

GRANT FUNDING INFORMATION

(Attach full copy of application and/or Notice of Award)

DEPARTMENT TCAPCD	NAME OF CONTACT Joseph Tona	PHONE NUMBER 530-527-3717	BUDGET UNIT 601
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TITLE OF GRANT: Quality Assurance Review of Point Source Emissions Data Grant

GRANTOR AGENCY: California Air Resources Board

GRANT OBJECTIVES: Implementation of AB 197

GRANT I.D. NO.: G18-EIDG-31 Federal Catalog No. (If Applicable) N/A

GRANT PERIOD: FROM: 5/1/2019 TO: 5/1/2020 Applicable Code and/or Legislative Reference: N/A

DATE APPLICATION APPROVED BY BOARD: _____ DATE BOARD ACCEPTED FUNDS OR APPROVED CONTRACT: _____

IS GRANT RENEWABLE?
(Check all applicable)

Yes	No	Annually	Indefinite	Specific No. of Years
X		X		

GRANT FUNDING

FISCAL YEAR: 19/20

FISCAL YEAR: 20/21

FEDERAL		
STATE	\$8,583.00	\$0
OTHER		
1. TOTAL GRANT FUNDS	\$8,583.00	\$0

COUNTY FUNDING

HARD MATCH (dollars)	\$0	\$0
SOFT MATCH (In-kind)	0	0
2. TOTAL COUNTY MATCH	\$0	\$0

USE OF FUNDS

PERSONNEL (attach detail)	\$8,583.00(@\$76.00 hourly rate)	\$0 (@\$76.00 hourly rate)
SERVICES/SUPPLIES	\$0	\$0
EQUIPMENT		
OTHER CHARGES		
TOTAL FUNDS (must also= 1+2 above)	\$8,583.00	\$0

IF HARD MATCH REQUIRED, IDENTIFY FUNDING SOURCE: **No Match Required.**

IS MATCH FUNDING APPROPRIATED WITHIN EXISTING BUDGET? YES NO

METHOD OF PAYMENT OF GRANT FUNDS: REIMBURSE: X ADVANCE:

ANTICIPATED DATE(S) OF RECEIPT OF GRANT FUNDS: Between May 2019 and May 2020

EXPENDITURE DEADLINE: May 1, 2020

IS INTEREST EARNING ON GRANT FUNDS REQUIRED BY LAW? YES NO X

WILL THERE BE IMPACTS TO HOUSING, STAFF OR OTHER COUNTY SUPPORT SERVICES? (If yes, please explain. Use attachment if needed.) YES NO X

DEPARTMENT HEAD SIGNATURE

DATE 5-15-19 Form A-135 (Rev 8-21-07)