused/Neglected Children Facilities	High	1		1		
Asbestos Removal	Low					
Non-Residential Historic Preservation	Medium					
Other Public Facility Needs	Medium					
<b>Infrastructure (General)</b>	<b>Measured by # of Projects/Facilities</b>					
Water/Sewer Improvements	Medium					
Street Improvements	High					
Sidewalks	High	4		4		
Solid Waste Disposal Improvements	Medium					
Flood Drainage Improvements	Medium					
Other Infrastructure	Medium					
<b>Public Services (General)</b>	<b>Measured by # of Persons Served</b>					
Senior Services	Medium					
Handicapped Services	High			50		
Legal Services	Medium					
Youth Services	High			250		
Child Care Services	Medium					



Transportation Services	Medium					
Substance Abuse Services	High			300		
Employment/Training Services	Medium					
Health Services	Medium					
Lead Hazard Screening	Medium					
Crime Awareness	Medium					
Fair Housing Activities	High	1		50		
Tenant Landlord Counseling	Medium					
Other Services	Medium					
Economic Development (General)	Measured by Business Assisted and Jobs Created					
C/I Land Acquisition/Disposition	Medium					
C/I Infrastructure Development	Medium					
C/I Building Acq/Const/Rehab	Medium					
Other C/I	Medium					
ED Assistance to For-Profit	Low					
ED Technical Assistance	Medium					
Micro-enterprise Assistance	Low					
Other						
Transit Oriented Development	Medium					
Urban Agriculture	Medium					

Attachment A: Map of Project Area

# North Carson Street Improvements



Attachment B: Photographs of Existing Roadway



North Carson Street and Long Street



North Carson Street and Adams Street



North Carson Street and Park Street



North Carson Street and Corbett Street



North Carson Street and Rice Street

# Attachment C: Cost Estimate

Preliminary Statement of Probable Cost  
 N Carson Street Safety and ADA Improvements  
 John to Bath Street on East Side  
 December 27, 2016

Item	Description	Quantity	Unit	Price	Amount
1	Mob/demob	1	LS	\$15,000.00	\$15,000
2	Traffic Control	1	LS	\$18,000.00	\$18,000
3	SWPPP	1	LS	\$1,500.00	\$1,500
4	Demo	9,835	SF	\$2.50	\$24,588
5	Ped Ramp	1,476	SF	\$7.00	\$10,332
6	Depressed Curb	578	LF	\$27.00	\$15,606
7	AC Patch 4" on 12"	1,666	SF	\$7.00	\$11,662
8	Sidewalk	1,700	SF	\$5.00	\$8,500
9	Truncated Dome Plates	191	SF	\$75.00	\$14,325
10	Crosswalk Striping	620	SF	\$5.00	\$3,100
11	Full Curb/gutter	151	LF	\$27.00	\$4,077
12	Driveway	2,600	SF	\$10.00	\$26,000
13	Landscape Credit	1	LS	\$10,000.00	\$10,000
14	Replace Water Service	3	EA	\$2,500.00	\$7,500
15	A C Transition 4" on 12"	1,485	SF	\$7.50	\$11,138
	Subtotal				\$181,327
	Design				\$20,000
	Survey				\$4,000
	CM				\$20,000
	Testing				\$5,000
	Total				\$230,327

# Attachment D



PO Box 2402 Carson City, NV 89702  
Musclepowered.org

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January 7, 2017

Carson City Board of Supervisors  
201 North Carson St.  
Carson City, NV 89701

Dear Carson City Supervisors:

Muscle Powered is a local, grassroots advocacy organization established in Carson City in 1997 to help make Carson City a better community for biking and walking through advocacy, education, and promotion of bike-and-pedestrian-friendly infrastructure and development.

**On behalf of the Board of Directors and members of Muscle Powered, I am writing this letter to support Carson City's CDBG (Community Development Block Grant) Application to fund a project to improve sidewalks along North Carson St. from Bath St. to John St. by repairing or installing curb and gutter, and making curb ramps etc. compliant with the Americans with Disabilities Act.**

We think that with the completion of pedestrian and bicycle improvements along Carson Street in central Carson City, it is now a perfect time to upgrade pedestrian accessibility and safety on North Carson Street. There will be more pedestrians of all types – including the elderly, children, families, disabled people - using Carson Street with the completion of the downtown improvements.

This section of Carson Street has many businesses that should be more accessible to pedestrians. People with disabilities are especially challenged in negotiating this part of Carson Street, with its old and outmoded pedestrian infrastructure. We urge you to support this project to make North Carson Street safer and more accessible to pedestrians.

Sincerely,

Anne Macquarie  
Secretary

Muscle Powered: Citizens for a Walkable and Bikeable Carson City

## FRIENDS IN SERVICE HELPING



138 E. LONG STREET \* CARSON CITY \* NEVADA \* 89706 \* (775) 882-3474 \* [www.NVfish.com](http://www.NVfish.com)

To whom it may concern,

Friends In Service Helping (FISH), is wholly in support of repairing sidewalks on the East side of North Carson St. between Bath and John streets. FISH has made significant effort to enhance the look of our thrift store on Carson St. with the hope that others in the community will upgrade their facilities to reflect the revitalization of the down town area.

With our support, we are hopeful that as these sidewalks become ADA compliant, the city is able to add brick, paver accents, and/or concrete stamping/stain to help the North end of Carson St. tie into the newly remodeled downtown. If these accents create a cost overrun, FISH is also willing to help the city fundraise to cover these additional costs.

If approved by the CDBG committee and City Supervisors, this project will require the demolition of existing sidewalks, so it would be an opportune time to have the new walkways upgraded to reflect the "artistic design features" that were integrated in the down town area. Let us not make the mistake of trying to retrofit these sidewalks in the near future.

So, in addition to improving the safety for all, and assisting the disabled to receive services at our Carson City Complex, this project can expand and further encourage the North end of the city to make changes complementing the new walkways, and adding to the charm/theme of the remodeled downtown.

Please contact me with any questions and please look at the current condition of the walk ways in front of and alongside of our Carson Thrift store. They are deteriorated and the outdated ramps create dangerous travel for bicyclists and those using walkers/wheelchairs.

Thank you for your consideration.

Jim Peckham  
Executive Director  
FISH

Providing Food, Instruction, Shelter, and Healthcare to those in need

Also known as: Friends In Service Helping

138 E. Long St.

Carson City, NV 89706

[jim@nvfish.com](mailto:jim@nvfish.com)

775-882-3474 Ext # 101

[www.nvfish.com](http://www.nvfish.com)

### THE FISH MISSION:

To provide food, clothing, shelter and medical aid to the homeless and hungry within our community, with the objective to provide programs and referrals to families and individuals so they may become self sufficient.





**CARSON CITY, NEVADA**  
**CONSOLIDATED MUNICIPALITY AND STATE CAPITAL**

January 11, 2017

To Whom It May Concern:

Carson City Health and Human Services wishes to take this opportunity to express our support for Carson City Public Works Department's application to the Community Development Block Grant.

Carson City Health and Human Services' mission is to protect and improve the quality of life for our Community through disease prevention, education, and support services. The relationship between public health and infrastructure is well documented. The efforts proposed with this funding to improve the walkability of neighborhoods in Carson City, particularly improving sidewalks and along North Carson Street, fill an important public health and safety need and help to improve equity for active-transportation dependent populations in our community.

Carson City Health and Human Services, the first accredited Health Department in Nevada, is a Bronze-level Bicycle Friendly Business and a partner of Carson City Public Works, Muscle Powered, and the Carson City Sheriff in helping to improve the safety and accessibility of our streets for active transportation. The Health Department has a well-documented track record of prioritizing bicycle and pedestrian issues in Carson City, both through the Safe Routes to School Program and through the inclusion of bicycle and pedestrian safety and access as one of the 11 key issues in our Community Health Improvement Plan.

The North Carson Street corridor is a key location to make pedestrian safety improvements. The corridor sees heavy pedestrian traffic. Residents of several low-income housing units located in this area rely on walking and bicycling to access amenities and resources in the community.

Thank you for your consideration of Carson City Public Works' application.

Respectfully,

Handwritten signature of Nicola Aaker in cursive.

Nicola Aaker  
Director, Carson City Health and Human Services

**Carson City Health & Human Services**

900 East Long Street • Carson City, Nevada 89706 • (775) 887-2190 • Hearing Impaired-Use 711

Clinical Services (775) 887-2195 Fax: (775) 887-2192	Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248	Human Services (775) 887-2110 Fax: (775) 887-2539	Disease Control & Prevention (775) 887-2190 Fax: (775) 887-2248	Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248
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# Community Development Block Grant (CDBG) Program Application Fiscal Year 2017-2018

## GENERAL INFORMATION

**PLEASE READ ATTACHED INSTRUCTIONS ON PAGE NN FOR MORE INFORMATION.  
APPLICATIONS ARE DUE\*: NOVEMBER 1, 2017, 4:00 P.M.  
PLEASE SUBMIT THE ORIGINAL PLUS 2 COPIES TO:**

**Carson City Dept. of Finance  
201 N. Carson St., Ste. 3  
Carson City, NV 89701**

**\*The deadline established is firm. Any application received after the deadline will not be considered for funding. Applications must be unstapled. An electronic version of this document is available at [CARSON.ORG/CDBG](http://CARSON.ORG/CDBG).**

## APPLICANT INFORMATION

<b>Agency Name:</b> The Salvation Army	
<b>Agency Mailing Address:</b> 661 Colorado Street, Carson City, NV. 89701	
<b>Project Name:</b> Community Center Commercial Kitchen	
<b>Project Address/Location:</b> 661 Colorado Street, Carson City, NV. 89701	
<b>Agency Director:</b> Mark Cyr, Captain	
<b>Board Chairperson:</b> Gary Derks	
<b>Contact Person:</b> Christie Contreras	
<b>Phone Number:</b> 775-350-5190	<b>Email:</b> <a href="mailto:Christie.contreras@usw.salvationarmy.org">Christie.contreras@usw.salvationarmy.org</a>
<b>Fax:</b> 775-887-9120	<b>Website (if applicable):</b> <a href="http://www.carsoncitysalarmy.org">www.carsoncitysalarmy.org</a>
<b>How long has your organization been in existence?</b> 152 Years	<b>In Carson City?</b> 35 Years

## PROJECT FUNDING

<b>Requested amount:</b>	\$50,000.00
<b>Other funding:</b>	Undetermined/Various
<b>Total project cost:</b>	250,000.00

## PROJECT SUMMARY

Please provide a **brief** summary of the proposed project (not the organization), including what the project is, who will be served, how many will be served, and where will it take place. The description should be **no more than five sentences**.

**The project is to add a commercial kitchen to our new corps community center. This kitchen would serve a range of people, from the children in our youth programs to the homeless and/or underprivileged in our community, as well as the victims and responders of any disaster our Emergency Disaster Team responds to. Building this kitchen will allow us to serve meals to several thousand people/families in our community**

## FUNDING CATEGORY

<input checked="" type="checkbox"/> Public Improvements	<input checked="" type="checkbox"/> Public Services
<input type="checkbox"/> Economic Development	<input type="checkbox"/> Housing

## PROJECT ELIGIBILITY

A. This project meets at least ONE of the HUD national objectives listed below (please check all that apply)

1. Benefits low/moderate income individuals/households  
 2. Addresses the prevention or elimination of slums or blight  
 3. Meets a particularly urgent community development need

B. Check all statements that describe HOW this project meets one of the National Objectives above:

**L/M Area Benefit:** the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. **Examples:** street improvements, water/sewer lines, neighborhood facilities, façade improvements in neighborhood commercial districts.

**L/M Limited Clientele:** the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. **Examples:** construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

**L/M Housing:** the project adds or improves permanent residential structures that will be occupied by L.M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family structures. Rental units for L/M income persons must be occupied at affordable rents. Examples: acquisition of property for permanent housing, rehabilitation of permanent housing, conversion of non-residential structures into permanent housing.

**L/M Jobs:** the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. **Examples:** loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close with resultant loss of jobs, a majority of which are held by L/M persons.

**Microenterprise Assistance:** the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. (A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

**Slum or Blighted Area:** the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area.

\_\_\_\_\_ **Spot Blight:** the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to the extent necessary to eliminate conditions detrimental to public health and safety. **Examples:** historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

**C. Project Category (check one):**

- \_\_\_\_\_ Public Service (i.e., a new service or an **increase** in the level of service
- X** Public Facilities and Improvements (i.e., homeless shelter, water and sewer facilities, flood and drainage improvements, fire protection facilities/equipment, community centers, senior centers, health centers, parking, landscaping, streets, curbs, gutters and sidewalks, parks and playgrounds).
- \_\_\_\_\_ Acquisition of Real Property
- \_\_\_\_\_ Disposition of Real Property (sale, lease or donation)
- \_\_\_\_\_ Privately-Owned Utilities
- \_\_\_\_\_ Relocation Payments and Assistance to Displaced Persons
- \_\_\_\_\_ Removal of Architectural Barriers, Handicapped Accessibility
- \_\_\_\_\_ Housing Rehabilitation (weatherization)
- \_\_\_\_\_ Historic Preservation
- \_\_\_\_\_ Commercial or Industrial Rehabilitation, including façade improvements and correction of code violations
- \_\_\_\_\_ Special Economic Development or assistance to microenterprises

## PROJECT DESCRIPTION

The Five-year Consolidated Plan identifies priority community development needs for Carson City (see table on page 13). The need for your proposed project will be determined by identifying how the project impacts upon the adopted Consolidated Plan Priority Needs. Greater consideration will be given to projects that provide a clear description of the project with supporting data and methodology of how the project will meet these needs.

1. Describe the proposed project, including how the project will address the National Objective indicated and whether the project is new, ongoing, or expanded from previous years. **(please use allotted space)**

**The project is to add a commercial kitchen to our new corps community center.. The kitchen will be a vital part of all of our programs, and allow us to expand the number of people we serve to more than double the amount we serve now, and allow us to mass produce meals in an emergency to better serve the community. Currently all meals are prepared in our small mobile kitchen. The programs served will include our Emergency Disaster Services program which serves the victims and responders of any emergency or disaster that we respond to, our youth programs, adult programs, our community outreach program, which serve many of the homeless and impoverished in our community.**

2. If the proposed project already exists, please describe your success rates in providing services to low- to moderate-income persons:

**We are currently successfully serving in all of our programs, however, the need far exceeds our current ability in our current facility, making this project necessary to meet the current and future needs of the community.**

3. Describe who will benefit from the proposed project.

**The individuals that will benefit from this project will include the victims and responders served through our Emergency Disaster Services program at any emergency or disaster that we respond to, the children in our youth programs, the adults/seniors in our various adult programs and Life Recovery 12 step program, many of the homeless and impoverished in our community who are served through our community outreach program and various other programs at our corps.**

4. If your project is designed to serve a specific or limited clientele, please indicate the population you will be serving with your project/program:

\_\_\_\_\_ Abused Children      \_\_\_\_\_ Illiterate Persons      \_\_\_\_\_ Homeless Persons  
\_\_\_\_\_ Battered Spouses      \_\_\_\_\_ Severely Disabled Adults      \_\_\_\_\_ Migrant Farm Workers  
\_\_\_\_\_ Elderly      \_\_\_\_\_ Other (Please explain)

5. If your project will not be serving a limited clientele, explain how you will document client income and how you will document that at least 51% of your clientele will be low-to-moderate income:

**We have an application/registration process that each client/program participant served must complete prior to receiving services which includes income verification. All services provided are logged in Citrix, which is the computer program we use.**

6. How will the funds be used on this project?

**The funds will be used to add a commercial kitchen to the facility and purchase equipment; ovens, refrigeration, freezer, stove, hoods, etc.**

7. Can your organization reduce the need for grant funding in the future and become self-sustaining? Explain.

**Once the kitchen is built we will be able to fund the operating costs associated with the kitchen.**

8. Can you still proceed with your project if you are awarded partial funding? Please provide a detailed explanation.

**If granted partial funding we will still proceed with the project as it is one of the most vital parts of our facility to be able to operate our programs.**

9. Are there other organizations that provide the same service as your organization? If so, how do you coordinate your services?

**There are organizations that provide some of the same services. We give and receive referrals from, and collaborate with Carson City Health and Human Services, FISH, McKinney Vento, Northern Nevada Dream Center, St. Teresa's, Douglas County Health and Human Services, Ron Wood, Etc. If we have an individual/family that we cannot assist with one of our programs we will refer them to one of the other agencies. To qualify for some of our program we collaborate with McKinney Vento, for families with children, to ensure that the children are enrolled in school and receiving the available assistance from the McKinney Vento program. For adults who are capable of working (and are not) to qualify for some of our programs they must enroll in the Workforce program at Health and Human Services, etc.**

10. What is the geographic target area that will be served by this project?

Target Area (specify geographic area) \_\_\_\_\_

OR

Community-wide

**For Public Improvement (construction) Projects ONLY:**

1. Is the proposed project part of a larger project or is it a stand-alone project? (If part of a larger project, please describe the entire project.)

**We are currently conducting a Capital Campaign to obtain a larger facility. The new facility will allow us to more than double our current services. The most vital addition to this new facility, an addition that is necessary in order for us to be able to expand our services is the addition of this commercial kitchen.**

2. Can this project be done in different phases? \_\_\_\_\_ Yes \_\_\_X\_\_\_ No

If YES, explain.

3. Have CDBG funds been used for an earlier phase? \_\_\_\_\_ Yes \_\_\_X\_\_\_ No

4. Who currently holds title to the property involved?

The Salvation Army

5. With whom will title be vested upon completion?

The Salvation Army

6. Do any rights-of-way, easements or other access rights need to be acquired?

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_X\_\_\_ N/A

7. If the project requires water rights or well permits, have they been acquired?

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_X\_\_\_ N/A

**For CDBG Economic Development projects ONLY:**

1. Identify the proposed employers that will be assisted with this project; (b) describe how they will comply with the requirement that at least 51% of the permanent full-time jobs created are either held by or made available to LMI persons; and (c) explain how they will document the jobs created and the income levels of the persons hired.

N/A

**For CDBG Housing Projects please indicate:**

The number of homes to be rehabilitated: \_\_\_\_\_

The number of persons to be benefited: \_\_\_\_\_

**PROJECT MEASUREMENT**

Carson City has implemented a Performance and Outcome Measurement System into the application and grant/project administration process. When completing this section, keep in mind that **outputs** are specific descriptions of what your project is intended to accomplish (such as serve a total of 20 clients) and **outcomes** are the benefits or changes that result from the program (such as how well the service met the client needs).

1. What are the projected **outputs**, or total number of people served, from this project?

We currently serve over 20,000 people per year and expect this project double our services.

2. Of the total number of people in Question 1, how many of these are low-to-moderate income (LMI)? How many are Carson City residents?

**With the exception of our Emergency Disaster Services program, which serves wherever an emergency or disaster occurs, and a few children in our Summer Day Camp program, all of the clients served will be Carson City residents.**

3. What is the projected **outcome** of this project? (How will the outputs benefit the total number of people in Question 1?)

**The outcome of this project, and the benefit to the community, will be the significant increase in how many children, families, seniors, and homeless we will be able to feed throughout the year, and our ability to better respond to emergencies and provide meals to those individuals.**

4. How do you plan to track clients served?

**We have an application/registration process that each client served must complete and use a computer program, Citrix, to log all client services. We log all meals served, youth programs, adult programs, community outreach, emergency disaster services, etc.**



**PROJECT BUDGET**

Complete the Budget Summary chart below. This information is mandatory in order to be considered for a CDBG Grant. Detailed calculations **must** be attached in support of the proposed budget. Other funding is not required but will increase your score. Amount must match "Other Funding" from page #1. **Also attach Profit and Loss Statement, General Ledger, and Balance Sheet. Attach copies of funding commitment letters or other evidence of funding support, if applicable.**

<b>Project Title: Commercial Kitchen</b>	<b>Requested Amount</b>	<b>Other Funding</b>	<b>In-Kind</b>	<b>Total Funds</b>
<b>Project Expenses FY 2016-17</b>				
\$250,000.00	50,000.00			
<b>TOTALS</b>	50,000.00			

**AGENCY ASSETS**

<b>Unrestricted cash</b>	
--------------------------	--

<b>Restricted cash*</b>	
<b>Total cash on hand</b>	

**\*If restricted cash, attach description and amount of restriction**

**Have you applied for or received any funds or in-kind contributions from Carson City? If so, please describe.**

**We applied for the FY 2016-2017 Community Support Services Grant and were awarded \$10,500.00 of the \$28,000.00 requested for housing & lodging assistance.**

## BUDGET JUSTIFICATION

Please list each project expense from the previous page and explain in more detail. Include calculations. Use additional pages if necessary.

PROJECT EXPENSE	AMOUNT BUDGETED	JUSTIFICATION OF EXPENSE
Build kitchen and purchase/install equipment. Stove, ovens, hood, refrigeration, freezer, etc.	\$250,000.00	This is a vital part of our facility and programs, and is necessary for us to operate/expand our current and future programs.

**PROJECT ADMINISTRATION****AGENCY DIRECTOR**

<b>Name:</b>	<b>Mark Cyr, Captain</b>
<b>Title:</b>	<b>Corps Officer</b>
<b>Address</b>	<b>661 Colorado Street, Carson City, NV. 89701</b>
<b>Phone number:</b>	<b>775-887-9120</b>
<b>Email:</b>	<b><u>Mark.cyr@usw.salvationarmy.org</u></b>

**PROJECT MANAGER**

<b>Name:</b>	<b>Mark Cyr, Captain</b>
<b>Title:</b>	<b>Corps Officer</b>
<b>Address</b>	<b>661 Colorado Street, Carson City, NV. 89701</b>
<b>Phone number:</b>	<b>775-887-9120</b>
<b>Email:</b>	<b><u>Mark.cyr@usw.salvationarmy.org</u></b>

**FISCAL MANAGER**

<b>Name:</b>	<b>Christie Contreras</b>
<b>Title:</b>	<b>Office Coordinator</b>
<b>Address</b>	<b>661 Colorado Street, Carson City, NV. 89701</b>
<b>Phone number:</b>	<b>775-887-9120</b>
<b>Email:</b>	<b><u>christie.contreras@usw.salvationarmy.org</u></b>

**PERFORMANCE TRACKING CONTACT**

<b>Name:</b>	<b>Christie Contreras</b>
<b>Title:</b>	<b>Office Coordinator</b>
<b>Address</b>	<b>661 Colorado Street, Carson City, NV. 89701</b>
<b>Phone number:</b>	<b>775-887-9120</b>
<b>Email:</b>	<b><u>christie.contreras@usw.salvationarmy.org</u></b>

## AGENCY INFORMATION

Date of incorporation	October 19, 1914
Date of IRS certification	October 19, 1914
Tax exempt number	94-1156347
DUNS#: ( <a href="http://www.dnb.com/get-a-duns-number.html">http://www.dnb.com/get-a-duns-number.html</a> )	074629460

Attach items 1-6 to your application. Item 7 is optional. Please list and reference any additional attachments you are providing with your application. Do not include attachments unless they are needed to understand the project.

## INDEX OF ATTACHMENTS

Attachment Number	Attachment Description	Attachment Included (✓)
1	<b>IRS Tax Exempt 501(c)(3) letter (available to print from Secretary of State's website)</b>	<del>✓</del>
2	<b>Proof of incorporation from Secretary of State (Certificate Only)</b> Go to <a href="https://www.nvsilverflume.gov/certificate">https://www.nvsilverflume.gov/certificate</a> You will need to register in order to get the certificate. Cost is \$50. <b>OR</b> Submit proof that your entity is active and in good standing. Go to <a href="http://nvsos.gov/sosentitysearch/">http://nvsos.gov/sosentitysearch/</a> and print your business entity information	<del>✓</del>
3	<b>Current Organization Chart with names of staff members</b>	<del>✓</del>
4	<b>Current Board of Directors and terms of office.</b> [If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CSSG funds.]	<del>✓</del>
5	<b>501(c)(3) non-profits: Copy of the most recent Federal Tax Return. Attach FIRST 2 PAGES (Form 990 or 990EX)</b>	<del>✓</del>
6	<b>Profit and Loss Statement, General Ledger, Balance Sheet</b>	<del>✓</del>
7	<b>Funding commitment letters and/or letters of support (if applicable)</b>	N/A

Applicant certifies that to the best of his/her knowledge, all information submitted as part of this application is true. Applicant will comply with all grant and contract requirements if funding is approved.

 Signature of Authorized Official	10/20/17 Date
Ivan Wild - Del Oro Divisional Commander Typed Name and Title of Authorized Official	 Phone Number
 Signature of <del>President of Board of Directors</del>	10/20/17 Date
Guy Hawk - Del Oro Divisional Secretary Typed Name of <del>President of Board of Directors</del>	 Phone Number

**Table 2B: Priority Community Development Needs**  
**(This table is for your reference only. Do not fill out)**

Priority Need	Priority Need Level	Unmet Priority Need	Dollars to Address Need	5 Yr Goal Plan/Act	Annual Goal Plan/Act	Percent Goal Completed
Acquisition of Real Property	Medium					
Disposition	Low					
Clearance and Demolition	Low					
Clearance of Contaminated Sites	Low					
Code Enforcement	Low					
<b>Public Facility (General)</b>	<b>Measures by # of Projects/Facilities</b>					
Senior Centers	Medium					
Handicapped Centers	Medium					
Homeless Facilities	High	1		1		
Youth Centers	Medium					
Neighborhood Facilities	High	1		1		
Child Care Centers	Medium					
Health Facilities	Medium					
Mental Health Facilities	High					
Parks and/or Recreation Facilities	High	1		1		
Parking Facilities	Medium					
Tree Planting	Low					
Fire Stations/Equipment	Medium					
Abused/Neglected Children Facilities	High	1		1		
Asbestos Removal	Low					
Non-Residential Historic Preservation	Medium					
Other Public Facility Needs	Medium					
<b>Infrastructure: (General)</b>	<b>Measured by # of Projects/Facilities</b>					
Water/Sewer Improvements	Medium					
Street Improvements	High					
Sidewalks	High	4		4		
Solid Waste Disposal Improvements	Medium					
Flood Drainage Improvements	Medium					
Other Infrastructure	Medium					
<b>Public Services (General)</b>	<b>Measured by # of Persons Served</b>					
Senior Services	Medium					
Handicapped Services	High			50		
Legal Services	Medium					
Youth Services	High			250		
Child Care Services	Medium					

Transportation Services	Medium					
Substance Abuse Services	High			300		
Employment/Training Services	Medium					
Health Services	Medium					
Lead Hazard Screening	Medium					
Crime Awareness	Medium					
Fair Housing Activities	High	1		50		
Tenant Landlord Counseling	Medium					
Other Services	Medium					
Economic Development (General)	Measured by Business Assisted and Jobs Created					
C/I Land Acquisition/Disposition	Medium					
C/I Infrastructure Development	Medium					
C/I Building Acq/Const/Rehab	Medium					
Other C/I	Medium					
ED Assistance to For-Profit	Low					
ED Technical Assistance	Medium					
Micro-enterprise Assistance	Low					
Other						
Transit Oriented Development	Medium					
Urban Agriculture	Medium					





BRIAN SANDOVAL  
Governor

ROBERT R. BARENGO  
Chair, Nevada Tax Commission

CHRISTOPHER G. NIELSEN  
Executive Director

STATE OF NEVADA  
DEPARTMENT OF TAXATION

Web Site: <http://tax.state.nv.us>

1550 College Parkway, Suite 115  
Carson City, Nevada 89706-7937  
Phone: (775) 684-2000 Fax: (775) 684-2020

LAS VEGAS OFFICE  
Grant Sawyer Office Building, Suite 1300  
555 E. Washington Avenue  
Las Vegas, Nevada, 89101  
Phone: (702) 486-2300 Fax: (702) 486-2373

RENO OFFICE  
4600 Kietzke Lane  
Building L, Suite 235  
Reno, Nevada 89502  
Phone: (775) 687-9999  
Fax: (775) 6881303

HENDERSON OFFICE  
2550 Paseo Verde Parkway Suite 180  
Henderson, Nevada 89074  
Phone: (702) 486-2300  
Fax: (702) 486-3377

December 31, 2013

Account Number: RCE-012-310

Exp date: December 31, 2018

**THE SALVATION ARMY- CARSON CITY**  
**661 COLORADO ST**  
**CARSON CITY NV 89701**

Pursuant to NRS 372.3261 and related statutes, THE SALVATION ARMY- CARSON CITY has been granted sales/use tax exempt status as a charitable organization. Direct purchases or sales of tangible personal property made by or to THE SALVATION ARMY- CARSON CITY are exempt from sales/use tax. Fraudulent use of this exemption letter is a violation of Nevada law.

Vendors selling tangible personal property to THE SALVATION ARMY- CARSON CITY are authorized to sell to them tax exempt. The vendor shall account for the exempt sale on its sales/use tax return under exemptions. For audit purposes, a vendor must have a copy of this letter in order to document the transaction was tax exempt.

This letter only applies to Nevada sales/use tax and does not provide exemption from any other tax.

This exemption applies only to the above named organization and is not extended to individuals, or contractors or lessors to or for such organizations.

Any vendor having questions concerning the use of this sales/use tax exemption letter may contact the Department at one of the district offices listed above.

If, upon further or future review by the Department, it is determined the above named organization does not meet or no longer meets the criteria outlined in NRS 372.348, this letter of exemption will be revoked.

Sincerely,

A handwritten signature in cursive script that reads "Kathleen Williams".

Kathleen Williams  
Tax Program Supervisor II

**THE SALVATION ARMY**  
(a California corporation)

**BOARD OF DIRECTORS**

**DAVID JEFFREY**  
**CHAIRMAN OF THE BOARD**  
**615 SLATERS LANE**  
**ALEXANDRIA, VA 22313**

**KENNETH G. HODDER**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**DOUGLAS RILEY**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**DOUGLAS TOLLERUD**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**STEPHEN C. SMITH**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**LEE LESCANO**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**JOLENE K. HODDER**  
**180 E OCEAN BLVD**  
**LONG BEACH, CA 90802**

**THE SALVATION ARMY  
A CALIFORNIA CORPORATION  
LONG BEACH, CALIFORNIA**

**RESOLUTION  
DELEGATING AUTHORITY  
TO EXECUTE CONTRACTS ON BEHALF OF  
THE SALVATION ARMY**

At a meeting of the Board of Directors of The Salvation Army, a religious corporation organized and existing under and by the virtue of the laws of the State of California, the following resolution was adopted:

**WHEREAS:** The Salvation Army is a nonprofit corporation; and

**WHEREAS:** The Salvation Army is the principal legal instrumentality of the Western Territory, organized for the purpose of holding title to properties, entering into contracts, and otherwise acting as the Territory's legal agency; and

**WHEREAS:** Pursuant to the Territory's Bylaws, Section 2.04, F., and to further expedite the business affairs of the Territory, the Board of Directors may delegate authority to any officer or agent of the Territory to execute documents with legal effect on behalf of the Territory; and

**WHEREAS:** The Board of Directors seeks to optimize paperwork-processing timelines, reduce costs associated with transmission of paperwork between Territorial Headquarters and Command Heads, and improve the overall efficiency of The Salvation Army's business processes, while still maintaining appropriate safeguards limiting authority to bind the corporation by keeping it consolidated within select offices and subjecting it to previously established approval procedures;

**NOW, THEREFORE, BE IT RESOLVED:** The Board of Directors authorizes the individuals holding the following command-head leadership positions ("Authorized Signatories") to execute documents on behalf of The Salvation Army, subject to the restrictions stated in this resolution:

- Del Oro Division: Divisional Commander and Divisional Secretary.

Said Authorized Signatories may sign all contracts-, finance-, property-, and business-related documents on behalf of the Western Territory to the same extent permitted of members of the Board of Directors and corporate officers under (a) the articles of incorporation and the corporate bylaws of The Salvation Army, (b) the current Board-approved minutes (formerly referred to as the *policies and procedures*) of The Salvation Army, and (c) any currently effective resolutions delegating additional authority to Board members and corporate officers; provided, however, that (i) the decision-making entity or body with authority to approve signature of a document to be executed under this resolution has done so in writing and in compliance with the current *Minutes* manual (formerly referred to as the *Policies and Procedures* manual) or currently effective resolutions, (ii) the counter-party to any transaction or the entity requesting signature by The Salvation Army does not require a member of the Board of Directors or other corporate officer to execute the associated documents, and (iii) under any applicable laws, regulations, or other government requirements, the documents to be signed do not in any way require signature by a Board member or corporate officer, or prohibit signature by individuals who are not Board members or corporate officers. As an example of point (i) in the prior sentence, if the current Board-approved minutes require that the Board of Directors approve a contract following Legal Department review and

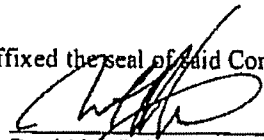
Command Finance Council recommendation, then each of those steps must occur before an Authorized Signatory may execute the associated documents.

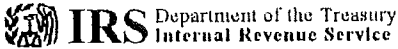
This resolution does not diminish currently effective signature authority previously granted, and it does not grant authority to execute documents in any way not permitted under the laws of any state where the Western Territory operates.

#### CERTIFICATION

I, David E. Hudson, Vice President of The Salvation Army, do hereby certify that the above and foregoing is a true and correct copy of a resolution passed by the Board of Directors of The Salvation Army at a meeting of said Board of Directors at which a quorum was present, duly called and held on the 26th day of February, 2015.

IN WITNESS WHEREOF: I have hereunto set my hand and affixed the seal of said Corporation on this 27 day of FEBRUARY 2015.

  
\_\_\_\_\_  
David E. Hudson, Vice President



Department of the Treasury  
Internal Revenue Service

P.O. Box 2508, Room 4010  
Cincinnati OH 45201

In reply refer to: 4055256534  
Feb. 03, 2017 LTR 4168C 0  
94-1156347 000000 00  
00026127  
BODC: TE

THE SALVATION ARMY  
TERRITORIAL HEADQUARTERS  
% TERRY O HUGHES  
180 E OCEAN BLVD 9TH FL  
LONG BEACH CA 90802-4748



024180

Employer ID Number: 94-1156347  
Form 990 required: No

Dear Taxpayer:

This is in response to your request dated Jan. 04, 2017, regarding your tax-exempt status.

We issued you a determination letter in June 2011, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(i).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

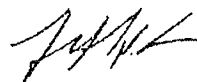
For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

4055256534  
Feb. 03, 2017 LTR 4168C 0  
94-1156347 000000 00  
00026128

THE SALVATION ARMY  
TERRITORIAL HEADQUARTERS  
% TERRY O HUGHES  
180 E OCEAN BLVD 9TH FL  
LONG BEACH CA 90802-4748

Sincerely yours,



Jeffrey I. Cooper  
Director, EO Rulings & Agreement

# The Salvation Army Serving Carson City & Douglas County



Steve White  
Youth Assistant

Marsha Richmond  
Custodian

Austin Sims  
Family Service Assistant

Program Assistant

Christie Contreras  
Office Coordinator  
Kettle Coordinator

Susan Sisk  
Family Service



Over 3000  
hours in  
volunteer  
work each  
year.



Mark Cyr  
Captain



Leslie Cyr  
Captain



## Mission Statement

The Salvation Army, an international movement, is an evangelical part of the universal Christian Church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination.

## Advisory Board

Steve Thaler, Diane Heet, Karen Beckerbauer, Mary Jane Ostrander, Valerie Dockery, Vi Bibee, Court Cardinal, Michael Kubrich Tom Conlin, Tom Britanik, Gary Derks

661 Colorado Street  
Carson City, NV. 89701

# THE SALVATION ARMY

Business Entity Information			
Status:	Active	File Date:	12/17/1947
Type:	Foreign Non-Profit Corporation	Entity Number:	C640-1947
Qualifying State:	CA	List of Officers Due:	12/31/2017
Managed By:		Expiration Date:	
NV Business ID:	NV19471000218	Business License Exp:	Exempt - 002

Registered Agent Information			
Name:	COGENCY GLOBAL INC.	Address 1:	321 W. WINNIE LANE #104
Address 2:		City:	CARSON CITY
State:	NV	Zip Code:	89703
Phone:		Fax:	
Mailing Address 1:		Mailing Address 2:	
Mailing City:		Mailing State:	NV
Mailing Zip Code:			
Agent Type:	Commercial Registered Agent - Corporation		
Jurisdiction:	NEVADA	Status:	Active

Financial Information			
No Par Share Count:	0	Capital Amount:	\$ 0
No stock records found for this company			

<input checked="" type="checkbox"/> Officers <span style="float: right;"><input type="checkbox"/> Include Inactive Officers</span>	
<b>Treasurer - VICTOR R DOUGHTY</b>	
Address 1:	180 E OCEAN BLVD
Address 2:	
City:	LONG BEACH
State:	CA
Zip Code:	90802
Country:	
Status:	Active
Email:	
<b>Secretary - TERRY O HUGHES</b>	
Address 1:	180 E OCEAN BLVD
Address 2:	
City:	LONG BEACH
State:	CA
Zip Code:	90802
Country:	
Status:	Active
Email:	
<b>President - JAMES M KNAGGS</b>	
Address 1:	180 E OCEAN BLVD
Address 2:	
City:	LONG BEACH
State:	CA
Zip Code:	90802
Country:	
Status:	Active
Email:	
<b>Director - DOUGLAS RILEY</b>	



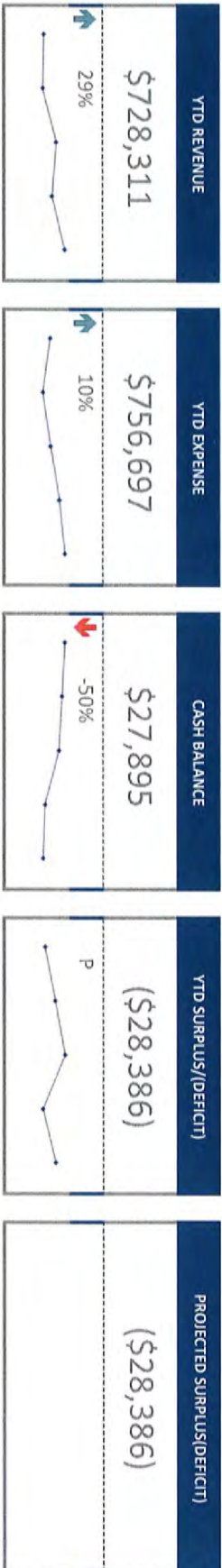
<b>Action Type:</b>	Registered Agent Address Change		
<b>Document Number:</b>	C640-1947-009	<b># of Pages:</b>	299
<b>File Date:</b>	10/29/1999	<b>Effective Date:</b>	
CORPORATION TRUST COMPANY OF NEVAD KFA			
ONE EAST FIRST STREET RENO NV 89501 KFA			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-013	<b># of Pages:</b>	2
<b>File Date:</b>	12/13/1999	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-016	<b># of Pages:</b>	1
<b>File Date:</b>	11/30/2000	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-015	<b># of Pages:</b>	2
<b>File Date:</b>	1/8/2001	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-012	<b># of Pages:</b>	2
<b>File Date:</b>	12/31/2001	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Amendment		
<b>Document Number:</b>	C640-1947-010	<b># of Pages:</b>	4
<b>File Date:</b>	5/30/2002	<b>Effective Date:</b>	
CERTIFIED COPY OF CERTIFICATE OF AMENDMENT FILED AMENDING ARTICLE SECOND.			
(4) PGS. DEG			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-011	<b># of Pages:</b>	2
<b>File Date:</b>	12/13/2002	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-014	<b># of Pages:</b>	2
<b>File Date:</b>	12/30/2003	<b>Effective Date:</b>	
(No notes for this action)			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	C640-1947-002	<b># of Pages:</b>	2
<b>File Date:</b>	11/9/2004	<b>Effective Date:</b>	
List of Officers for 2004 to 2005			
<b>Action Type:</b>	Registered Agent Change		
<b>Document Number:</b>	20050036437-40	<b># of Pages:</b>	1
<b>File Date:</b>	2/7/2005	<b>Effective Date:</b>	
(No notes for this action)			

<b>File Date:</b>	12/18/2014	<b>Effective Date:</b>	
<b>(No notes for this action)</b>			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	20150546190-83	<b># of Pages:</b>	1
<b>File Date:</b>	12/15/2015	<b>Effective Date:</b>	
<b>15-16</b>			
<b>Action Type:</b>	Charitable-Solicitation Registration Exemption		
<b>Document Number:</b>	20150546192-05	<b># of Pages:</b>	1
<b>File Date:</b>	12/15/2015	<b>Effective Date:</b>	
<b>CHARI_x</b>			
<b>Action Type:</b>	Annual List		
<b>Document Number:</b>	20160535018-81	<b># of Pages:</b>	1
<b>File Date:</b>	12/8/2016	<b>Effective Date:</b>	
<b>16-17</b>			
<b>Action Type:</b>	Charitable-Solicitation Registration Exemption		
<b>Document Number:</b>	20160535019-92	<b># of Pages:</b>	1
<b>File Date:</b>	12/8/2016	<b>Effective Date:</b>	
<b>(No notes for this action)</b>			

# FINANCIAL DASHBOARD

Carson City Corps

Sept 2017



Metric	Report Year (2017)	Previous Year (2016)	% Change	5 Year Trend
REVENUES	\$106,010.29	\$31,378.93	↑ 238%	
EXPENSES	\$77,901.98	\$54,102.21	↑ 44%	
OPERATING SURPLUS/(DEFICIT)	\$28,108.31	-\$22,723.28	↑ P	
GIK	\$74,920.00	\$90,120.68	↓ -17%	
ACCUM. SURPLUS/(DEFICIT)	\$0.00	\$28,386.07	N	
CASH BALANCE	\$27,895.45	\$55,519.39	↓ -50%	
WORKING CAPITAL RATIO	<b>0.84</b>	<b>1.59</b>	↓ -47%	
YTD REVENUE	\$728,310.74	\$562,739.16	↑ 29%	
YTD EXPENSE	\$756,696.81	\$688,146.91	↑ 10%	
YTD SURPLUS/(DEFICIT)	-\$28,386.07	-\$125,407.75	↓ -77%	
ACCOUNTS PAYABLE	\$33,562.57	\$26,294.11	↑ 28%	
ACCOUNTS RECEIVABLE	\$0.00	\$0.00		
PROJECTED SURPLUS(DEFICIT)	-\$28,386.07	\$0.00		

*The Salvation Army Western Territory Del Oro Division*  
**Balance Sheet Carson City Corps**

	Fiscal Year 2017		
	July 2017	August 2017	September 2017
<b>ASSETS</b>			
Cash	(48,347)	(14,817)	27,895
Other Assets	0	0	2,806
Equipment, Net of Depreciation	6,167	6,000	5,833
<b>TOTAL ASSETS</b>	<b>(42,180)</b>	<b>(8,818)</b>	<b>36,535</b>
<b>LIABILITIES</b>			
Accounts Payable Non SA	22,943	17,099	33,563
Other Current Liabilities	2,192	2,192	2,972
<b>Total Liabilities</b>	<b>25,135</b>	<b>19,291</b>	<b>36,535</b>
<b>NET ASSETS</b>			
Prior Year Surplus/Deficit	30,553	30,553	30,553
Current Operating Surplus/Deficit	(95,701)	(56,494)	(28,386)
<b>Total Operating</b>	<b>(65,149)</b>	<b>(25,942)</b>	<b>2,167</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>(40,014)</b>	<b>(6,651)</b>	<b>38,702</b>
<b>CURRENT RATIO</b>			
Current Assets	(48,347)	(14,817)	30,702
Current Liabilities	25,135	19,291	36,535
<b>WORKING CAPITAL</b>	<b>-1.92</b>	<b>-0.77</b>	<b>0.84</b>

*The Salvation Army Western Territory Del Oro*  
**Carson City Corps**  
**Statement of Activities**  
**September 30, 2017**

CURRENT MONTH					YEAR TO DATE				
Actual Last Year 2016	Actual This Year 2017	Budget This Year 2017	Fav/(Unfav) Budget Variance		Actual Last Year 2016	Actual This Year 2017	Budget This Year 2017	Fav/(Unfav) Budget Variance	
16,797	27,404	6,719	20,684	4100 Contributions	418,410	455,074	434,621	20,453	
1,092	958	709	249	4003/4 Meeting Collections	12,107	15,067	10,822	4,245	
163	0	0	0	4X05 World Service Contributions	400	440	238	202	
0	0	0	0	4121/4200 Special Fund Raising Events	2,647	400	2,697	(2,297)	
90,121	74,920	75,854	(934)	405X Gifts-In-Kind	1,017,987	981,324	1,030,733	(48,409)	
731	17,988	6,250	11,738	4600 Associated Organizations	9,373	66,616	75,000	(8,384)	
458	633	455	178	4692 Endowments Distributions	16,612	26,141	16,604	9,537	
4,476	0	0	0	4693 Capital Reserves Distributions	26,328	51,801	21,852	29,949	
0	50,000	0	50,000	4696 Field Support Fund Distributions	0	50,000	0	50,000	
6,449	7,645	0	7,645	5000 Fees & Grants - Government Agencies	32,000	23,540	18,967	4,573	
1,213	1,383	2,353	(971)	6200 Program Service Fees	44,862	39,806	43,622	(3,816)	
0	0	0	0	6600 Gains/Losses On Investments	0	(574)	0	(574)	
121,500	180,930	92,341	88,590	TOTAL INCOME	1,580,726	1,709,635	1,655,155	54,480	

EXPENSE					EXPENSE				
20,732	30,927	18,759	(12,168)	7000 Salaries & Allowances	221,598	301,621	258,876	(42,745)	
8,510	6,295	2,273	(4,022)	7100 Officer & Employee Benefits	89,306	38,882	29,841	(9,041)	
2,200	2,409	918	(1,492)	7200 Employment Taxes	26,520	21,323	15,904	(5,420)	
1,238	16,308	4,196	(12,112)	8000 Professional Fees	26,966	99,133	38,816	(60,316)	
5,210	2,584	1,679	(905)	8100 Supplies	62,655	38,499	47,440	8,941	
887	653	788	135	8200 Telecommunications	9,993	10,102	9,747	(355)	
1,044	(1,316)	1,497	2,813	8300 Postage & Shipping	9,738	6,513	9,899	3,385	
3,077	2,229	2,674	445	8400 Occupancy	42,357	45,613	36,233	(9,380)	
427	308	2,375	2,067	8500 Equipment/Furnishings	15,725	6,084	8,296	2,212	
910	8,651	2,969	(5,683)	8600 Printed Materials	28,917	42,961	30,150	(12,811)	
2,347	2,921	5,240	2,319	8700 Transportation/Meals	40,363	41,415	43,875	2,460	
2,167	98	466	368	8800 Conf/Council/Special Meetings	27,189	24,779	18,092	(6,687)	
1,849	1,237	573	(664)	8900 Specific Assistance To Individuals	23,395	15,574	15,820	246	
90,121	74,920	75,854	934	8949 GIK Specific Assistance To Individuals	1,017,988	981,324	1,030,733	49,409	
55	0	(203)	(203)	9000 Membership Dues	776	1,095	557	(538)	
0	0	1,220	(1,220)	9100 Awards & Grants	564	333	1,784	1,451	
407	365	234	(131)	9400 Miscellaneous Expense	6,118	3,386	3,672	286	
167	167	167	0	9500 Depreciation	2,000	2,000	2,000	0	
287	287	287	0	9605 World Service Expense	3,442	3,442	3,442	(0)	
2,590	3,779	991	(2,789)	9697 Indirect/Agency Support Service	50,524	53,940	49,979	(3,962)	
144,223	152,822	122,955	(29,867)	Expenses Before Admin Allocation	1,706,134	1,738,021	1,655,156	(82,865)	
144,223	152,822	122,955	(29,867)	TOTAL EXPENSE	1,706,134	1,738,021	1,655,156	(82,865)	
(22,723)	28,108	(30,614)	58,723	Current Surplus / (Deficit)	(125,408)	(28,386)	(0)	(28,386)	
(22,723)	28,108	(30,614)	58,723	Prior Year Surplus / Deficit	153,794	28,386	(0)	28,386	
				Accumulated Surplus / Deficit	28,386	(0)	(0)	0	