

**Tax ID Number: 59-6000674**  
**Grant Number: FL0113L4H091705**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for**  
**FY2017 COMPETITION**  
**(funding 1 project in CoCs with multiple recipients)**


1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$100,428 for project number FL0113L4H091705. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$100,428</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____


Tax ID Number: 59-6000674  
Grant Number: FL0113L4H091705  
Effective Date: 03/04/2018  
DUNS Number: 079208989

4. The performance period for the project begins 09/01/2018 and ends 08/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
\_\_\_\_\_  
(Signature)  
  
Thomas N. Bilodeau, Program Manager  
\_\_\_\_\_  
(Typed Name and Title)  
  
04/03/2018  
\_\_\_\_\_  
(Date)

RECIPIENT  
\_\_\_\_\_  
Indian River County Board of County Commissioners  
(Name of Organization)

BY:   
\_\_\_\_\_  
(Signature of Authorized Official)  
  
Brad Bernauer Director Human Services  
\_\_\_\_\_  
(Typed Name and Title of Authorized Official)  
  
4-3-18  
\_\_\_\_\_  
(Date)

**Tax ID Number: 59-6000674**  
**Grant Number: FL0113L4H091705**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE**

<b>Grant No.</b>	<b>Recipient Name</b>	<b>Indirect cost rate</b>	<b>Cost Base</b>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0114L4H091710**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
FY2017 COMPETITION  
(funding 1 project in CoCs with multiple recipients)**

1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$70,776 for project number FL0114L4H091710. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:


a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$70,776</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

Tax ID Number: 59-6000674  
Grant Number: FL0114L4H091710  
Effective Date: 03/22/2018  
DUNS Number: 079208989

4. The performance period for the project begins 04/01/2018 and ends 03/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:

  
\_\_\_\_\_  
(Signature)

Thomas N. Bilodeau, Program Manager  
\_\_\_\_\_  
(Typed Name and Title)

03/22/2018  
\_\_\_\_\_  
(Date)

RECIPIENT

Indian River County Board of County Commissioners  
\_\_\_\_\_  
(Name of Organization)

BY:

  
\_\_\_\_\_  
(Signature of Authorized Official)

Bradley Bernauer - Human Ser. Dir.  
\_\_\_\_\_  
(Typed Name and Title of Authorized Official)

3-22-18  
\_\_\_\_\_  
(Date)

**Tax ID Number: 59-6000674**  
**Grant Number: FL0114L4H091710**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE**

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0116L4H091710**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
 FY2017 COMPETITION  
 (funding 1 project in CoCs with multiple recipients)**

1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$35,400 for project number FL0116L4H091710. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	\$ _____
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	<u>\$35,400</u>
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

Tax ID Number: 59-6000674

Grant Number: FL0116L4H091710

Effective Date: 03/04/2018

DUNS Number: 079208989

4. The performance period for the project begins 09/01/2018 and ends 08/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:



(Signature)

Thomas N. Bilodeau, Program Manager

(Typed Name and Title)

04/03/2018

(Date)

RECIPIENT

Indian River County Board of County Commissioners

(Name of Organization)

BY:



(Signature of Authorized Official)

Brad Bernauer Dir Human Services

(Typed Name and Title of Authorized Official)

4-3-18

(Date)



**Tax ID Number: 59-6000674**  
**Grant Number: FL0116L4H091710**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE**

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0119L4H091710**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
FY2017 COMPETITION  
(funding 1 project in CoCs with multiple recipients)**

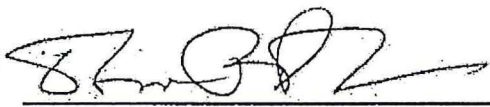
1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$269,184 for project number FL0360L4H091708. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$269,184</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

Tax ID Number: 59-6000674  
Grant Number: FL0119L4H091710  
Effective Date: 03/22/2018  
DUNS Number: 079208989


4. The performance period for the project begins 07/01/2018 and ends 06/30/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
(Signature)  
Thomas N. Bilodeau, Program Manager  
(Typed Name and Title)  
03/22/2018  
(Date)

RECIPIENT

Indian River County Board of County Commissioners  
(Name of Organization)

BY:   
(Signature of Authorized Official)  
Bradley Bernauer Dir Human Services  
(Typed Name and Title of Authorized Official)  
3-23-18  
(Date)

Tax ID Number: 59-6000674  
Grant Number: FL0119L4H091710  
Effective Date: 03/22/2018  
DUNS Number: 079208989

FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0360L4H091708**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
FY2017 COMPETITION  
(funding 1 project in CoCs with multiple recipients)**


1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$92,532 for project number FL0360L4H091708. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$92,532</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____


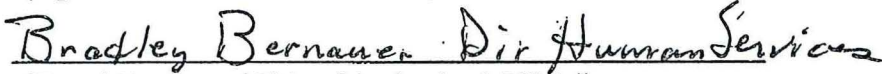
Tax ID Number: 59-6000674  
Grant Number: FL0360L4H091708  
Effective Date: 03/22/2018  
DUNS Number: 079208989

4. The performance period for the project begins 06/01/2018 and ends 05/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
\_\_\_\_\_  
(Signature)  
  
Thomas N. Bilodeau, Program Manager  
\_\_\_\_\_  
(Typed Name and Title)  
  
03/22/2018  
\_\_\_\_\_  
(Date)

RECIPIENT

\_\_\_\_\_  
Indian River County Board of County Commissioners  
(Name of Organization)  
  
BY:   
\_\_\_\_\_  
(Signature of Authorized Official)  
  
  
\_\_\_\_\_  
(Typed Name and Title of Authorized Official)  
  
3-23-18  
\_\_\_\_\_  
(Date)

**Tax ID Number: 59-6000674**  
**Grant Number: FL0360L4H091708**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE**

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0380L4H091703**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
FY2017 COMPETITION  
(funding 1 project in CoCs with multiple recipients)**

1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$89,340 for project number FL0380L4H091703. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:


a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$89,340</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____



Tax ID Number: 59-6000674  
Grant Number: FL0380L4H091703  
Effective Date: 03/04/2018  
DUNS Number: 079208989


4. The performance period for the project begins 09/01/2018 and ends 08/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
(Signature)  
Thomas N. Bilodeau, Program Manager  
(Typed Name and Title)  
04/03/2018  
(Date)

RECIPIENT

Indian River County Board of County Commissioners  
(Name of Organization)

BY:   
(Signature of Authorized Official)  
Brad Bernauer Dir Human Services  
(Typed Name and Title of Authorized Official)  
4-3-18  
(Date)

**Tax ID Number: 59-6000674**  
**Grant Number: FL0380L4H091703**  
**Effective Date: 03/04/2018**  
**DUNS Number: 079208989**

**FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE**

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0418L4H091705**  
**Effective Date: 04/03/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for  
 FY2017 COMPETITION  
 (funding 1 project in CoCs with multiple recipients)**

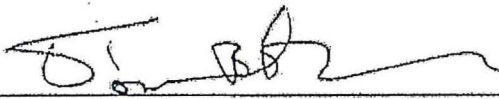
1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$27,840 for project number FL0418L4H091705. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	\$ _____
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	<u>\$27,840</u>
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

Tax ID Number: 59-6000674  
Grant Number: FL0418L4H091705  
Effective Date: 04/03/2018  
DUNS Number: 079208989


4. The performance period for the project begins 01/01/2019 and ends 12/31/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
(Signature)  
Thomas N. Bilodeau, Program Manager  
(Typed Name and Title)  
04/03/2018  
(Date)

RECIPIENT

Indian River County Board of County Commissioners  
(Name of Organization)

BY:   
(Signature of Authorized Official)  
Bradley Bernauer Human Services Dir.  
(Typed Name and Title of Authorized Official)  
4-16-18  
(Date)

Tax ID Number: 59-6000674  
Grant Number: FL0418L4H091705  
Effective Date: 04/03/2018  
DUNS Number: 079208989

FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____

**Tax ID Number: 59-6000674**  
**Grant Number: FL0440L4H091706**  
**Effective Date: 03/22/2018**  
**DUNS Number: 079208989**

**SCOPE OF WORK for**  
**FY2017 COMPETITION**  
**(funding 1 project in CoCs with multiple recipients)**


1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCs) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$108,864 for project number FL0440L4H091706. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ _____
b. UFA costs	\$ _____
c. Acquisition	\$ _____
d. Rehabilitation	\$ _____
e. New construction	\$ _____
f. Leasing	\$ _____
g. Rental assistance	<u>\$108,864</u>
h. Supportive services	\$ _____
i. Operating costs	\$ _____
j. Homeless Management Information System	\$ _____
k. Administrative costs	\$ _____
l. Relocation costs	\$ _____
m. HPC homelessness prevention activities:	
Housing relocation and stabilization services	\$ _____
Short-term and medium-term rental assistance	\$ _____

Tax ID Number: 59-6000674  
Grant Number: FL0440L4H091706  
Effective Date: 03/22/2018  
DUNS Number: 079208989

4. The performance period for the project begins 05/01/2018 and ends 04/30/2019. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:   
(Signature)  
Thomas N. Bilodeau, Program Manager  
(Typed Name and Title)  
03/22/2018  
(Date)

RECIPIENT

Indian River County Board of County Commissioners  
(Name of Organization)  
BY:   
(Signature of Authorized Official)  
Bradley Bernauer, Dir Human Services  
(Typed Name and Title of Authorized Official)  
3-23-18  
(Date)

Tax ID Number: 59-6000674  
Grant Number: FL0440L4H091706  
Effective Date: 03/22/2018  
DUNS Number: 079208989

FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
_____	_____	_____ %	_____