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## GRANT SUMMARY SHEET

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**Grant Name:** Community /Congressionally Directed Construction Project  
23-26

**Department:** GENERAL SERVICES

**Grantor:** U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Pass-Through Grantor  
(If applicable):**

**Total Award this Action:** \$2,200,000.00

**Cash Match Amount** \$0.00

**Department Contact:** Ava Elsaghir

**Status:** NEW

**Program Description:**

Metro Government of Nashville and Davidson County received permission to apply for the Community Project Funding/Congressionally Directed Spending (CPF/CDS) projects funding from the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA). Metro general Services currently in the early stages of the construction for the JJC/NYCE building and plan to utilize this fund to build the Assessment center on the 3rd floor. This project is estimated to get completed by 2026.

**Plan for continuation of services upon grant expiration:**

The Department of General Services will continue with the planned infrasttute to complete the building construction and provide necessary maintenance right after to maintain the building equipment and other related infrastructure

**Grants Tracking Form**

Part One

<input type="radio"/> Pre-Application		<input type="radio"/> Application		<input checked="" type="radio"/> Award Acceptance		<input type="radio"/> Contract Amendment	
Department	Dept. No.	Contact		Phone	Fax		
GENERAL SERVICES	010	Ava Elsaghir					
<b>Grant Name:</b>		Community/Congressionally Directed Spending Construction Project 23-26					
<b>Grantor:</b>		U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES		<b>Other:</b>			
<b>Grant Period From:</b>		09/30/23	<b>(applications only) Anticipated Application Date:</b>		05/31/23		
<b>Grant Period To:</b>		09/29/26	<b>(applications only) Application Deadline:</b>		06/01/23		
<b>Funding Type:</b>	FED DIRECT	<input type="checkbox"/> Multi-Department Grant		<b>If yes, list below.</b>			
<b>Pass-Thru:</b>		<input type="checkbox"/> Outside Consultant Project:					
<b>Award Type:</b>	OTHER	<b>Total Award:</b>		\$2,200,000.00			
<b>Status:</b>	NEW	<b>Metro Cash Match:</b>		\$0.00			
<b>Metro Category:</b>	New Initiative	<b>Metro In-Kind Match:</b>		\$0.00			
<b>CFDA #</b>	93.493	<b>Is Council approval required?</b>		<input checked="" type="checkbox"/>			
<b>Project Description:</b>		<input checked="" type="checkbox"/> Applic. Submitted Electronically?					
<p>Metro Government of Nashville and Davidson County received permission to apply for the Community Project Funding/Congressionally Directed Spending (CPF/CDS) projects funding from the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA). Metro General Services currently in the early stages of the constructon for the JJC/NYCE building and plan to utilize this fund to build the Assessment center at the JJC/NYCE new location at 1354 Brick Church Pike, Nashville. This project is estimated to get completed by September 29, 2026</p>							
<b>Plan for continuation of service after expiration of grant/Budgetary impact:</b>							
The Department of General Services will continue to with the planned infrastructure to complete the building construction and provide necessary maintenance right after to maintain the building equipment and other related infrastructure							
<b>How is Match Determined?</b>							
<b>Fixed Amount of \$</b>		or		0.0%		<b>% of Grant</b>	
						<b>Other:</b> <input type="checkbox"/>	
<b>Explanation for "Other" means of determining match:</b>							
Cost match is not applicable							
<b>For this Metro FY, how much of the required local Metro cash match:</b>							
<b>Is already in department budget?</b>				<b>Fund</b>		<b>Business Unit</b>	
<b>Is not budgeted?</b>				<b>Proposed Source of Match:</b>			
<b>(Indicate Match Amount &amp; Source for Remaining Grant Years in Budget Below)</b>							
<b>Other:</b>							
<b>Number of FTEs the grant will fund:</b>				<b>Actual number of positions added:</b>			
<b>Departmental Indirect Cost Rate</b>		5.68%		<b>Indirect Cost of Grant to Metro:</b>		\$124,960.00	
<b>*Indirect Costs allowed?</b> <input type="radio"/> Yes <input checked="" type="radio"/> No		<b>% Allow.</b>		0.00%		<b>Ind. Cost Requested from Grantor:</b>	
						\$0.00 in budget	
<b>*(If "No", please attach documentation from the grantor that indirect costs are not allowable. See Instructions)</b>							
<b>Draw down allowable?</b> <input type="checkbox"/>							
<b>Metro or Community-based Partners:</b>							
Juvenile justice Center							

Part Two

Grant Budget										
Budget Year	Metro Fiscal Year	Federal Grantor	State Grantor	Other Grantor	Local Match Cash	Match Source (Fund, BU)	Local Match In-Kind	Total Grant Each Year	Indirect Cost to Metro	Ind. Cost Neg. from Grantor
Yr 1	FY24	\$404,436.71	\$0.00	\$0.00	\$0.00		\$0.00	\$404,436.71	\$22,972.01	\$0.00
Yr 2	FY25	\$888,097.09	\$0.00	\$0.00	\$0.00		\$0.00	\$888,097.09	\$50,443.91	\$0.00
Yr 3	FY26	\$907,466.20	\$0.00	\$0.00	\$0.00		\$0.00	\$907,466.20	\$51,544.08	\$0.00
Yr 4	FY27									
Yr 5	FY28									
<b>Total</b>		<b>\$2,200,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,200,000.00</b>	<b>\$124,960.00</b>	<b>\$0.00</b>
<b>Date Awarded:</b>					<b>Tot. Awarded:</b>		\$2,200,000.00		<b>Contract#:</b>	
(or) <b>Date Denied:</b>		09/14/23			<b>Reason:</b>					
(or) <b>Date Withdrawn:</b>					<b>Reason:</b>					

Contact: [juanita.paulsen@nashville.gov](mailto:juanita.paulsen@nashville.gov)  
[vaughn.wilson@nashville.gov](mailto:vaughn.wilson@nashville.gov)





**Department of Health and Human Services**  
Health Resources and Services Administration

Notice of Award  
FAIN# CE152421  
Federal Award Date: 09/14/2023

### Recipient Information

- 1. Recipient Name**  
NASHVILLE & DAVIDSON COUNTY, METROPOLITAN  
GOVERNMENT OF  
730 President Ronald Reagan Way,  
Nashville, TN 37219
- 2. Congressional District of Recipient**  
07
- 3. Payment System Identifier (ID)**  
1620694743A3
- 4. Employer Identification Number (EIN)**  
620694743
- 5. Data Universal Numbering System (DUNS)**  
078217668
- 6. Recipient's Unique Entity Identifier**  
LGZLHP6ZHM55
- 7. Project Director or Principal Investigator**  
Ava Elsaghir  
Grants and Contracts Manager  
Ava.Elsaghir@Nashville.gov  
(615)930-6049
- 8. Authorized Official**  
Velvet Hunter  
Director, General Services Department  
Velvet.Hunter@Nashville.gov  
(615)862-5055

### Federal Agency Information

- 9. Awarding Agency Contact Information**  
LaToya Ferguson  
Grants Management Specialist  
Office of Federal Assistance Management (OFAM)  
Division of Grants Management Office (DGMO)  
LFerguson@hrsa.gov  
(301) 443-1440
- 10. Program Official Contact Information**  
Maya Walker  
Healthcare Systems Bureau (HSB)  
mwalker@hrsa.gov  
(301) 945-5826

### Federal Award Information

- 11. Award Number**  
1 CE1HS52421-01-00
- 12. Unique Federal Award Identification Number (FAIN)**  
CE152421
- 13. Statutory Authority**  
Consolidated Appropriations Act, 2022, (PL 117-103)
- 14. Federal Award Project Title**  
Community Project Funding/Congressionally Directed Spending - Construction
- 15. Assistance Listing Number**  
93.493
- 16. Assistance Listing Program Title**  
Congressional Directives
- 17. Award Action Type**  
New
- 18. Is the Award R&D?**  
No

### Summary Federal Award Financial Information

<b>19. Budget Period Start Date 09/30/2023 - End Date 09/29/2026</b>	
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$2,200,000.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$2,200,000.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	\$2,200,000.00
<b>26. Project Period Start Date 09/30/2023 - End Date 09/29/2026</b>	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$2,200,000.00

- 28. Authorized Treatment of Program Income**  
Addition
- 29. Grants Management Officer – Signature**  
James Smith on 09/14/2023

### 30. Remarks



Notice of Award  
Award Number: 1 CE1HS52421-01-00  
Federal Award Date: 09/14/2023

**Healthcare Systems Bureau (HSB)**

<p><b>31. APPROVED BUDGET: (Excludes Direct Assistance)</b></p> <p><input checked="" type="checkbox"/> Grant Funds Only</p> <p><input type="checkbox"/> Total project costs including grant funds and all other financial participation</p> <table style="width:100%; border-collapse: collapse;"> <tr><td>a. Salaries and Wages:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>b. Fringe Benefits:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Total Personnel Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. Consultant Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>e. Equipment:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>f. Supplies:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>g. Travel:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>h. Construction/Alteration and Renovation:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>i. Other:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>j. Consortium/Contractual Costs:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>k. Trainee Related Expenses:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>l. Trainee Stipends:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>m. Trainee Tuition and Fees:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>n. Trainee Travel:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>o. TOTAL DIRECT COSTS:</td><td style="text-align: right;">\$2,200,000.00</td></tr> <tr><td>p. INDIRECT COSTS (Rate: % of S&amp;W/TADC):</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>q. TOTAL APPROVED BUDGET:</td><td style="text-align: right;">\$2,200,000.00</td></tr> <tr><td>    i. Less Non-Federal Share:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>    ii. Federal Share:</td><td style="text-align: right;">\$2,200,000.00</td></tr> </table>	a. Salaries and Wages:	\$0.00	b. Fringe Benefits:	\$0.00	c. Total Personnel Costs:	\$0.00	d. Consultant Costs:	\$0.00	e. Equipment:	\$0.00	f. Supplies:	\$0.00	g. Travel:	\$0.00	h. Construction/Alteration and Renovation:	\$0.00	i. Other:	\$0.00	j. Consortium/Contractual Costs:	\$0.00	k. Trainee Related Expenses:	\$0.00	l. Trainee Stipends:	\$0.00	m. Trainee Tuition and Fees:	\$0.00	n. Trainee Travel:	\$0.00	o. TOTAL DIRECT COSTS:	\$2,200,000.00	p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00	q. TOTAL APPROVED BUDGET:	\$2,200,000.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$2,200,000.00	<p><b>33. RECOMMENDED FUTURE SUPPORT:</b> (Subject to the availability of funds and satisfactory progress of project)</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 5px;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 20%;">YEAR</th> <th>TOTAL COSTS</th> </tr> </thead> <tbody> <tr> <td></td> <td style="text-align: center;">Not applicable</td> </tr> </tbody> </table> <p><b>34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)</b></p> <table style="width:100%; border-collapse: collapse;"> <tr><td>a. Amount of Direct Assistance</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>b. Less Unawarded Balance of Current Year's Funds</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Less Cumulative Prior Award(s) This Budget Period</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION</td><td style="text-align: right;">\$0.00</td></tr> </table> <p><b>35. FORMER GRANT NUMBER</b></p> <p><b>36. OBJECT CLASS</b> 41.11</p> <p><b>37. BHCNIS#</b></p>	YEAR	TOTAL COSTS		Not applicable	a. Amount of Direct Assistance	\$0.00	b. Less Unawarded Balance of Current Year's Funds	\$0.00	c. Less Cumulative Prior Award(s) This Budget Period	\$0.00	d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00
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<p><b>38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:</b></p> <p>a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.</p>																																																			
<p><b>39. ACCOUNTING CLASSIFICATION CODES</b></p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 15%;">FY-CAN</th> <th style="width: 15%;">CFDA</th> <th style="width: 15%;">DOCUMENT NUMBER</th> <th style="width: 15%;">AMT. FIN. ASST.</th> <th style="width: 15%;">AMT. DIR. ASST.</th> <th style="width: 15%;">SUB PROGRAM CODE</th> <th style="width: 15%;">SUB ACCOUNT CODE</th> </tr> </thead> <tbody> <tr> <td>23 - 370CONS</td> <td>93.493</td> <td>23CE1HS52421</td> <td>\$2,200,000.00</td> <td>\$0.00</td> <td>N/A</td> <td>23CE1HS52421</td> </tr> </tbody> </table>		FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE	23 - 370CONS	93.493	23CE1HS52421	\$2,200,000.00	\$0.00	N/A	23CE1HS52421																																				
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## HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

## Terms and Conditions

**Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.**

### Grant Specific Condition(s)

#### 1. Due Date: Within 120 Days of Budget Start Date

The award recipient must consult with the HRSA Project Officer and environmental reviewer to determine if other environmental compliance reviews are required for the proposed project. Additional information will be provided within 120 days of the Project Period Start Date to identify the extent of the information that will be needed for this specific project. This information may include an Environmental Assessment (EA) under NEPA, consultation under Section 106 of the National Historic Preservation Act with the State Historic Preservation Officer (SHPO) / Tribal Historic Preservation Officer (THPO) (and any other consulting parties if identified), a hazardous materials survey, Coastal Zone Consistency Determination, Floodplain Management, Environmental Justice, etc. The documentation must be completed and submitted to HRSA for review and approval. This condition must be approved and lifted from the Notice of Award prior to initiating any physical site preparation, demolition, alteration and renovation, or construction related to the project. Funds may only be drawn down for pre-construction activities, such as the purchase of moveable equipment, completion of architectural and engineering plans, licensing and permitting requirements, State Historic Preservation Office/Tribal Historic Preservation Office consultation, and preparation of the EA or related testing and surveys.

#### 2. Due Date: Within 60 Days of Budget Start Date

Within 60 days of the Project Period Start Date, submit a completed Environmental Information Document (EID Checklist) for the project, including a Flood Insurance Rate Map.

#### 3. Due Date: Within 60 Days of Budget Start Date

Within 60 days of Project Period Start Date, the award recipient must submit into HRSA's Electronic Handbook a revised SF-424C budget page, revised budget justification and revised equipment list, in accordance with the application guidance.

- Contingency costs are in the SF-424C budget but missing in the budget justification.
- The cost per sf is low for new construction. A breakdown of construction costs is needed to evaluate this. It is not clear from the project narrative or the drawings what the scope of work is.
- Please reformat the Budget Justification/Budget Narrative to list the costs 1 through 17 and with detailed descriptions on lines 1 through 11.

For guidance, refer to the sample Budget Justification available on the technical assistance webpage under "Pre-Award Forms":

<https://www.hrsa.gov/grants/manage-your-grant/training/community-project-funding-congressionally-directed>

#### 4. Due Date: Within 60 Days of Budget Start Date

Within 60 days of the Project Period Start Date, the award recipient must submit schematic drawings including floor plan(s) and, if applicable to the project, a site plan that provide clear and complete information on the project into HRSA's Electronic Handbook to support the requested funding amount for this project. Floor plans/site plans must be drawn to scale including proposed exam rooms, waiting area, etc. Documents must include rough dimensions for major project components. Drawings should clearly identify the project components that are being proposed, as well as distinguishing improved space from unaffected space. Contact the assigned Project Officer for additional information.

### Program Specific Condition(s)

#### 1. Due Date: Within 120 Days of Budget Start Date

The award recipient must record a Notice of Federal Interest (NFI) in the appropriate official records of the jurisdiction in which the property is located. A notarized and recorded copy of the NFI must be submitted into HRSA's Electronic Handbook.

### Grant Specific Term(s)

1. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references

to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.

2. As required by the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, recipients must report information for each subaward of \$30,000 or more in Federal funds and executive total compensation, as outlined in Appendix A to 2 CFR Part 170. You are required to submit this information to the FFATA Subaward Reporting System (FSRS) at <https://www.fsr.gov/> by the end of the month following the month in which you awarded any subaward. The FFATA reporting requirements apply for the duration of the project period and so include all subsequent award actions to aforementioned HRSA grants and cooperative agreement awards (e.g., Type 2 (competing continuation), Type 5 (non-competing continuation), etc.). Subawards to individuals are exempt from these requirements. For more information, visit: <https://www.hrsa.gov/grants/ffata.html>.
3. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under “Expanded Authority,” as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See “Prior-Approval Requirements” in the DHHS Grants Policy Statement: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>.
4. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**

You may use your existing PMS username and password to check your organizations’ account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: <https://pmsapp.psc.gov/pms/app/userrequest>. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:

<http://pms.psc.gov/find-pms-liaison-accountant.html>

## Program Specific Term(s)

1. On September 15, 2010, the United States Department of Justice published revised Americans with Disabilities Act (ADA) regulations in the Federal Register that update and amend some of the provisions in the original 1991 ADA regulations (see <http://www.ada.gov/>). These changes include revised accessibility standards, called the 2010 Standards for Accessible Design (2010 Standards), which establish minimum criteria for accessibility in design and construction ([http://www.ada.gov/2010ADAstandards\\_index.htm](http://www.ada.gov/2010ADAstandards_index.htm)).
2. The award recipient must submit an annual Federal Financial Report with expense date for each consecutive twelve (12) month budget period. This report is submitted through the Payment Management System (PMS).
3. This Notice of Award (NoA) is issued to inform your organization of the awarding of Community Project Funding/Congressionally Directed Spending (CPF/CDS): Construction Projects (HRSA-23-117) funding. This funding is authorized by the FY 2023 Consolidated Appropriations Act (P.L. 117-328) for projects that relate to the construction and renovation (including equipment) of health care and other facilities. This award cannot be transferred to another entity.
4. Each budget has a Federal Percentage Share based upon the award amount and the total allowable costs. Grant funds can only be drawn down from the Payment Management System (PMS) as allowable costs are incurred. Unless otherwise authorized, draw down should be done in the same proportion as the grant is to total project costs in the approved budget. For example, for a project with a total allowable cost of \$100,000, and a federal contribution of \$75,000, the federal share is 75 percent. If \$100 in allowable costs are incurred, then \$75 of grant funds would be drawn down from PMS to pay this incurred cost, while the other \$25 will be paid by other sources of funds. The draw down percentage may be re-evaluated based on any modifications to the project that have been received from the grantee and approved by HRSA.
5. Equipment includes all moveable equipment that has a useful life of more than one year and a per-unit acquisition cost of \$5,000 or more, including information technology systems. Moveable equipment can be readily shifted from place to place without requiring a change in the utilities or structural characteristics of the space. Any equipment purchased with your CDS award must be procured, maintained, tracked, and disposed of in accordance with 45 CFR part 75.
6. Applicants that are NOT required to file a Notice of Federal Interest, still acknowledge with the receipt of the Notice of Award that the Federal interest exists in real property and equipment and will be maintained in accordance with 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR AWARDS AND SUBAWARDS TO INSTITUTIONS OF HIGHER EDUCATION, HOSPITALS, OTHER NONPROFIT ORGANIZATIONS, or 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS, as applicable. The recipient shall maintain adequate documentation to track and protect the Federal Interest. For real property, adequate documentation will also include communications between the lessor and the lessee related to protecting such interest, in accordance with the standard award terms and conditions. Such documentation should be

available for subsequent review by HRSA.

7. The preferred method for accomplishing construction development is by soliciting for competitive bids and then selecting the lowest responsive and responsible bid (where the contractor has adequately responded to the terms, conditions, and specification of the bid and has the capability to satisfactorily perform the contract). However, some award recipients may wish to accomplish construction using their own work force (force account). The award recipient must justify the use of force account by demonstrating that it would be more cost effective and that qualified personnel are available to accomplish the work. Consultation with the Project Officer is needed to determine if force account labor will be permitted.
8. If a Notice of Federal Interest (NFI) is required, HRSA's Federal interest is subordinate to all pre-existing mortgages or obligations recorded against the property. HRSA's Federal interest is also subordinate to loans and obligations identified in the application as sources of financing for the project. Future modifications and new mortgages and obligations will require prior approval.
9. You will need to submit a pre-award prior approval request to HRSA for review of any costs incurred up to 90 day prior to the Consolidated Appropriations Act, 2023 (P.L. 117-328; enacted December 29, 2022). Please refer to HRSA-23-117 for further guidance.
10. The award recipient does not have expanded authority under this program. Items that require prior approval from the awarding office as indicated in 45 CFR Part 75. HRSA has not waived cost-related or administrative prior approvals for recipients unless specifically stated on this Notice of Award] or 45 CFR Part 75, or the HHS Grants Policy Statement Prior-Approval Requirements, must be submitted in through the Electronic Handbook. Only responses to prior approval requests signed by the GMO and authorized under a Notice of Award are considered valid. award recipients who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the HRSA.  
HRSA requires award recipients to seek prior approval through the Electronic Handbook for: (a) all pre-award costs, (b) rebudgeting of funds between construction and nonconstruction work; (c) rebudgeting of project costs exceeding 25 percent of the total approved budget (inclusive of direct and indirect costs and Federal funds and required matching or cost sharing) for that budget period; (d) changes in project scope, which occurs when the recipient proposes to change (or changes) the objectives, aims, or purposes identified in the approved application, including changing location, changing the approved design under a construction grant, eliminating a primary care delivery site, or making budget changes that cause a project to change substantially from that which was approved. Approval of a prior approval request may be conditioned by new terms and conditions that must be met and lifted from the Notice of Award prior to implementing work.
11. An award recipient may acquire a variety of commercially available goods or services in connection with a grant-supported project or program. Award recipients may use their own procurement procedures that reflect applicable state and local laws and regulations, as long as those procedures conform to the following applicable U.S. Department of Health and Human Services (HHS) regulations: HHS regulations at 45 Code of Federal Regulations (CFR) 75 UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS. States must follow the requirements at Title 45 CFR 75. Generally, States must follow the same policies and procedures they use for procurements from non-Federal funds. Local and Tribal governments must follow the requirements at 45 CFR 75.
12. All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under the addition/additive alternative. Additional requirements found at 45 CFR § 75.307.
13. Although this NoA approves funds for the project(s) identified in the submitted application, HRSA may take action to withdraw the approval and funds for the project(s) if subsequent events lead HRSA to conclude that a project as originally proposed is ineligible or cannot be completed. Subsequent events could include, but are not limited to, non-compliance with the implementation of the project (such as excessive drawdown, improper procurement, conflicts of interests, etc.), significant changes to the location or physical scope of the project without prior approval, or the identification of previously undocumented environmental or historic preservation issues that lead the HRSA to conclude that the proposed project cannot be carried out consistent with the eligibility and program requirements. If this occurs, please contact the assigned Project Officer to discuss.

## Standard Term(s)

1. Your organization is required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding, per HRSA [Standard Terms](#) (unless otherwise specified on your Notice of Award), and [Legislative Mandates](#). The effectiveness of these policies, procedures, and controls is subject to audit.

## Reporting Requirement(s)

1. **Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.**

The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect

cumulative reporting within the project period of the document number. **All FFRs must be submitted through the Payment Management System (PMS).** Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal ([PMS Self-Service Web Portal](#)), or calling 877-614-5533.

**2. Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient must submit into HRSA's Electronic Handbook a final SF-424C budget page, budget justification, and equipment list (if applicable), for the completed project.

**3. Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient must scan and upload photographs, with brief descriptions, of the project prior to initiating work, during renovation/construction, and of the completed project, including exterior shots (front, rear of building), major rooms and examples of grant provided major equipment items, into the EHB for the approved project.

**4. Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient will submit documentation for the approved project certifying that the project have been completed in accordance with the previously provided certified documents and in accordance with all mandatory requirements imposed on+D3 federally-assisted projects by specific laws enacted by Congress, Presidential Executive Orders, or Departmental Policy, as well as all applicable program standards, State codes, and local codes and ordinances.

**5. Due Date: Semi-Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 30 days after end of reporting period.**

The award recipient will submit a semi-annual Progress Report for the approved project(s) into the HRSA Electronic Handbook (EHB) approximately every six months until the project is completed.

**6. Due Date: Within 90 Days of Project End Date**

The award recipient must submit within 90 days after the project end date the SF-428 (Tangible Personal Property Report) with the SF-428B (Final Report Attachment) and if applicable the SF-428S (Supplemental Sheet). These documents must be completed using the Electronic Handbooks (EHBs). The award recipient is required to report federally-owned property, acquired equipment with an acquisition cost of \$5,000 or more for which HRSA has reserved the right to transfer title, and residual unused supplies with total aggregate fair market value exceeding \$5,000. Records for equipment acquired with Federal funds shall be retained for three years after final disposal.

**Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.**

## Contacts

### NoA Email Address(es):

Name	Role	Email
Ava Elsaghir	Point of Contact	ava.elsaghir@nashville.gov
Velvet Hunter	Authorizing Official	velvet.hunter@nashville.gov
Ava Elsaghir	Program Director	ava.elsaghir@nashville.gov

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

**SIGNATURE PAGE  
FOR  
GRANT NO. CE152421**

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set their signatures.

**METROPOLITAN GOVERNMENT OF  
NASHVILLE AND DAVIDSON COUNTY**

Velvet Hunter *VH*  
\_\_\_\_\_  
General Services Department

9/18/2023 | 9:06 AM CDT  
Date

APPROVED AS TO AVAILABILITY  
OF FUNDS:

Kelly Flannery  
\_\_\_\_\_  
Kelly Flannery, Director of Finance  
Department of Finance

9/20/2023 | 1:12 PM CDT  
Date

APPROVED AS TO RISK AND INSURANCE:

Balagun Cobb  
\_\_\_\_\_  
Director of Insurance

9/20/2023 | 2:13 PM CDT  
Date

APPROVED AS TO FORM AND  
LEGALITY:

Courtney Mohan  
\_\_\_\_\_  
Metropolitan Attorney

9/20/2023 | 1:33 PM CDT  
Date

FILED:

\_\_\_\_\_  
\_\_\_\_\_  
Metropolitan Clerk

Date

**Certificate Of Completion**

Envelope Id: 22978E67C6174E2DA8F2B79FD132A43A	Status: Completed
Subject: Complete with DocuSign: General Services Community Congressionally Directed Construction Projec...	
Source Envelope:	
Document Pages: 11	Signatures: 6
Certificate Pages: 15	Initials: 1
AutoNav: Enabled	Envelope Originator:
Envelope Stamping: Enabled	Juanita Paulson
Time Zone: (UTC-06:00) Central Time (US & Canada)	730 2nd Ave. South 1st Floor
	Nashville, TN 37219
	Juanita.Paulsen@nashville.gov
	IP Address: 170.190.198.185

**Record Tracking**

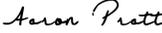
Status: Original	Holder: Juanita Paulson	Location: DocuSign
9/20/2023 11:58:39 AM	Juanita.Paulsen@nashville.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Metropolitan Government of Nashville and Davidson County	Location: DocuSign

**Signer Events**

Signer Events	Signature	Timestamp
Elizabeth Jefferson		Sent: 9/20/2023 12:07:11 PM
Elizabeth.Jefferson@nashville.gov		Viewed: 9/20/2023 1:08:14 PM
Security Level: Email, Account Authentication (None)		Signed: 9/20/2023 1:08:30 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.190	

**Electronic Record and Signature Disclosure:**

Accepted: 9/20/2023 1:08:14 PM  
ID: 3e4e7027-531b-48fe-8db1-22654bb508d6

Aaron Pratt		Sent: 9/20/2023 1:08:31 PM
Aaron.Pratt@nashville.gov		Viewed: 9/20/2023 1:09:30 PM
Security Level: Email, Account Authentication (None)		Signed: 9/20/2023 1:09:34 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.185	

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

Kelly Flannery		Sent: 9/20/2023 1:09:36 PM
Kelly.Flannery@nashville.gov		Viewed: 9/20/2023 1:12:07 PM
Security Level: Email, Account Authentication (None)		Signed: 9/20/2023 1:12:22 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.100	

**Electronic Record and Signature Disclosure:**

Accepted: 9/20/2023 1:12:07 PM  
ID: 4fcf9811-6d9a-4617-b35c-a3152bc6e6be

Courtney Mohan		Sent: 9/20/2023 1:12:24 PM
Courtney.Mohan@nashville.gov		Viewed: 9/20/2023 1:18:06 PM
Security Level: Email, Account Authentication (None)		Signed: 9/20/2023 1:33:15 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.185	

**Electronic Record and Signature Disclosure:**

Signer Events	Signature	Timestamp
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Accepted: 9/20/2023 1:18:06 PM  
ID: b94a16e2-e6e8-4af0-b6d5-6f2fc0b7106

Balogun Cobb  
balogun.cobb@nashville.gov  
Security Level: Email, Account Authentication (None)

*Balogun Cobb*

Sent: 9/20/2023 1:33:17 PM  
Viewed: 9/20/2023 2:13:00 PM  
Signed: 9/20/2023 2:13:09 PM

Signature Adoption: Pre-selected Style  
Using IP Address: 170.190.198.185

**Electronic Record and Signature Disclosure:**

Accepted: 9/20/2023 2:13:00 PM  
ID: 83de0047-0cb7-4c9e-9aba-5591fe3e361a

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Danielle Godin  
Danielle.Godin@nashville.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

Sent: 9/20/2023 2:13:11 PM  
Viewed: 9/20/2023 2:58:36 PM

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

Sally Palmer  
sally.palmer@nashville.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

Sent: 9/20/2023 2:13:13 PM  
Viewed: 9/20/2023 2:15:26 PM

**Electronic Record and Signature Disclosure:**

Accepted: 9/20/2023 12:13:09 PM  
ID: 0de4d6cd-ba44-4550-a8e1-044c4e4a107d

Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	9/20/2023 12:07:11 PM
Certified Delivered	Security Checked	9/20/2023 2:13:00 PM
Signing Complete	Security Checked	9/20/2023 2:13:09 PM
Completed	Security Checked	9/20/2023 2:13:13 PM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure
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