



# TDEM

THE TEXAS A&M UNIVERSITY SYSTEM

April 5, 2024

The Honorable Sydney Murphy  
 County Judge  
 Polk County  
 101 West Church Street  
 Livingston, TX 77351

Subject: DR-4485-0026, COVID-19 Pandemic Sub-Grant Award

Dear Judge Murphy:

The Texas Division of Emergency Management (TDEM) has issued a sub-grant for the Hazard Mitigation Grant Program (HMGP), DR-4485, COVID-19 Pandemic. The following is the information related to this award:

**Sub-Recipient Information:**

UEI Number: XNQMWLQZNM3  
 TINS Number: 74-6001621  
 FIPS Number: 373-99373-00

**Award Information:**

Catalog of Federal Domestic Assistance: 97.039  
 FEMA Project Number: 4485-0026  
 Project Title: Polk County RC WSC Water Treatment Plant #1 Generator  
 Period of Performance (POP): February 23, 2024 to February 1, 2026.

TOTAL PROJECT COST AWARD						
Version/ Amendment	Date	Total Subgrant Amount	Federal Cost Share %	Federal Cost Share Amount	Local Cost Share %	Local Cost Share Amount
0	2/23/2024	\$209,273.00	90%	\$188,345.70	10%	\$20,927.30

*Please Note: This award is not for research or development as defined in 2 Code of Federal Regulations (C.F.R.) § 200.87.*

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The eligible management costs for a reimbursement request are calculated by multiplying the eligible direct project costs submitted by the percentage of obligated management costs (5%) for the project. In some cases, the management costs submitted for a reimbursement will exceed the eligible management cost amount. In this instance, the management costs will be trapped until additional eligible direct project costs are submitted for reimbursement.

<b>TOTAL ELIGIBLE MANAGEMENT COSTS</b>						
<b>Version/ Amendment</b>	<b>Date</b>	<b>Total Management Costs</b>	<b>Federal Cost Share %</b>	<b>Federal Cost Share Amount</b>	<b>Local Cost Share %</b>	<b>Local Cost Share Amount</b>
0	2/23/2024	\$10,463.65	100%	\$10,463.65	0%	\$0

The approved Scope of Work (SOW) follows and the terms and conditions of this award are attached. It is important that the sub-recipient read, understand and comply with the SOW and all terms and conditions. It is also vital that this information be disseminated to sub-recipient's staff and contractors involved in work related to this project.

Utilizing the proposed HMGP grant, Polk County proposes to replace an existing under-sized generator with a new permanent generator and automatic transfer switch to provide instantaneous, automatic backup power for all operations at their Water Treatment Plant #1 located at 336 Resort Dr, Livingston, Polk County TX (30.713433, -95.100347). The proposed generator project also includes the installation of other supporting infrastructures including a new concrete pad, fuel tanks, utility lines, conduit, plumbing, wiring, and electrical and site modifications, as necessary. The successful completion of this project will ensure that every meter on the distribution network has at least the minimum pressure and volume of clean drinking water as set forth in Texas Commission of Environmental Quality requirements.

In accordance with FEMA Instruction 108-1-1 and DHS Instruction 023-01-001-01; this project has been determined to be Categorically Excluded (CATEX) M13. FEMA concludes that the project is categorically excluded from the National Environmental Policy Act (NEPA) requirement to prepare further environmental documentation. No extraordinary conditions in accordance with DHS Instruction 023-01-001-01 exist involving this project.

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Signing and returning this award letter indicates sub-recipient's acceptance of the SOW of the sub-award, the ability to pay the local cost share, and all grant terms and conditions outlined in the attached documents.

The sub-recipient must ensure that:

1. The initial quarterly progress report for the project is submitted at the end of the approving quarter. Please include the project number (provided above) in your future quarterly reports. Note that 44 C.F.R. § 206.438(c) indicates the state must provide a quarterly progress report to FEMA indicating the status and completion date for each project funded. The report must include any problems or circumstances affecting completion dates, SOW, or project cost that may result in non-compliance with the approved grant conditions.
2. In accordance with HMGP rules and policy, TDEM requires the submittal of all closeout documentation within 90-days of the project completion not to exceed the POP. The Governor's Authorized Representative (GAR) "shall certify that reported costs were incurred in the performance of eligible work, that the approved work was completed and that the mitigation measure is in compliance with the provisions of the FEMA-State Agreement" in accordance with 44 C.F.R. § 206.438(d).

If changes are needed to the SOW for the sub-award, period of performance or costs associated to the sub-award, the sub-recipient should immediately contact TDEM. No change to the sub-award will be considered approved until the sub-recipient is notified in writing by TDEM.

This signed and dated award letter and attached grant terms and conditions must be returned to TDEM before payment on the sub-award can be processed. Your signature is required on this award letter and on the last page of the attached grant terms and conditions. You must also initial each exhibit on the last page of the grant terms and conditions. Please sign, date, and return both the award letter along with the attached grant terms and conditions acknowledging acceptance of this sub-award via email to the assigned Mitigation Coordinator, Matthew Holloway at [Matthew.Holloway@TDEM.Texas.gov](mailto:Matthew.Holloway@TDEM.Texas.gov).

  
\_\_\_\_\_  
Sydney Murphy, County Judge

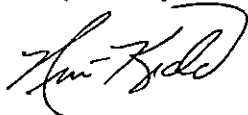
April 23<sup>rd</sup>, 2024  
\_\_\_\_\_  
Date

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Should you wish to appeal any determination related to this sub-award you must do so within 60 days of receipt of the notice of the action. You will need to provide your appeal with any documentation supporting your position to your assigned TDEM Mitigation Coordinator within the allotted time.

If you have any questions please contact your Mitigation Coordinator, Matthew Holloway, at (346) 667-2583 or [Matthew.Holloway@TDEM.Texas.gov](mailto:Matthew.Holloway@TDEM.Texas.gov).

Respectfully,



**W. Nim Kidd, MPA, CEM®**

Chief - Texas Division of Emergency Management  
Vice Chancellor for Disaster and Emergency Services  
The Texas A&M University System

ATTACHMENTS: Grant Terms and Conditions  
Record of Environmental Considerations  
FEMA Notification of Award

Copy: Jessica Hutchins



## Designation of Subrecipient Agent (DSA) Form

Subrecipient:	Polk County		
Disaster Number(s):	DR-4485	Grant Program(s):	HMGP

Primary Agent			
Serves as the primary point of contact for projects. <i>Cannot be a contractor.</i>			
Name:	Jessica Hutchins	Office Number:	(936) 327-6849, option 1
Position/Title:	Grant & Contract Coordinator	Cell Number:	(936) 425-1942
Email:	grantsandcontracts@co.polk.tx.us	Fax Number:	
Organization:	Polk County		
The Primary Agent will have full access to GMS.			

Secondary Agent			
Serves as the primary point of contact for projects.			
Name:	Becky Marsh	Office Number:	(936) 327-6813
Position/Title:	Assistant to the Commissioners	Cell Number:	
Email:	county.judge@co.polk.tx.us	Fax Number:	
Organization:	Polk County		
The Secondary Agent will have full access to GMS.			

Primary Finance Agent			
Serves as the primary point of contact for financial matters			
Name:	Louis Ploth	Office Number:	(936) 327-6811
Position/Title:	County Auditor	Cell Number:	
Email:	louis.ploth@co.polk.tx.us	Fax Number:	(936) 327-6898
Organization:	Polk County		
The Primary Finance Agent will have full access to GMS.			

Certifying Official			
Serves as the official representative of the organization. <i>Must possess the authority to obligate funds and enter into contracts for the organization.</i>			
Name:	Sydney Murphy	Office Number:	(936) 327-6813
Position/Title:	County Judge	Cell Number:	
Email:	smurphy@co.polk.tx.us	Fax Number:	(936) 327-6891
Organization:	Polk County		
GMS Access (pick 1): Full <input type="checkbox"/> Contributor <input checked="" type="checkbox"/> Read-Only <input type="checkbox"/>			


**Sydney Murphy**
4/23/24  
 \_\_\_\_\_  
 Signature of Certifying Official      Print Name      Date

*(Must be a Mayor, Judge, or Executive Director with the authority to obligate funds & enter into contracts for the organization)*



# TDEM

THE TEXAS A&M UNIVERSITY SYSTEM

## Designation of Subrecipient Agent (DSA) Form

Alternate Contact			
Name:	Jennifer Boyd	Office Number:	(512) 452-0432
Position/Title:	Grant Manager/Grant Writer	Cell Number:	(512) 923-7296
Email:	jennifer@lcmisinc.com	Fax Number:	
Organization:	Langford Community Mgmt Services		
GMS Access (pick 1): Full <input checked="" type="checkbox"/> Contributor <input type="checkbox"/> Read-Only <input type="checkbox"/>			

Alternate Contact			
Name:	Charles Reagan	Office Number:	(512) 452-0432
Position/Title:	Grant Manager/Grant Writer	Cell Number:	(512) 796-1887
Email:	charles@lcmisinc.com	Fax Number:	
Organization:	Langford Community Mgmt Services		
GMS Access (pick 1): Full <input checked="" type="checkbox"/> Contributor <input type="checkbox"/> Read-Only <input type="checkbox"/>			

Alternate Contact			
Name:	Patty Swords	Office Number:	(512) 452-0432
Position/Title:	Grant Manager/Grant Writer	Cell Number:	(979) 480-4949
Email:	patty@lcmisinc.com	Fax Number:	
Organization:	Langford Community Mgmt Services		
GMS Access (pick 1): Full <input checked="" type="checkbox"/> Contributor <input type="checkbox"/> Read-Only <input type="checkbox"/>			

Alternate Contact			
Name:		Office Number:	
Position/Title:		Cell Number:	
Email:		Fax Number:	
Organization:			
GMS Access (pick 1): Full <input type="checkbox"/> Contributor <input type="checkbox"/> Read-Only <input type="checkbox"/>			

Alternate Contact			
Name:		Office Number:	
Position/Title:		Cell Number:	
Email:		Fax Number:	
Organization:			
GMS Access (pick 1): Full <input type="checkbox"/> Contributor <input type="checkbox"/> Read-Only <input type="checkbox"/>			

  
 \_\_\_\_\_  
 Signature of Certifying Official

Sydney Murphy  
 \_\_\_\_\_  
 Print Name

4/23/24  
 \_\_\_\_\_  
 Date

(Must be a Mayor, Judge, or Executive Director with the authority to obligate funds & enter into contracts for the organization)