

**ORDER: AUTHORIZE CERTIFICATION AUTHORIZATION LETTER,
MAINTENANCE AGREEMENT AND MANAGEMENT COST
OPT-OUT FORM FOR THE SWIFT GRANT PROJECT FOR
STRUCTURE ELEVATION PROJECT FOR 1103 HIGHWAY
6 EAST ON BEHALF OF HOMEOWNER**

Motion was made by Brent Larson, duly seconded by Larry Gillespie, to authorize Certification Authorization Letter, Maintenance Agreement & Management Cost Opt-Out form for the Swift Grant Project for Structure Elevation Project for 1103 Hwy 6 E. on behalf of homeowner.

The vote on the motion was as follows:

Supervisor Brent Larson, voted yes
Supervisor Larry Gillespie, voted yes
Supervisor David Rikard, voted yes
Supervisor Chad McLarty, voted yes
Supervisor Mike Roberts, voted yes

After the vote, Vice President, McLarty, declared the motion carried, this the 18th day of July, 2022.



Chad McLarty, Vice President
Board of Supervisors



Sherry Wall, Chancery Clerk



**MEMA MITIGATION GRANT PROGRAM
PROJECT MANAGEMENT COST-OPT OUT FORM**

TO: Mississippi Emergency Management Agency

FROM: Applicant: Lafayette County

RE: Project Title: Elevation Project for 1103 Hwy 6 East

OPT OUT FORM

The purpose of this form is to make clear the sub-recipients desire to decline/reject the 5% management cost in accordance with FEMA regulations under the DRRA section 1215. By signing this form, it will not prohibit the subrecipient from requesting project management costs as a line item in the submitted application's project budget.

I have been informed by MEMA Mitigation that that the Lafayette County,
(city, town, county)

Mississippi as the Sub-Recipient can apply for management cost for the

Structure Elevation Project for 1103 Hwy 6 East, Management cost is up to 5% of the total project cost
(Project title, number).

paid at 100% currently estimated at \$ 9,845.60. I understand that by submitting this

form that Lafayette County wish to decline/reject the
(sub-recipient)

management cost for Structure Elevation Project for 1103 Hwy 6 East.

It is understood that by declining/rejecting the project management cost that the undersigned will not have to submit a quarterly report for management cost for this project.

I am duly authorized by Lafayette County Board of Supervisors (governing body of the Recipient) to execute this Opt-Out Form.

Signature [Signature] Date: 7/18/22

Printed Name: Lisa Canale

Title: County Administrator



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Signature [Signature] Date: 7/18/22

Printed Name: Lisa Canipe

Title: County Administrator



HMA GRANT APPLICATION CERTIFICATION AND AUTHORIZATION

Hazard Mitigation Grant # _____

Hazard Mitigation Grant Title: Structure Elevation Project for 1103 Hwy 6 East

The undersigned does hereby submit this Mitigation Grant application for financial assistance and certifies that the applicant will fulfill all grant requirements. The undersigned also commits to provide the cash or in-kind match identified in our grant application.

*Signature: [Signature] Date: 7/18/22

Title: County Administrator

*Must be signed by Chief Executive Officer or by other official authorized to execute agreements on behalf of the applicant.



**MEMA MITIGATION GRANT PROGRAM
PROJECT APPLICATION – Maintenance Agreement**

TO: Mississippi Emergency Management Agency

FROM: Applicant: Lafayette County

RE: Project Title: Structure Elevation Project for 1103 Hwy 6 East

MAINTENANCE AGREEMENT

The Lafayette County, Mississippi as the *Recipient*, hereby agrees that if it receives any Federal aid as a result of the attached project application, it will accept responsibility, at its own expense if necessary, for the **routine** maintenance of any real property, structures, or facilities acquired as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities maintenance and preventative activities performed according to manufacturer's specifications, monthly load testing and maintaining records of these activities.

The purpose of this Maintenance Agreement is to make clear the *Recipient's* maintenance responsibilities following project award, and to show the Lafayette County's acceptance of these responsibilities. It does not replace, supersede, or add to any other maintenance responsibilities imposed by Federal, State and Local laws or regulations and which are in force on the date of project award.

I am duly authorized by Lafayette County Board of Supervisor's to execute this Maintenance Agreement.

Signature  Date:(m/d/yyyy) 7/18/22

Printed Name: Lisa Carwyle

Title: County Administrator