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**OFFICE**

# MEMO

To: HARRISBURG CITY COUNCIL  
From: Kirk Petroski, City Clerk  
LEGISLATIVE APPROVAL FORM

Date:

LEGISLATIVE APPROVAL FORM/CERTIFICATE OF ACCEPTANCE

BILL NO. -2020      RESOLUTION NO. -2020

THE ABOVE LISTED ITEM WAS WRITTEN AND PREPARED FOR FINAL INTRODUCTION AT THE HARRISBURG CITY SOLICITOR'S OFFICE ON:

  
\_\_\_\_\_  
Deputy City Solicitor

5-8-20  
\_\_\_\_\_  
Date

Requested by Department/Bureau: Finance

Department/Bureau Contact Person: R. Vollmer

For Action on or before:

The attached was received in the Office of the City Clerk for introduction on

\_\_\_\_\_

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

RESOLUTION No. \_\_\_\_\_ - 2020

Moved by: \_\_\_\_\_

A Resolution authorizing the submission of a grant application to the Department of Community and Economic Development’s Greenways, Trails, and Recreation Program to help fund the construction of two spray parks to replace two aging pools.

**WHEREAS**, the City has the ability to apply for a total of two hundred and fifty thousand dollars (\$250,000.00) in funding through the GTRP for the development, rehabilitation, or improvement of, among other things, public parks; and

**WHEREAS**, the City desires to apply for this grant to partially fund the construction of two spray parks to replace aging pools within City parks; and

**WHEREAS**, the grant requires a fifteen percent (15%) local match, which totals thirty seven thousand five hundred dollars (\$37,500.00); and

**WHEREAS**, a draft of the City’s application is attached hereto as “Exhibit A”; and

**WHEREAS**, if applied for and granted the funds would be used to begin construction of the spray parks in 2021 and 2022.

**NOW, THEREFORE, BE IT AND IT IS HEREBY RESOLVED BY THE COUNCIL OF THE CITY OF HARRISBURG**, that submission of a grant application to the Department of Community and Economic Development’s Greenways, Trails, and Recreation Program to help fund the construction of two spray parks to replace two aging pools is hereby authorized.

**BE IT FURTHER RESOLVED** that the Mayor, City Controller and other appropriate City officials are authorized and directed to take all steps necessary to further effectuate the purpose of this resolution.

I second this resolution \_\_\_\_\_.

# **EXHIBIT A**

## Single Application for Assistance

Web Application Id: 8404558

Applicant: City of Harrisburg

Program Selected: Greenways, Trails and Recreation Program

### Applicant Information

Applicant Entity Type:	Government
Applicant Name:	City of Harrisburg
NAICS Code	5419
FEIN/SSN Number	XXXXXXXXXX
DUNS Number:	071211478
CEO:	Eric Papenfuse
CEO Title:	Mayor
SAP Vendor #:	XXXXXX
Contact Name:	Rebecca Vollmer
Contact Title:	Grants Manager
Phone:	(717)-255-3068 Ext. 53068
Fax:	
E-mail:	rvollmer@harrisburgpa.gov
Mailing Address:	10 North 2nd Street
City:	Harrisburg
State:	PA
Zip Code:	17101

## Single Application for Assistance

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### Enterprise Type

Indicate the types of enterprises that describe the organization listed above. You may select more than one type.

<input type="checkbox"/> Advanced Technology	<input type="checkbox"/> Agri-Processor	<input type="checkbox"/> Agri-Producer	<input type="checkbox"/> Authority	<input type="checkbox"/> Biotechnology / Life Sciences
<input type="checkbox"/> Business Financial Services	<input type="checkbox"/> Call Center	<input type="checkbox"/> Child Care Center	<input type="checkbox"/> Commercial	<input type="checkbox"/> Community Dev. Provider
<input type="checkbox"/> Computer & Clerical Operators	<input type="checkbox"/> Defense Related	<input type="checkbox"/> Economic Dev. Provider	<input type="checkbox"/> Educational Facility	<input type="checkbox"/> Emergency Responder
<input type="checkbox"/> Environment and Conservation	<input type="checkbox"/> Exempt Facility	<input type="checkbox"/> Export Manufacturing	<input type="checkbox"/> Export Service	<input type="checkbox"/> Food Processing
<input checked="" type="checkbox"/> Government	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Industrial	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Mining	<input type="checkbox"/> Other	<input type="checkbox"/> Professional Services	<input type="checkbox"/> Recycling	<input type="checkbox"/> Regional & National Headquarters
<input type="checkbox"/> Research & Development	<input type="checkbox"/> Retail	<input type="checkbox"/> Social Services Provider	<input type="checkbox"/> Tourism Promotion	<input type="checkbox"/> Warehouse & Terminal

Government,

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### Project Overview

Project Name:

Harrisburg Spray Park Construction

Is this project related to another previously submitted project?

No

If yes, indicate previous project name:

Have you contacted anyone at DCED about your project?

Yes

If yes, indicate who:

Brett Ennis

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## Project Overview

Is your community certified through Sustainable Pennsylvania?

Yes, Silver

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### Project Site Locations

Address:	Jackson Lick Pool--1201 N. 6th Street
City:	Harrisburg
State:	PA
Zip Code:	17102
County:	Dauphin
Municipality:	Harrisburg City
PA House:	Patty Kim (103)
PA Senate:	John DiSanto (15)
Designated Areas:	Act 47 Distressed Community

Address:	Hall Manor Pool--1413 S. 18th Street
City:	Harrisburg
State:	PA
Zip Code:	17102
County:	Dauphin
Municipality:	Harrisburg City
PA House:	Patty Kim (103)
PA Senate:	John DiSanto (15)
Designated Areas:	Act 47 Distressed Community

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## Project Budget

	Greenways, Trails and Recreation Program	City of Harrisburg Local	Total
<b>General Construction</b>	\$250,000.00	\$37,500.00	
New Construction	\$250,000.00	\$37,500.00	\$287,500.00
<b>Total</b>	\$250,000.00	\$37,500.00	
		<b>Budget Total:</b>	\$287,500.00

### Basis of Cost

Provide the basis for calculating the costs that are identified in the Project Budget.

### Budget Narrative

The narrative must specifically address each of the cost items identified in the Project Budget section. If an amount is placed in any of the OTHER categories, you must specify what the money will be used for. **NOTE:** Some programs have specific guidelines regarding the narrative necessary to qualify for that particular resource. Please read the Program Guidelines for details.



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## Project Narrative

### What do you plan to accomplish with this project?

Identify the problem(s) that need to be resolved.

### How do you plan to accomplish it?

Include expected outcomes that are measurable, obtainable, clear and understandable, and valid. Examples of measurable outcomes include jobs created or retained, people trained, land or building acquired, housing units renovated or built, etc.

### How do you plan to use the funds?

Should include specific use of funds and reflect the budget provided with the application.

### Projected Schedule and Key Milestones and Dates

A detailed schedule of activities, including key milestones and dates, must accompany this application if applicable to the project.

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## Program Addenda

In addition to the Electronic Single Application (ESA), the Applicant shall upload the following to the ESA. All items marked with a red diamond are required to be uploaded to the application for electronic submission. The items that are not marked with a red diamond should also be uploaded if they are applicable to the project. For a more detailed explanation of the items below, please refer to Appendix I of the program guidelines.

I understand this application requires a \$100 application fee to be paid electronically before submitting the online application and I will send the signature page and 1 copy of the single application and all required supplemental information stated in the program guidelines.

Yes

### 1. Project Description

**Uploaded Documents**

### 2. Cost Estimate

**Uploaded Documents**

### 3. Matching Funds Commitment

**Uploaded Documents**

### 4. Color-Coded Map

**Uploaded Documents**

### 5. Permits

**Uploaded Documents**

### 6. Planning Letter

**Uploaded Documents**

### 7. Resolution

**Uploaded Documents**

### 8. Acquisition Documents

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## Program Addenda

### Uploaded Documents

9. Acquisition Consent Letter

### Uploaded Documents

DCED has implemented an electronic contracting procedure for awarded funds using an e-signature process. Please provide the name, title, and email address of two authorized individuals who will execute a contract, *if awarded*. Staff will verify the accuracy of information prior to contracting, as necessary.

1. Name:

Rebecca Vollmer

Title:

Grants Manager

Email:

rvollmer@harrisburgpa.gov

2. Name:

Kirk Petroski

Title:

City Clerk

Email:

kpetroski@harrisburgpa.gov