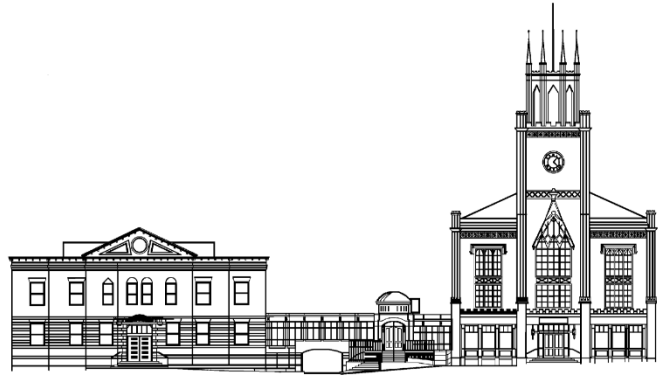




COMMITTEE ON COMMUNITY IMPROVEMENT

October 3, 2023 at 5:00 PM

Aldermanic Chambers, City Hall (3rd Floor)

Members: Aldermen Stewart, Trisciani, E. Sapienza, Cavanaugh, Heath

REVISED AGENDA

The Chairman calls the meeting to order.

The Clerk calls the roll.

1. Summary of abatement requests submitted by Fred McNeill, Chief Engineer.
Ladies and Gentlemen, what is your pleasure?
2. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$167,000 for CIP 210523 Healthcare for the Homeless.
Ladies and Gentlemen, what is your pleasure?
3. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$10,000 for CIP 210623 Public Health Preparedness.
Ladies and Gentlemen, what is your pleasure?
4. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$65,662.94 for CIP 211723 Opioid Settlement Trust.
Ladies and Gentlemen, what is your pleasure?
5. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$12,566 for CIP 212024 Bridge Access Program CMC HHC FY23.
Ladies and Gentlemen, what is your pleasure?

6. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$340,953 for CIP 411024 Substance Abuse Reduction Initiative.
Ladies and Gentlemen, what is your pleasure?
7. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$338,000 for CIP 411124 City's EOC Renovations.
Ladies and Gentlemen, what is your pleasure?
8. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$2,000 for CIP 411224 Hazmat Collaborative Allocation.
Ladies and Gentlemen, what is your pleasure?
9. Amending Resolution and Budget Authorization providing for the acceptance, transfer, and expenditure of funds in the amount of \$243,115 for CIP 510712 South Manchester Rail Trail.
Ladies and Gentlemen, what is your pleasure?
10. Amending Resolution and Budget Authorization providing for the acceptance and expenditure of funds in the amount of \$100,000 for CIP 611023 2022 Lead-Based Paint Hazard Reduction Grant Program.
Ladies and Gentlemen, what is your pleasure?
11. Communication from Mayor Craig requesting that CIP Project 811722 Southern NH Build Back Better Regional Challenge be extended from December 31, 2022 to September 30, 2027, and that the Manchester Economic Development Office be named the Administering Department for the project.
Ladies and Gentlemen, what is your pleasure?
12. Communication from Adrienne Beloin, Director of Housing Stability, requesting that the following CIP Projects be revised to change the administering department from the Fire Department to the Department of Housing Stability:
 - CIP 212023 Gatehouse TST Initiative
 - CIP 410322 ARPA - Director of Homelessness Initiatives
 - CIP 610024 ARPA - Winter Emergency Shelter
 - CIP 611423 ARPA - Homelessness Response & Emergency Shelter Operations
 - CIP 810324 ARPA - Coordinator**Ladies and Gentlemen, what is your pleasure?**
13. Communication from Kevin Kincaid, Security Manager, requesting permission to apply for a Homeland Security Grant in the amount of \$750,000 to upgrade the City's access control systems and security cameras.
Ladies and Gentlemen, what is your pleasure?

14. Communication from Jeff Belanger, Planning and Community Development Director, regarding a request from the owner of 23-25 Arlington Street for the subordination of a City lien placed upon the property totaling \$76,790.
Ladies and Gentlemen, what is your pleasure?
15. Communication from the Planning and Community Development Director regarding a request from the owner of 329 Douglas Street for the subordination of a City lien placed upon the property totaling \$20,000.
Ladies and Gentlemen, what is your pleasure?
16. Communication from Catherine Harlan Naczas, Executive Director of the Manchester Housing and Redevelopment Authority, requesting \$50,000 in CIP funds to assist in the clearing, preparation, purchase, and installation of a fence on a portion of the property line between the Kelley Falls Apartments and Rimmon Acres.
Ladies and Gentlemen, what is your pleasure?
17. Communication from Bryce Kaw-uh, Chair, Manchester Planning Board, requesting one-time funding in the amount of \$150,000 to hire a consultant to draft an updated Bicycle Master Plan.
(Note: This item was referred to the Committee on Community Improvement by the Board of Mayor and Aldermen at their meeting held on September 5, 2023; additional communication from the Planning and Community Development Director is attached.)
Ladies and Gentlemen, what is your pleasure?

If there is no further business, a motion is in order to adjourn.

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan
Andre Parent

CITY OF MANCHESTER
Department of Public Works
Environmental Protection Division

Memo

Date: 9/12/2023 23-145
To: CIP Committee
Cc: Lisa Hynes – EPD
Matthew Normand – City Clerks Office
From: Frederick McNeill 
RE: EPD Abatement Requests

The attached table summarizes the 26 sewer abatements reviewed by the Highway Commission at their monthly meeting on September 11, 2023.

Backup documentation for these sewer abatement requests is on file with the City Clerk's office. The electronic version of this request will be forwarded to you as well as the City Clerk's office.

Please let me know if you need any additional information.

Summary of Abatement Requests
 September 06, 2023 to Highway Commission
 September 13, 2023 to CIP/City Clerk

Number	Customer	Acct #	Customer	Property Address	Abatement Rec'd Date	Request Reason	EPD Recommendation	Justification	Abatement Amount	Highway Recommendation
1	154117-67418	Campbell	Amory Street, 412-414	05/08/23	Toilet leak	Deny	below the 250% threshold -195%		0.00	Deny
2	54703-38572	Hooper	Flint Street, 38	05/09/23	hot water tank leak	Grant	above 250% threshold - 403%		399.50	Abate
3	189481-49292	Maisons de la Monument	Donald Street, 25	05/30/23	Toilet leak	Grant	above 250% threshold - 360%		386.75	Abate
4	64329-45272	Petty	Hazelton Court, 10	06/02/23	Toilet leak	Grant	above 250% threshold - 432%		310.25	Abate
5	25425-17150	Thomas	Shasta Street, 455	06/02/23	Toilet leak	Grant	above 250% threshold - 1000%		191.25	Abate
6	187613-67108	Cream Puff Properties	West Hancock Street, 251-253	06/07/23	Toilet leaks	Deny	Abatement granted October 2019		0.00	Deny
7	189361-30402	Bishop	Fremont Street, 284	06/09/23	Toilet leak	Grant	above 250% threshold - 981%		599.25	Abate
8	205943-15052	Suni, LLC	Mammoth Road, 247	06/10/23	Toilet leak	Grant	above 250% threshold - 1135%		748.00	Abate
9	90697-67058	St. Anselm Abbey	Ferry Street	06/20/23	Toilet leak	Grant	above 250% threshold - 400%		1,211.25	Abate
10	202581-67660	Waweru	Amherst Street, 396-398	06/22/23	Toilet leak	Grant	above 250% threshold - 346%		522.75	Abate
11	205051-11782	Aananda 2, LLC	Dubuque Street, 294	06/28/23	Toilet leak	Deny	Abatement received past the 90 days		0.00	Deny
12	163807-40072	Alford	Dyson Street, 47	06/28/23	Toilet leak	Deny	Abatement received past the 90 days		0.00	Deny
13	203017-68434	Belasquez	South Main Street, 508-510	06/28/23	Boiler pressure switch	Grant	above 250% threshold - 362%		646.00	Abate
14	184181-44680	McQuade	South Mammoth Road, 225	06/28/23	Toilet leak	Grant	above 250% threshold - 658%		450.50	Abate
15	181745-6208	300 Hanover Street, LLC	Hanover Street, 300	07/10/23	Toilet leak	Grant	above 250% threshold - 759%		896.75	Abate
16	158429-202314	1650-1652 Front St. Condo Assoc.	Front Street, 1650-1652	07/12/23	Pressure reducing valve/Toilet fill tank	Grant	above 250% threshold - 398%		544.00	Abate
17	184213-67274	Jubrey	Reed Street, 176-178	07/19/23	Toilet leak	Deny	below the 250% threshold - 213%		0.00	Deny
18	193751-33014	Cox	Calef Road, 657	07/25/23	Toilet leak	Grant	above 250% threshold - 319%		242.25	Abate
19	158305-68154	Henault	Warner Street, 34-36	07/25/23	Toilet leak	Grant	above 250% threshold - 356%		446.25	Abate
20	180461-31742	Munnis	Beaver Street, 163	07/27/23	Toilet leak	Grant	above 250% threshold - 354%		140.25	Abate
21	182963-10780	Eric Lavoie	Hevey Street, 503	08/01/23	Toilet leak	Grant	above 250% threshold - 700%		1,275.00	Abate
22	190087-48158	Lowell	Home Avenue, 3	08/07/23	Toilet and Faucet leak	Deny	below the 250% threshold -248%		0.00	Deny
23	183563-9410	Verani	Spruce Street, 447	08/09/23	Shower/Toilet leak	Grant	above 250% threshold - 269%		488.75	Abate
24	483-354	Jacqueline P Guay Rev TR	Pearl Street, 151	08/14/23	Toilet leak	Grant	above 250% threshold - 288%		535.50	Abate
25	1527-1052	Jacqueline P Guay Rev TR	Union Street, 605	08/14/23	Toilet leak	Grant	above 250% threshold - 319%		633.25	Abate
26	164699-356	Bartlett	Pearl Street, 145	08/22/23	Toilet leak	Grant	above 250% threshold - 835%		1,623.50	Abate
Total Abatements									\$12,291.00	

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 5/8/2023

Customer Name: Campbell Account #: 154117-67418
Combine Billing

Property Address: 412-414 Amory Street

Reason for Request: Toilet Leak

Service Dates: 1/4/23-4/28/23 Bill Date: 5/17/2023

Consumption: 287 ccf % Increase from Average: 195%

Average Consumption: 147 ccf Based on: 5 Year average

Difference: 140 ccf

Other Comments: Previous 2 quarters were estimates

EPD Recommendation: Deny - Does not exceed the 250% threshold

Deny Jim

Abatement Total: ccf at \$ 4.25 \$ -

Highway Recommendation: DENY Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Daniel Campbell

Address: 1 Laurel Dr

Bedford (City)

NH (State)

03110 (Unit)
(Zip)

Email address: ritefinish4u@yahoo.com

Phone Number: (603) 493-5792

Customer Account Number: 154117-67418

Address of Property for which Abatement is Requested:

412-414 Amory St

Manchester (City)

NH (State)

03102 (Unit)
(Zip)

Billing Period: April 2023

Amount of Abatement Request: 760.75

Reason for Abatement Request: leaky toilet & water meter was replaced

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☐ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 5/9/2023

Customer Name: Hooper Account #: 54703-38572
Combine Billing

Property Address: 38 Flint Street

Reason for Request: Hot water tank leak

Service Dates: 12/28/22-3/29/23 Bill Date: 5/10/2023

Consumption: 125 ccf % Increase from Average: 403%

Average Consumption: 31 ccf Based on: 5 Year average

Difference: 94 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

_____ *Approve Jm*

Abatement Total: 94 ccf at \$ 4.25 \$ 399.50

Highway Recommendation: ABATE Date: 9/11/23

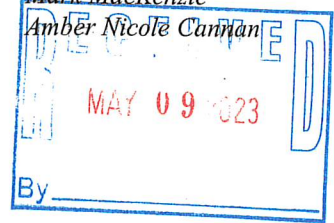
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannon



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: RONALD HOOPER

Address: 38 FLINT ST. (PO Box 5783 - Man 03108)
MANCHESTER (City) NH (State) 03103 (Unit) (Zip)

Email address: arleen826@comcast.net

Phone Number: 603 674-0705

Customer Account Number: 54703 - 38572

Address of Property for which Abatement is Requested:

38 FLINT STREET (Street)
MANCHESTER (City) NH (State) 03103 (Unit) (Zip)

Billing Period: 12-28-22 3-29-23

Amount of Abatement Request: 534.10

Reason for Abatement Request: Hot Water Tank leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Ronald Hooper
(Signature)

4-28-23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 5/30/2023

Customer Name: Maisons de la Monument Assoc Account #: 189481-49292
Combine Billing

Property Address: 25 Donald Street

Reason for Request: Toilet Leak

Service Dates: 1/4/23-4/4/23 Bill Date: 5/17/2023

Consumption: 126 ccf % Increase from Average: 360%

Average Consumption: 35 ccf Based on: 14 Qtr Average
Limited history

Difference: 91 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 91 ccf at \$ 4.25 \$ 386.75

Highway Recommendation: ABATE Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Maisons de la Monument Juliet Ramshaw-Treasure
Jennifer Pearl-Secretary

Address: 25 Donald Street
Manchester (City) NH (State) 03102 (Unit)
(Zip)

Email address: jrramshaw@gmail.com - Juliet
jenpearl127@gmail.com - Jennifer

Phone Number: 603-760-8987 - Juliet
603-980-0731 - Jennifer

Customer Account Number: 189481-49292

Address of Property for which Abatement is Requested:
25 Donald Street
Manchester (City) NH (State) 03102 (Unit)
(Zip) (B) leak occurred here

Billing Period: 01/04/2023 to 04/04/2023

Amount of Abatement Request: \$340.00

Reason for Abatement Request: The previous owners of unit B moved out
& left a toilet leak. The new owners moved in and repaired
the leak (please see attached receipt for part purchased for repair).

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

NA

NA

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ____ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Jennifer Pearl
(Signature)

5/30/23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/2/2023

Customer Name: Petty Account #: 64329-45272
Combine Billing

Property Address: 10 Hazelton Court

Reason for Request: Toilet Leak

Service Dates: 12/20/22-3/20/23 Bill Date: 5/3/2023

Consumption: 95 ccf % Increase from Average: 432%

Average Consumption: 22 ccf Based on: 20 Qtr Average
Limited history

Difference: 73 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve JFM

Abatement Total: 73 ccf at \$ 4.25 \$ 310.25

Highway Recommendation: ABATE Date: 9/11/23

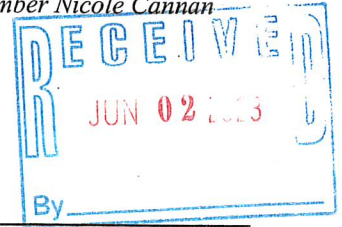
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: RICHARD D. PETTY JR.; MARY E. PETTY

Address: 149 SHEPHERD ROAD

MANCHESTER (City) NEW HAMPSHIRE (State) 03104 (Unit)
(Zip)

Email address: rpetty3869@aol.com

Phone Number: (603) 866-3216

Customer Account Number: 64329-45272

Address of Property for which Abatement is Requested:

10 HAZARDON COURT (Street)
MANCHESTER (City) NEW HAMPSHIRE (State) 03104 (Unit)
(Zip)

Billing Period: 12-20-22 - 03-20-23

Amount of Abatement Request: \$ 314.50

Reason for Abatement Request: FAULTY TOILET; TOILET "OVERFLOW"
RUNNING, toilet valve into overflow

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

☐ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) Richard D. Petty
Mary E. Petty

05/12/2023
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/2/2023

Customer Name: Thomas

Account #: 25425-17150
Combine Billing

Property Address: 455 Shasta Street

Reason for
Request: Toilet leak

Service Dates: 2/21/23 - 5/22/23

Bill Date: To be Billed

Consumption: 50 ccf

% Increase
from Average: 1000%

Average
Consumption: 5 ccf

Based on: 5 Year average

Difference: 45 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approved Jm

Abatement Total: 45 ccf at \$ 4.25 \$ 191.25

Highway
Recommendation: ABATE

Date: 9/11/23

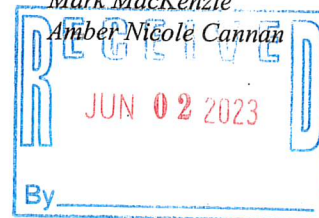
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: William A Thomas

Address: 455 Shasta Street (Street)
Manchester (City) NH (State) 03103 (Unit)
(Zip)

Email address: gprosper@tulley.com

Phone Number: 603.703.8508

Customer Account Number: 25425-17150

Address of Property for which Abatement is Requested:
455 Shasta St (Street)
Manchester (City) NH (State) 03103 (Unit)
(Zip)

Billing Period: 2-21-23 - 5-22-23

Amount of Abatement Request: _____

Reason for Abatement Request: Toilet Broke and repair could not come til
after holiday

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

Bathroom Toilet

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) Gloria A Prosper (Date) 5/25/2023
Power of attorney for my
Dad William Thomas

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 6/7/2023

Customer Name: Cream Puff Properties Account #: 187613-67108
Combine Billing

Property Address: 251-253 W Hancock Street

Reason for Request: Toilet Leaks

Service Dates: 12/28/22-3/29/23 Bill Date: 5/10/2023

Consumption: 627 ccf % Increase from Average: 369%

Average Consumption: 170 ccf Based on: 5 year average
Limited history used previous owner

Difference: 457 ccf

Other Comments: _____

EPD
Recommendation: Deny - Abatement granted October 2019

Deny Jm

Abatement Total: _____ ccf at \$ _____ \$ _____ -

Highway Recommendation: DENY Date: 9/11/23

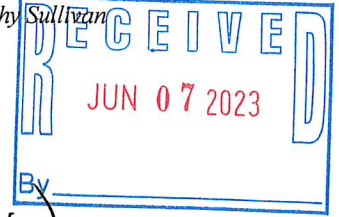
Kevin A. Sheppard, P.E.
Public Works Director

Timothy J. Clougherty
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Patrick Robinson
James Burkush
Trixie Dysart
Armand Forest
Kathy Sullivan



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Robert Loiselle (Cream Puff Properties)

Address: 339 main ST #1A
(Street)

Nashua (City) NH (State) 03060 (Unit)
(Zip)

Phone Number: 508-717-4206

Customer Account Number: 187613-67108

Address of Property for which Abatement is Requested: 251-253 W Hancock St
(Street)

Manchester (City) NH (State) 03102 (Unit)
(Zip)

Billing Period: 12/28/22 - 3/29/23

Amount of Abatement Request: \$2681

Reason for Abatement Request: We had two toilets that were constantly running/leaking & our tenants didn't let us know. We fixed the issue as soon as we received this bill.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ____ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

[Signature]
(Signature)

6/7/23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 6/9/2023

Customer Name: Bishop Account #: 189361-30402
Combine Billing

Property Address: 284 Fremont Street

Reason for Request: Toilet Leak

Service Dates: 12/5/22-3/6/23 Bill Date: 4/19/2023

Consumption: 157 ccf % Increase from Average: 981%

Average Consumption: 16 ccf Based on: 17 Qtr average
Limited history

Difference: 141 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds 250% threshold

Approve Jm

Abatement Total: 141 ccf at \$ 4.25 \$ 599.25

Highway Recommendation: ABATE Date: 9/11/23

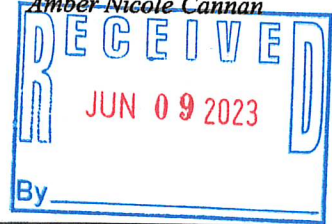
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Adam Bishop

Address: 50 Liberty Street
Manchester (City) NH (State) 03104 (Unit)
(Zip)

Email address: Adam C Bishop13@gmail.com

Phone Number: 603-440-5633

Customer Account Number: 189361 - 30402

Address of Property for which Abatement is Requested:

284 Fremont Street
Manchester (City) NH (State) 03104 (Unit)
(Zip)

Billing Period: 12-5-22 - 3-6-23

Amount of Abatement Request: \$ 1,014.13

Reason for Abatement Request: toilet leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

Continual running water into toilet - no puddles or
Water Damage

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
Yes No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) [Signature] (Date) 6/6/23

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/10/2023

Customer Name: Suni, LLC, Liriano Account #: 205943-15052
Combine Billing

Property Address: 247 Mammoth Road

Reason for Request: Toilet Leak

Service Dates: 11/29/22-2/27/23 Bill Date: 4/12/2023

Consumption: 193 ccf % Increase from Average: 1135%

Average Consumption: 17 ccf Based on: 5 year average
Limited history used previous owner

Difference: 176 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds 250% threshold

Approve Jm

Abatement Total: 176 ccf at \$ 4.25 \$ 748.00

Highway Recommendation: ABATE Date: 9/11/23

Rec'd 6/10/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannon

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Smilda Liriana

Address: 23 Brooklyn Ave.
(Street)
Manchester N.H.
(City) (State) (Unit)
(Zip) 03103

Email address: Susul28@aol.com

Phone Number: (917) 232-9645

Customer Account Number: 205943-15052

Address of Property for which Abatement is Requested:
247 Mammoth Road
(Street)
Manchester N.H.
(City) (State) (Unit)
(Zip) 03109 1

Billing Period: 11-29-22 2-27-23

Amount of Abatement Request: \$803.25

Reason for Abatement Request: Toilet Leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ____ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Smilda Liriana
(Signature) 06/10/23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/20/2023

Customer Name: St. Anselm Abbey, c/o St. Raphael Parish

Account #: 90697-67058

Combine Billing

Property Address: Ferry Street

Reason for
Request: Toilet leak

Service Dates: 12/28/22-3/29/23

Bill Date: 5/10/2023

Consumption: 380 ccf

% Increase
from Average: 400%

Average
Consumption: 95 ccf

Based on: 5 Year average

Difference: 285 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 285 ccf at \$ 4.25 \$ 1,211.25

Highway
Recommendation: ABATE

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER
Sewer Fee Abatement Request Form



Name: St. Anselm Abbey 90 St. Raphael Parish

Address: 103 Walker Street
Manchester (City) NH (State) 03102 (Unit)
(Zip)

Email address: SRP@st-raphael-parish.org

Phone Number: 603 623-2604

Customer Account Number: 90697-67058

Address of Property for which Abatement is Requested:

Ferry St.
Manchester (City) NH (State) 03102 (Unit)
(Zip)

Billing Period: 12/28/2022 - 3/29/2023

Amount of Abatement Request: 270 x 4.25 = \$1147.50

✓ Reason for Abatement Request: Runaway flush valve for
men's rest room in church hall

✓ If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

The water on church hall floor was
vacuumed with a power vac apparatus
two were used.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Raymond P. Clement Facilities Director 6/14/23
(Signature) (Date)

300 Winston Street • Manchester, New Hampshire 03103 • (603) 624-6595 • FAX: (603) 628-6234
E-mail: EPD@manchesternh.gov • Website: www.manchesternh.gov

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/22/2023

Customer Name: Waweru

Account #: 202581-67660
Combine Billing

Property Address: 396-398 Amherst Street

Reason for Request: Toilet leak

Service Dates: 1/30/23-5/9/23

Bill Date: 6/14/2023

Consumption: 173 ccf

% Increase from Average: 346%

Average Consumption: 50 ccf

Based on: 5 Year average
Limited history
used previous owner

Difference: 123 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 123 ccf at \$ 4.25 \$ 522.75

Highway Recommendation: ABATE

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: JOSEPH WAWERU

Address: 4 SHORELINE DRIVE
HUDSON (Street) NH (Unit) 03051
(City) (State) (Zip)

Email address: JOE - WAWERU @ HOTMAIL.COM

Phone Number: 603 943 4105

Customer Account Number: 202581-67660

Address of Property for which Abatement is Requested:
396 AMHERST ST
MANCHESTER (Street) NH (Unit) 03104
(City) (State) (Zip)

Billing Period: 1/30/2023 THROUGH 5/9/2023

Amount of Abatement Request: 437.75

Reason for Abatement Request: LEAKY TOILET
REPLACED VIA ATTACHED RECEIPT

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

N/A

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

Yes No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

Joseph Waweru

(Date)

6/22/2023

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/28/2023

Customer Name: Aananda 2 LLC, C/O InterTech RE

Account #: 205051-11782
Combine Billing

Property Address: 294 Dubuque Street

Reason for Request: Toilet leak

Service Dates: 10/11/22-1/10/23

Bill Date: 3/1/2023

Consumption: 162 ccf % Increase from Average: 261%

Average Consumption: 62 ccf Based on: 5 Year average

Difference: 100 ccf Limited history used prior owner

Other Comments: _____

EPD Recommendation: Deny - Abatement received past the 90 days

Deny Jm

Abatement Total: ccf at \$ 3.90 \$ -

Highway Recommendation: DENY

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gaizoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER

Sewer Fee Abatement Request Form (property mgmt co)

Name: Aananda 2 LLC, c/o InterTech Real Estate

Address: 294 Derry Road

Hudson (City) NH (State) 03051 (Unit)
(Zip)

Email address: tre@intertechrealestate.com (office email)

Phone Number: (603) 801-0064 Don Hook, property manager

Customer Account Number: 205051-11782

Address of Property for which Abatement is Requested:

294 Dubuque Street

Manchester (City) NH (State) 03102 (Unit)
(Zip)

Billing Period: 10/11/22 - 1/10/23

Amount of Abatement Request: \$ 568

Reason for Abatement Request: Rebuild toilet + toilet repairs (see attached invoices)

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Don Hook
dotloop verified
06/28/23 10:44 AM EDT
ROZW-ZSLL-BLOX-1VQA

06/28/2023
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 6/28/2023

Customer Name: Alford, C/O InterTech RE Account #: 163807-40072
Combine Billing

Property Address: 47 Dyson Street

Reason for Request: Toilet leak

Service Dates: 10/11/22-1/10/23 Bill Date: 3/1/2023

Consumption: 140 ccf % Increase from Average: 157%

Average Consumption: 89 ccf Based on: 5 Year average

Difference: 51 ccf

Other Comments: _____

EPD Recommendation: Deny - Abatement received past the 90 days
Previous abatement received January 2021
Does not exceed the 250% threshold *Deny JTM*

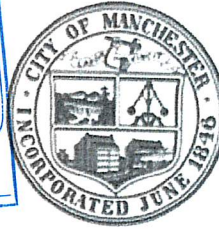
Abatement Total: _____ ccf at \$ 3.90 \$ _____ -

Highway Recommendation: DENY Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: C/o InterTech Real Estate LLC (property mgmt co.)

Address: 294 Derry Road

Hudson

(Street)

NH

(State)

03051

(Unit)

(Zip)

Email address: tre@intertechrealestate.com

Phone Number: (603) 260-7485 Office (603) 801-0064 Don

Customer Account Number: 163807-40077

Address of Property for which Abatement is Requested:

47 Dyson Street

(Street)

Manchester

(City)

NH

(State)

03102

(Unit)

(Zip)

Billing Period: 10/11/22 - 1/10/23

Amount of Abatement Request: \$300

Reason for Abatement Request: We replaced toilet valve. See attached invoice

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
 Yes X No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances and all necessary City permits have been obtained and approved.

Don Hook

dotloop verified
06/28/23 12:03 PM EDT
ZSMB-STZW-NV1-3NAS

06/28/2023

(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 6/28/2023

Customer Name: Belasquez, C/O InterTech RE Account #: 203017-68434
Combine Billing

Property Address: 508-510 South Main Street

Reason for Request: Boiler pressure switch

Service Dates: 12/28/22-3/29/23 Bill Date: 5/10/2023

Consumption: 210 ccf % Increase from Average: 362%

Average Consumption: 58 ccf Based on: 5 Year average
Limited history used previous owners

Difference: 152 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 152 ccf at \$ 4.25 \$ 646.00

Highway Recommendation: ABATE Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

(Property mgmt co)

Name: Rodrigo Eduard Belasquez 9/0 InterTech Real Estate

Address: 294 Derry Road

Hudson (City) NH (State) 03051 (Unit)
(Zip)

Email address: jre@intertechrealestate.com

Phone Number: (603) 801-0064 Don (603) 260-7485 Office

Customer Account Number: 203017-68434

Address of Property for which Abatement is Requested:

508-510 5 Main Street
Manchester (City) NH (State) (Unit)
(Zip)

Billing Period: 12/28/22 - 3/29/23

Amount of Abatement Request: \$ 675.75

Reason for Abatement Request: Boiler repair to replace pressure switch + eliminate water feed. (REM Contracting did repair - see attached invoice) REM accidentally put incorrect # on invoice for address. Should be 508 + REM put 180.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
Yes X No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Don Hook
dotloop verified
06/28/23 11:09 AM EDT
OQ0H-AHJU-BLOC-WNGZ

06/28/2023
(Date)

✓

**CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation**

Date Received: 6/28/2023

Customer Name: McQuade

Account #: 184181-44680
Combine Billing

Property Address: 225 South Mammoth Road

Reason for
Request: Toilet leak

Service Dates: 2/27/2023-6/1/23

Bill Date: To be billed

Consumption: 125 ccf

% Increase
from Average: 658%

Average
Consumption: 19 ccf

Based on: 5 Year average

Difference: 106 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jfm

Abatement Total: 106 ccf at \$ 4.25 \$ 450.50

Highway
Recommendation: ABATE

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Tyler McQuade

Address: 225 S. Mammoth Road #1
(Street) (Unit)
Manchester NH 03109
(City) (State) (Zip)

Email address: tyler.mcquade89@gmail.com

Phone Number: 603-361-4589

Customer Account Number: 184181-44680

Address of Property for which Abatement is Requested:
225 S. Mammoth Road #2 (tenant)
(Street) (Unit)
Manchester NH 03109
(City) (State) (Zip)

Billing Period: 2/27/2023 - 06/01/2023

Amount of Abatement Request: \$429.25

Reason for Abatement Request: My tenant never made me aware that their toilet was constantly running. I would have had the problem fixed right away if I knew about it.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ____ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Tyler McQuade
(Signature)

6/26/2023
(Date)

✓

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/10/2023

Customer Name: 300 Hanover Street, LLC Account #: 181745-6208
Combine Billing

Property Address: 300 Hanover Street

Reason for Request: Toilet Leak

Service Dates: 1/30/23-5/1/23 Bill Date: 6/14/2023

Consumption: 243 ccf % Increase from Average: 759%

Average Consumption: 32 ccf Based on: 5 Year average

Difference: 211 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approve JPM

Abatement Total: 211 ccf at \$ 4.25 \$ 896.75

Highway Recommendation: ABATE Date: 9/11/23

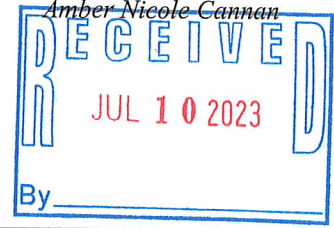
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: 300 Hanover Street, LLC

Address: 45 Lafayette Road #143
(Street) (Unit)

(City) (State) (Zip)

Email address: 300hanover@comcast.net

Phone Number: (603) 234-8938

Customer Account Number: 181745-6208

Address of Property for which Abatement is Requested:
300 Hanover Street
(Street) (Unit)

Manchester NH 03104
(City) (State) (Zip)

Billing Period: 1/30/23 to 5/1/23

Amount of Abatement Request: \$1,272 calculated as follows: Current invoice \$1,724 less average of last 3 three invoices \$452 (380, 375, 600)

Reason for Abatement Request: Toilet Leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

N/A

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

N/A Yes N/A No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/12/2023

Customer Name: 1650-1652 Front St Condo Assoc - RAI

Account #: 158429-202314
Combine Billing

Property Address: 1650-1652 Front Street

Reason for
Request: Pressure reducing valve/ Toilet fill tank

Service Dates: 1/4/23-4/4/23

Bill Date: 5/17/2023

Consumption: 171 ccf % Increase
from Average: 398%

Average
Consumption: 43 ccf Based on: 5 Year average

Difference: 128 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 128 ccf at \$ 4.25 \$ 544.00

Highway
Recommendation: ABATE

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: ASHISH RAI

Address: 1650 FRONT ST.
(Street)
MANCHESTER N.H. 03102
(City) (State) (Zip)

Email address: gshishrai@gmail.com

Phone Number: 603-233-9448

Customer Account Number: 158429-202314

Address of Property for which Abatement is Requested:

1650 FRONT ST
(Street)
MANCHESTER N.H. 03102
(City) (State) (Zip)

Billing Period: 1-4-23 to 4-4-23

Amount of Abatement Request: 480.25 DOLLARS

Reason for Abatement Request: PRESSUR REDUCE VALVE and
Toilet Fill Tank Replaced.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☐ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/19/2023

Customer Name: Jubrey

Account #: 184213-67274
Combine Billing

Property Address: 176-178 Reed Street

Reason for
Request: Toilet Leak

Service Dates: 1/10/23-4/10/23

Bill Date: 5/24/2023

Consumption: 83 ccf

% Increase
from Average: 213%

Average
Consumption: 39 ccf

Based on: 5 Year average

Difference: 44 ccf

Other Comments: _____

EPD
Recommendation: Deny - Does not exceed the 250% threshold

Deny Jm

Abatement Total: _____ ccf at \$ 4.25 \$ _____ -

Highway
Recommendation: DENY

Date: 9/11/23

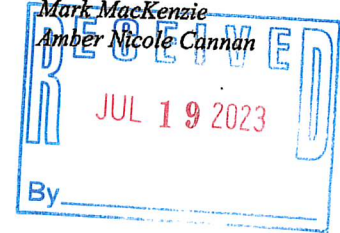
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Tobey Dubrey
Address: 178 Reed St
(Street) Manchester (City) NH (State) 03102 (Unit) (Zip)

Email address: tobey145@gmail.com

Phone Number: 603 682 0690

Customer Account Number: 184213-47274

Address of Property for which Abatement is Requested:
178 Reed St (Street) 2nd flr (Unit)
Manchester (City) NH (State) 03102 (Zip)

Billing Period: 1-10-23 - 4-10-23

Amount of Abatement Request: \$195.50

Reason for Abatement Request: my water bill was \$400 higher than normal.
I realized my toilet was leaking. unfortunately I threw out the
receipts before I contacted you here.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
 Yes No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) _____

(Date) _____

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/25/2023

Customer Name: Cox Account #: 193751-33014
Combine Billing

Property Address: 657 Calef Road

Reason for Request: Toilet Leak

Service Dates: 3/20/23-6/20/23 Bill Date: 8/2/2023

Consumption: 83 ccf % Increase from Average: 319%

Average Consumption: 26 ccf Based on: 14 Qtr average
Limited history

Difference: 57 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds 250% threshold

Approve Jm

Abatement Total: 57 ccf at \$ 4.25 \$ 242.25

Highway Recommendation: ABATE Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie

Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Brandon Cox

Address: 657 Calef Rd

Manchester (Street) NH (Unit)
(City) (State) 03103 (Zip)

Email address: cox.brandon1@gmail.com

Phone Number: 603-759-5592

Customer Account Number: 193751-33014

Address of Property for which Abatement is Requested:

657 Calef Rd
(Street)
Manchester (City) NH (State) 03103 (Unit)
(City) (State) (Zip)

Billing Period: 3-20-23 / 6-20-23

Amount of Abatement Request: \$284.75

Reason for Abatement Request: Toilet Leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
 Yes No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

[Signature]
(Signature)

7/24/2023
(Date)

✓

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/25/2023

Customer Name: Henault Account #: 158305-68154
Combine Billing

Property Address: 34-36 Warner Street

Reason for Request: Toilet Leak

Service Dates: 4/4/23-7/5/23 Bill Date: To be billed

Consumption: 146 ccf % Increase from Average: 356%

Average Consumption: 41 ccf Based on: 5 Year average

Difference: 105 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

_____ *Approve Jm*

Abatement Total: 105 ccf at \$ 4.25 \$ 446.25

Highway Recommendation: ABATE Date: 9/11/23

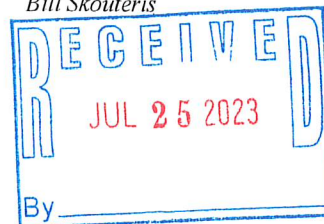
Kevin A. Sheppard, P.E.
Public Works Director

Timothy J. Clougherty
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Raymond Hebert
Harold Sullivan
Robert R. Rivard
Rick Rothwell
Bill Skouteris



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Jill Henault

Address: 1 Swallow Dr

Hollis (Street) NH 03049 (Unit)

(City) (State) (Zip)

Phone Number: 603 533 0592

Customer Account Number: 158305-68154

Address of Property for which Abatement is Requested:

34 Warner St (Street) NH 03102 apartment #3 (third floor) (Unit)

(City) (State) (Zip)

Billing Period: Account Number: 158305-68154 billing period 04/04/23 to 07/05/23
approx \$480.24

Amount of Abatement Request: _____

Reason for Abatement Request: Broken toilet running 24/7

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

Bathroom

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

____ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Jill Henault
(Signature)

071923
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 7/27/2023

Customer Name: Munnis

Account #: 180461-31742
Combine Billing

Property Address: 163 Beaver Street

Reason for
Request: Toilet Leak

Service Dates: 1/30/23-5/1/23

Bill Date: 6/14/2023

Consumption: 46 ccf

% Increase
from Average: 354%

Average
Consumption: 13 ccf

Based on: 5 Year average

Difference: 33 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approval Jm

Abatement Total: 33 ccf at \$ 4.25 \$ 140.25

Highway
Recommendation: ABATE

Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Ryan Munnis

Address: 163 Beaver Street

Manchester (City) NH (State) 03104 (Unit)
(Zip)

Email address: rmunnis@gmail.com

Phone Number: 617-752-3706

Customer Account Number: 180461-31742

Address of Property for which Abatement is Requested:

163 Beaver Street
Manchester (City) NH (State) 03104 (Unit)
(Zip)

Billing Period: 1-30-23 to 5-1-23

Amount of Abatement Request: \$136.00

Reason for Abatement Request: Toilet running ran up our water bill while we were out of town. As soon as we discovered the problem we repaired the toilet. Discussed abatement with helpful munn representative.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☐ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

[Signature]
(Signature)

7/25/2023
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 8/1/2023

Customer Name: Eric Lavoie

Account #: 182963-10780
Combine Billing

Property Address: 503 Hevey Street

Reason for
Request: Toilet Leak

Service Dates: 4/10/23-7/10/23

Bill Date: To be billed

Consumption: 350 ccf

% Increase
from Average: 700%

Average
Consumption: 50 ccf

Based on: 5 Year average

Difference: 300 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approve Jm

Abatement Total: 300 ccf at \$ 4.25 \$ 1,275.00

Highway
Recommendation: ABATE

Date: 9/11/23

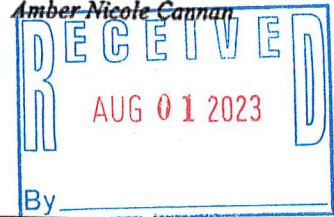
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannon



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Eric Lavoie

Address: 35 Christopher Dr
(Street)
Methuen Ma (Unit)
(City) (State) 01844
(Zip)

Email address: ericplavoie1968@gmail.com

Phone Number: 603-401-7571

Customer Account Number: 182963-10780

Address of Property for which Abatement is Requested:
503 Hevey Street 3
(Street) (Unit)
Manchester NH 03102
(City) (State) (Zip)

Billing Period: 4-10-23 - 7-10-23

Amount of Abatement Request: \$1,275.-

Reason for Abatement Request: 3rd Floor Toilet continuously running.
Tenant never notified owner or property Manager

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☐ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

(Date)

7/24/23

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 8/7/2023

Customer Name: Lowell Account #: 190087-48158
Combine Billing

Property Address: 3 Home Avenue

Reason for Request: Toilet and Faucet Leak

Service Dates: 3/31/23-6/28/23 Bill Date: 8/9/2023

Consumption: 77 ccf % Increase from Average: 248%

Average Consumption: 31 ccf Based on: 17 Qtr average
Limited history

Difference: 46 ccf

Other Comments: _____

EPD Recommendation: Deny - Does not exceed 250% threshold

Deny JFM

Abatement Total: _____ ccf at \$ _____ \$ _____ -

Highway Recommendation: DENY Date: 9/11/23

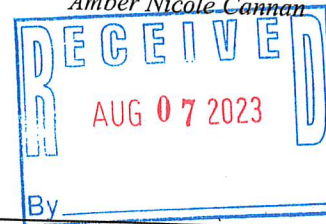
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Jennifer Lowell

Address: 3 Home Ave

Manchester (Street)
(City)

NH
(State)

03103 (Unit)
(Zip)

Email address: jenniferlowell99@yahoo

Phone Number: 603-918-3404

Customer Account Number: 190087-48158

Address of Property for which Abatement is Requested:

3 Home Ave
Manchester (Street)
(City)

NH
(State)

03103 (Unit)
(Zip)

Billing Period: 3/31/23 - 6/28/23

Amount of Abatement Request: 187.00

Reason for Abatement Request: toilet leak and faucet leak

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

☐ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

Heather Powell
(Signature)

7/27/23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 8/9/2023

Customer Name: Verani Account #: 183563-9410
Combine Billing

Property Address: 447 Spruce Street

Reason for Request: Shower/Toilet Leak

Service Dates: 3/15/23-6/13/23 Bill Date: 7/26/2023

Consumption: 183 ccf % Increase from Average: 269%

Average Consumption: 68 ccf Based on: 5 Year average

Difference: 115 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve JH

Abatement Total: 115 ccf at \$ 4.25 \$ 488.75

Highway Recommendation: ABATE Date: 9/11/23

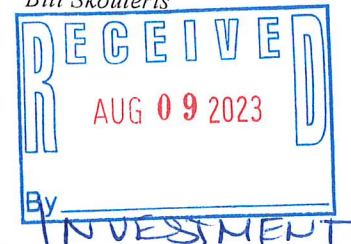
Kevin A. Sheppard, P.E.
Public Works Director

Timothy J. Clougherty
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Raymond Hebert
Harold Sullivan
Robert R. Rivard
Rick Rothwell
Bill Skouteris



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: DAVE VERANI - 8 BLADE CAPITAL INVESTMENT

Address: P.O. Box 32

STRATHAM (City) NH (State) 03885 (Unit)
(Zip)

Phone Number: 603-498-3477

Customer Account Number: 183503-9410

Address of Property for which Abatement is Requested: 447 SPRUCE ST
MANCHESTER (City) NH (State) 03103 (Unit)
(Zip)

Billing Period: 12/12/22 - 5/23/23

Amount of Abatement Request: \$1150.00

Reason for Abatement Request: tenants failed to let us know about a shower and toilet leak in a timely manner. - toilet leak was bad when you informed us of high usage.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

☐ Yes ☐ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

[Signature]
(Signature)

8-8-23
(Date)

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 8/14/2023

Customer Name: Jacqueline P Guay Rev TR Account #: 483-354
Combine Billing

Property Address: 151 Pearl Street

Reason for Request: Toilet Leak

Service Dates: 2/13/23-5/15/23 Bill Date: 6/28/2023

Consumption: 217 ccf % Increase from Average: 319%

Average Consumption: 68 ccf Based on: 5 Year average

Difference: 149 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Aggave Jm

Abatement Total: 149 ccf at \$ 4.25 \$ 633.25

Highway Recommendation: ABATE Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Jacqueline P. Guay Trust, Monique Harrington trustee

Address: 605 Union Street
(Street) (City) (State) (Zip)
Manchester NH 03104

Email address: mjharrington@me.com

Phone Number: (603) 661-6086

Customer Account Number: 483-354

Address of Property for which Abatement is Requested:

151 Pearl St. (AKA 622 Union St.)
(Street) (City) (State) (Zip)
Manchester NH 03104

Billing Period: 2/13/23 - 5/15/23

Amount of Abatement Request: \$578.00

Reason for Abatement Request: Broken toilet on the first floor. Water was constantly running for a few weeks or more. Replaced the toilet when I found out. Receipt attached.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.

Yes No N/A

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) [Signature] Trustee

(Date) 8/14/23

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

Date Received: 8/14/2023

Customer Name: Jacqueline P Guay Rev TR Account #: 1527-1052
Combine Billing

Property Address: 605 Union Street

Reason for Request: Toilet Leak

Service Dates: 5/9/23-8/7/23 Bill Date: To be billed

Consumption: 193 ccf % Increase from Average: 288%

Average Consumption: 67 ccf Based on: 5 Year average

Difference: 126 ccf

Other Comments: _____

EPD Recommendation: Grant - Abatement exceeds the 250% threshold

Approve J/m

Abatement Total: 126 ccf at \$ 4.25 \$ 535.50

Highway Recommendation: ABATE Date: 9/11/23

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan

CITY OF MANCHESTER

Sewer Fee Abatement Request Form

Name: Jacqueline P. Guay Trust, Monique Harrington
trustee

Address: 605 Union St.
(Street)
Manchester NH 03104
(City) (State) (Zip)

Email address: mjgharrington@me.com

Phone Number: (603) 661-6086

Customer Account Number: 1527-1052

Address of Property for which Abatement is Requested:
605 Union St.
(Street)
Manchester NH 03104
(City) (State) (Zip)

Billing Period: 5/9/23 - 8/7/23

Amount of Abatement Request: \$1071.50

Reason for Abatement Request: Toilet was running because of a stuck part in the tank. It was running for at least 2 weeks before I was aware of the problem.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

I was able to fix the toilet without contacting a plumber, so I have no receipts.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
____ Yes ____ No N/A

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature) [Signature] Trustee

(Date) 8/14/23

CITY OF MANCHESTER
HIGHWAY DEPARTMENT
ENVIRONMENTAL PROTECTION DIVISION
Sewer Abatement Investigation and Recommendation

✓

Date Received: 8/22/2023

Customer Name: Bartlett Account #: 164699-356
Combine Billing

Property Address: 145 Pearl Street

Reason for Request: Toilet Leak

Service Dates: 5/15/23-8/15/23 Bill Date: To be billed

Consumption: 434 ccf % Increase from Average: 835%

Average Consumption: 52 ccf Based on: 5 Year average

Difference: 382 ccf

Other Comments: _____

EPD
Recommendation: Grant - Abatement exceeds the 250% threshold

Approved Jim

Abatement Total: 382 ccf at \$ 4.25 \$ 1,623.50

Highway Recommendation: ABATE Date: 9/11/23

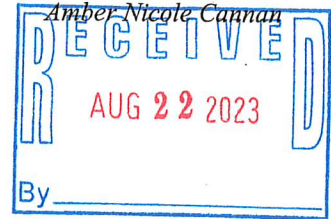
Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director

Frederick J. McNeill, P.E.
Chief Engineer



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannon



CITY OF MANCHESTER
Sewer Fee Abatement Request Form

Name: Richard BARTlett

Address: 295 Mystic St
Manchester (City) N.H. (State) 03103 (Zip)
(Unit)

Email address: bigbart1211@gmail.com

Phone Number: 6038673013

Customer Account Number: 164699-356

Address of Property for which Abatement is Requested:
145 Pearl St (Street) 2 (Unit)
Manchester (City) N.H. (State) 03103 (Zip)

Billing Period: 5/15/2023 - 8/15/2023

Amount of Abatement Request: 1530.00

Reason for Abatement Request: Very Bad Toilet Leak.

Tenant never told us. We found out because toilet clogged
and ran water to the first floor, completely destroying
the ceiling. It must have been running for months before the clog.

If abatement request is due to an "extraordinary event" such as a hot water tank failure or a water pipe bursting, please state where the water accumulated (basement, outside, bathroom, etc.) and ultimately where it discharged. If it was in a basement, please indicate if the floor is dirt or concrete.

If abatement request is due to a leaking irrigation system, state if a sewer deduct meter is in place.
☐ Yes ☒ No

Verification that applicant does not have any outstanding debts to the City of Manchester, all work is in compliance with codes/ordinances, and all necessary City permits have been obtained and approved.

(Signature)

(Date)

Anna J. Thomas, MPH
Public Health Director

Philip J. Alexakos, MPH, REHS
Deputy Public Health Director



BOARD OF HEALTH
Reverend Richard D. Clegg
Elizabeth Sailhamer Soukup, M.D., M.M.Sc.
Ellen Tourigny, MEd
Jenn Wyman, BSN, RN

CITY OF MANCHESTER
Health Department

To: Alderman Will Steward
Chairman, CIP Committee

From: Anna Thomas, MPH
Director, Manchester Health Department

Date: September 12, 2023

Re: Additional Funding 210523 – Healthcare for the Homeless

The Health Department has received additional funding from HRSA to support CMC's Healthcare for the Homeless Program. This will bring the project total to \$1,642,325.

As such, we have requested that the Planning and Community Development prepare the appropriate CIP Amending Resolution and Budget Authorization Forms necessary for the implementation of this program.

Your review of these documents and a recommendation for approval to the full Board is respectfully requested.

Thank you.

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2023 Community Improvement Program, authorizing and appropriating funds in the amount of One Hundred Sixty Seven Thousand Dollars (\$167,000) for the FY2023 CIP 210523 Healthcare for the Homeless.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2023 CIP as contained in the 2023 CIP budget; and

WHEREAS, the 2023 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept FEDERAL funds in the amount of \$167,000 from the Department of Health and Human Services to provide funding to FY2023 CIP 210523 Healthcare for the Homeless.

NOW, THEREFORE, be it resolved that the 2023 CIP be amended as follows:

By increasing:

FY 2023 CIP 210523 Healthcare for the Homeless. - \$167,000 FEDERAL

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#:	210523	Project Year:	2023	CIP Resolution:	5/17/2022
Title:	Homeless Healthcare			Amending Resolution:	10/17/2023
Administering Department	Health Department			Revision:	#2

Project Description: Federal funds support healthcare services to approximately 1300 unduplicated individuals of all ages experiencing homelessness in Manchester each year. As a federally qualified health center, services are provided through a contract with Catholic Medical Center's Mobile Community Health Team. Services are coordinated with support from community partners such as the Mental Health Center of Greater Manchester, VA, Southern NH Services, FIT/New Horizons, the Way Home and Waypoint at three clinic sites as well as telehealth and street outreach.

Federal Grants	Federal Grant:	Yes	Environmental	Review Required:	No
	Grant Executed:			Completed:	

Critical Events

1.	Project Initiation	3/01/2023
2.	Project Completion	2/28/2024
3.		
4.		
5.		
		2/28/2024

Line Item Budget

	FEDERAL			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$1,642,325.00	\$0.00	\$0.00	\$1,642,325.00
TOTAL	\$1,642,325.00	\$0.00	\$0.00	\$1,642,325.00

Revisions: #1 - Extend completion date from 6/30/2023 to 2/28/2024
#2 - 10-3-23 Increase the budget \$167,000 FEDERAL (\$1,475,325 OTHER to \$1,642,325 OTHER)

Comments: Source of Funds: US Department of Health and Human Services



Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# H8000002
Federal Award Date: 05/31/2023

Recipient Information

- 1. Recipient Name**
City of Manchester New Hampshire
1528 Elm St
Manchester, NH 03101-1356
- 2. Congressional District of Recipient**
01
- 3. Payment System Identifier (ID)**
1026000517A4
- 4. Employer Identification Number (EIN)**
026000517
- 5. Data Universal Numbering System (DUNS)**
790913636
- 6. Recipient's Unique Entity Identifier**
WXMZXFFQG2C9
- 7. Project Director or Principal Investigator**
Anna Thomas
Public Health Director
athomas@manchesternh.gov
(603)657-2700
- 8. Authorized Official**

Federal Agency Information

- 9. Awarding Agency Contact Information**
Lucas Dedmon
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
ldedmon@hrsa.gov
(301) 287-2591
- 10. Program Official Contact Information**
Alison Wilson
Public Health Analyst
Bureau of Primary Health Care (BPHC)
awilson@hrsa.gov
(301) 287-0097

Federal Award Information

- 11. Award Number**
6 H80CS00002-22-04
- 12. Unique Federal Award Identification Number (FAIN)**
H8000002
- 13. Statutory Authority**
42 U.S.C. § 254b
- 14. Federal Award Project Title**
Health Center Program
- 15. Assistance Listing Number**
93.224
- 16. Assistance Listing Program Title**
Community Health Centers
- 17. Award Action Type**
Administrative
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

- 19. Budget Period Start Date 03/01/2023 - End Date 02/29/2024**
- 20. Total Amount of Federal Funds Obligated by this Action** \$410,581.00
 - 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** \$1,642,325.00
- 24. Total Approved Cost Sharing or Matching, where applicable** \$2,130,606.00
- 25. Total Federal and Non-Federal Approved this Budget Period** \$3,772,931.00
- 26. Project Period Start Date 03/01/2023 - End Date 02/28/2026**
- 27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period** \$3,772,931.00

- 28. Authorized Treatment of Program Income**
Addition
- 29. Grants Management Officer – Signature**
Sarah Hammond on 05/31/2023

30. Remarks



Bureau of Primary Health Care (BPHC)

Notice of Award
Award Number: 6 H80CS00002-22-04
Federal Award Date: 05/31/2023

31. APPROVED BUDGET: (Excludes Direct Assistance)

[] Grant Funds Only

[X] Total project costs including grant funds and all other financial participation

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:	\$127,843.00
g. Travel:	\$18,250.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$2,000.00
j. Consortium/Contractual Costs:	\$3,575,356.00
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:	\$3,723,449.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$49,482.00
q. TOTAL APPROVED BUDGET:	\$3,772,931.00
i. Less Non-Federal Share:	\$2,130,606.00
ii. Federal Share:	\$1,642,325.00

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	\$1,642,325.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$1,231,744.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$410,581.00

33. RECOMMENDED FUTURE SUPPORT:

(Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
23	\$1,642,325.00
24	\$1,642,325.00

34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)

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

35. FORMER GRANT NUMBER

H66CS00328

36. OBJECT CLASS

41.51

37. BHCNIS#

010130

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:

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.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
23 - 3980879	93.224	23H80CS00002	\$410,581.00	\$0.00	HCH	23H80CS00002

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 Term(s)

1. This action provides the remainder of your organization's FY 2023 Health Center Program budget period target funding level. All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Anna Thomas	Program Director	athomas@manchesternh.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/>).

Anna J. Thomas, MPH
Public Health Director

Philip J. Alexakos, MPH, REHS
Deputy Public Health Director



BOARD OF HEALTH
Reverend Richard D. Clegg
Elizabeth Sailhamer Soukup, M.D., M.M.Sc.
Ellen Tourigny, MEd
Jenn Wyman, BSN, RN

CITY OF MANCHESTER
Health Department

To: Alderman Will Steward
Chairman, CIP Committee

From: Anna Thomas, MPH
Director, Manchester Health Department

Date: September 13, 2023

RE: Manchester Health Department- Provision of Regional Public Health Network Services:
RFA-2023-DPHS-02-REGIO-05 for the period (July 1, 2022- June 30, 2024)

The Manchester Health Department has received additional funding in the amount of \$10,000 from the New Hampshire Department of Health and Human Services to allow us to continue our planning for, surveillance of and response to public health threats and deliver daily public health services.

As such, we have requested that the Planning and Community Development prepare the appropriate CIP Amending Resolution and Budget Authorization Forms necessary for the implementation of this program.

Your review of this request and a recommendation for approval to the full Board is respectfully requested.

We thank the Committee and Board for their consideration.

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2023 Community Improvement Program, authorizing and appropriating funds in the amount of Ten Thousand Dollars (\$10,000) for the FY2023 CIP 210623 Public Health Preparedness.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2023 CIP as contained in the 2023 CIP budget; and

WHEREAS, the 2023 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept FEDERAL funds in the amount of \$10,000 from the NH Dept. of Health and Human Services to provide funding to FY2023 CIP 210623 Substance Public Health Preparedness.

NOW, THEREFORE, be it resolved that the 2023 CIP be amended as follows:

By increasing:

FY 2023 CIP 210623 Substance Public Health Preparedness - \$10,000 FEDERAL

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#:	210623	Project Year:	2023	CIP Resolution:	5/17/2022
Title:	Public Health Preparedness			Amending Resolution:	10/17/2023
Administering Department	Health Department			Revision:	#4

Project Description: These federally funded programs support the public health preparedness and response work of the Health Department as well as the expansion of public health services offered by the Health Department to include substance misuse prevention*. Through this program, improved disease surveillance and communicable disease control activities (including COVID-19) will be conducted to improve the health of Manchester residents and other communities in the Gr. Manchester Public Health Region.*subcontract with Makin It Happen.

Federal Grants	Federal Grant:	Yes	Environmental	Review Required:	No
	Grant Executed:			Completed:	

Critical Events

1.	Project Initiation	7/1/2022
2.	Project Completion	12/31/2023
3.		
4.		
5.		
		12/31/2023

Line Item Budget

	FEDERAL			TOTAL
Salaries and Wages	\$420,955.00	\$0.00	\$0.00	\$420,955.00
Fringes	\$230,341.00	\$0.00	\$0.00	\$230,341.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$504,984.00	\$0.00	\$0.00	\$504,984.00
TOTAL	\$1,156,280.00	\$0.00	\$0.00	\$1,156,280.00

Revisions: #1-Increase budget \$286,207 (from \$801,068 to \$1,087,275).
#2 - Increase budget by \$59,005 (from \$1,087,275 to \$1,146,280)
#3 -7/11/23 - Extend the completion date from 6/30/2023 to 12/31/2023.
#4- 10/3/23 - Increase budget by \$10,000 FEDERAL (from \$1,146,280 to \$1,156,280)

Comments: Source of Funds: NH DHHS

Planning Department/Startup Form - 07/1/20

\$1,156,280.00

**State of New Hampshire
Department of Health and Human Services
Amendment #5**

This Amendment to the Infectious Disease Prevention Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and the Manchester Health Department ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on August 22, 2018, (Item #7), as amended on December 19, 2018, (Item #15), as amended on June 24, 2020, (Item #45A), as amended on December 22, 2021 (Item #41B) and amended August 17, 2022, (Item # 21B), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:
\$2,917,386
2. Modify Exhibit B, Methods and Conditions Precedent to Payment, Section 1 Subsection to read:
 - 1) The State shall pay the Contractor an amount not to exceed Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit B – Amendment #4.
 - 1.1 This contract is funded with:
 - 1.1.1. 19%Federal Funds from the Immunization Cooperative Grant, as awarded on July 1, 2021, from the Center for Disease Control and Prevention Catalog, Assisted Listing Number (ALN#), 93.268, Federal Award Identification Number (FAIN#) NH23IP922595.
 - 1.1.2. 22%Federal Funds from the Integrated HIV Prevention Activities Grant as awarded on December 16, 2021, by the Center for Disease Control and Prevention, ALN# 93.940, FAIN# NU62PSP924538
 - 1.1.3. 21%Federal Funds from the Sexually Transmitted Diseases (STD) Prevention and Control Grant as awarded on June 21, 2021, by the Center for Disease Control and Prevention ALN# 93.977, FAIN# NH25PS005159.
 - 1.1.4. 3%Federal Funds from the Childhood Lead Poisoning Prevention Grant as awarded on May 8, 2021 by the Center for Disease Control and Prevention ALN# 93.197, FAIN# NUE2EH001457.
 - 1.1.5. 20%Federal Funds from the Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response Grant as awarded on March 16, 2020 and May 18, 2021 by the Center for Disease Control and Prevention ALN# 93.354, FAIN# NU90TP922144.
 - 1.1.6. 1% Federal Funds from Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance – financed in part by the Prevention and Public Health Fund (PPHF) as awarded on May 13, 2016 by the Center for Disease Control and Prevention ALN## 93.733, FAIN#

NH23IP000986.

1.1.7. 13%General Funds

1.1.8 1% Other Funds (Lead Poisoning Prevention Fund)

3. Modify Exhibit B, Methods and Conditions Precedent to Payment, Section 2, Paragraph 2.1., and Paragraph 2.2., to read:

2) Payment for said services shall be paid monthly as follows:

2.1 Payment shall be on a cost reimbursement basis for actual expenditures incurred monthly in the fulfillment of this agreement and shall be in accordance with the approved budget line items in Exhibit B-1 Budget through Exhibit B-10 budget, Amendment #5.

2.2 The Contractor shall submit monthly invoices in a form satisfactory to the State by the twentieth (20th) day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month, in accordance with Exhibit B-1 Budget through Exhibit B-10 Budget, Amendment #5.

4. Add Exhibit B-10, Budget Sheet, Amendment #5, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective retroactive to July 1, 2023, upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

Date

Name:
Title:

Manchester Health Department

Date

Name: Joyce Craig
Title: Mayor

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

Date

Name:
Title:

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:



*Sharon Y. Wickens
Finance Officer*

*Michele A. Bogardus
Deputy Finance Officer*

CITY OF MANCHESTER
Finance Department

September 5, 2023

To: Alderman Will Stewart, Chairman CIP Committee
From: Jennifer Heon, Financial Analyst II

RE: CIP 211723 – Opioid Settlement Trust

The City received an additional \$65,662.94 from the State of NH Opioid Litigation Settlement Trust.

I respectfully request that CIP 211723 – Opioid Litigation Settlement Trust, be amended to add the additional funds.

If you have any questions or concerns, please feel free to contact me at 603-792-6612.

Sincerely,

Jennifer Heon
Manager – Accounting & Reporting
Finance

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2023 Community Improvement Program, authorizing and appropriating funds in the amount of Sixty Five Thousand Six Hundred Sixty Two Dollars and ninety-four Cents (\$65,662.94) for the FY2023 CIP 211723 Opioid Litigation Settlement Trust.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2023 CIP as contained in the 2023 CIP budget; and

WHEREAS, the 2023 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept STATE funds in the amount of \$65,662.94 from the State of NH Opioid Litigation Settlement Trust to provide funding to FY2023 CIP 211723 Opioid Litigation Settlement Trust.

NOW, THEREFORE, be it resolved that the 2023 CIP be amended as follows:

By increasing:

FY 2023 CIP 211723 Opioid Litigation Settlement Trust - \$65,662.94 STATE

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 211723 Project Year: 2023 CIP Resolution: 5/17/2022
 Title: Opioid Litigation Settlement Trust Amending Resolution: 10/17/2023
 Administering Department: Finance Department Revision: #5

Project Description: Distribution from the State of NH for abatement purposes to fight the opioid epidemic.
 NH RSA 126-A:84, IV

Federal Grants Federal Grant: No **Environmental** Review Required: No
 Grant Executed: Completed:

Critical Events

1.	Project Initiation	12/20/2022
2.	Project Completion	12/31/2025
3.		
4.		
5.		
		12/31/2025

Line Item Budget

	STATE			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$294,213.23	\$0.00	\$0.00	\$294,213.23
TOTAL	\$294,213.23	\$0.00	\$0.00	\$294,213.23

Revisions: #1 - Increases budget \$70,554.12 (from \$494,918.65 to \$565,472.77).
 #2 - Decrease budget by \$150,000 (from \$565,472.77 to \$415,472.77) and transfer to CIP #212023
 #3 - Increase budget by \$13,077.52 (From \$415,472.77 to \$428,550.29 STATE)
 #4 - 9/5/23 Decrease budget by \$200,000 (from \$428,550.29 to \$228,550.29) and transfer to CIP #212023

Comments: #5- 10/3/23 Increase budget by \$65,662.94 STATE (\$228,550.29 to \$294,213.23)
 Funding Source: State of NH Opioid Litigation Settlement Trust.

Anna J. Thomas, MPH
Public Health Director

Philip J. Alexakos, MPH, REHS
Deputy Public Health Director



BOARD OF HEALTH
Reverend Richard D. Clegg
Elizabeth Sailhamer Soukup, M.D., M.M.Sc.
Ellen Tourigny, MEd
Jenn Wyman, BSN, RN

CITY OF MANCHESTER
Health Department

To: Alderman Will Steward
Chairman, CIP Committee

From: Anna Thomas, MPH
Director, Manchester Health Department

Date: September 12, 2023

Re: New Funding – Bridge Access Program for CMC Homeless Healthcare

The Health Department has received additional in the amount of \$12,566 from HRSA. This notice of award provides one-time funding for health centers to continue essential COVID-19-related services and mitigate adverse impacts of COVID-19 on underserved populations as vaccines and therapeutics move to the commercial market.

As such, we have requested that the Planning and Community Development prepare the appropriate CIP Amending Resolution and Budget Authorization Forms necessary for the implementation of this program.

Your review of these documents and a recommendation for approval to the full Board is respectfully requested.

Thank you.

City of Manchester
New Hampshire

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2024 Community Improvement Program, authorizing and appropriating funds in the amount of Twelve Thousand Five Hundred Sixty-Six Dollars (\$12,566) for the FY2024 CIP 212024 Bridge Access Program CMC HHC FY23.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2024 CIP as contained in the 2024 CIP budget; and

WHEREAS, the 2024 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept FEDERAL funds in the amount of \$12,566 from the Health Resources & Services Administration to provide funding to FY2024 CIP 212024 Bridge Access Program CMC HHC FY23.

NOW, THEREFORE, be it resolved that the 2024 CIP be amended as follows:

By Adding:

FY 2024 CIP 212024 Bridge Access Program CMC HHC FY23 - \$12.566 FEDERAL

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#:	212024	Project Year:	2024	CIP Resolution:	6/6/2023
Title:	Bridge Access Program CMC HHC FY23			Amending Resolution:	10/17/2024
Administering Department	Health Department			Revision:	

Project Description: Provides one-time funding for health centers to continue essential COVID-19-related services and mitigate adverse impacts of COVID-19 related services and mitigate adverse impacts of COVID-19 on underserved populations as vaccines and therapeutics move to the commercial market. This funding is passed through to CMC Homeless Healthcare Program.

Federal Grants	Federal Grant:	Yes	Environmental	Review Required:	No
	Grant Executed:			Completed:	

Critical Events

1. Program Initiation	9/01/2023
2. Program Completion	12/31/2024
3.	
4.	
5.	

Line Item Budget

	FEDERAL			TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$12,566.00	\$0.00	\$0.00	\$12,566.00
TOTAL	\$12,566.00	\$0.00	\$0.00	\$12,566.00

Revisions:

Comments: Funding from HRSA



Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# **H8L50718**
Federal Award Date: **08/25/2023**

Recipient Information

1. Recipient Name
CITY OF MANCHESTER
1528 Elm St
Manchester, NH 03101-1356
2. Congressional District of Recipient
01
3. Payment System Identifier (ID)
1026000517A4
4. Employer Identification Number (EIN)
026000517
5. Data Universal Numbering System (DUNS)
790913636
6. Recipient's Unique Entity Identifier
WXMZXFQG2C9
7. Project Director or Principal Investigator
Anna Thomas
Public Health Director
athomas@manchesternh.gov
(603)657-2700
8. Authorized Official
Anna Thomas
athomas@manchesternh.gov
(603)657-2700

Federal Agency Information

9. Awarding Agency Contact Information
Lucas Dedmon
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
ldedmon@hrsa.gov
(301) 287-2591
10. Program Official Contact Information
Darin D Daly
Project Officer
Bureau of Primary Health Care (BPHC)
ddaly@hrsa.gov
(845) 242-1957

Federal Award Information

11. Award Number
1 H8LCS50718-01-00
12. Unique Federal Award Identification Number (FAIN)
H8L50718
13. Statutory Authority
American Rescue Plan Act of 2021 (P.L. 117-2)
14. Federal Award Project Title
FY 2023 Bridge Access Program
15. Assistance Listing Number
93.527
16. Assistance Listing Program Title
Affordable Care Act (ACA) Grants for New and Expanded Services Under the Health Center Program
17. Award Action Type
New
18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/01/2023 - End Date 12/31/2024	
20. Total Amount of Federal Funds Obligated by this Action	\$12,566.00
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	\$12,566.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$12,566.00
26. Project Period Start Date 09/01/2023 - End Date 12/31/2024	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$12,566.00

28. Authorized Treatment of Program Income
Addition
29. Grants Management Officer – Signature
Sarah Hammond on 08/25/2023

30. Remarks



Notice of Award
Award Number: 1 H8LCS50718-01-00
Federal Award Date: 08/25/2023

Bureau of Primary Health Care (BPHC)

31. APPROVED BUDGET: (Excludes Direct Assistance) ☒ Grant Funds Only ☐ Total project costs including grant funds and all other financial participation <table><tr><td>a. Salaries and Wages:</td><td>\$0.00</td></tr><tr><td>b. Fringe Benefits:</td><td>\$0.00</td></tr><tr><td>c. Total Personnel Costs:</td><td>\$0.00</td></tr><tr><td>d. Consultant Costs:</td><td>\$0.00</td></tr><tr><td>e. Equipment:</td><td>\$0.00</td></tr><tr><td>f. Supplies:</td><td>\$0.00</td></tr><tr><td>g. Travel:</td><td>\$0.00</td></tr><tr><td>h. Construction/Alteration and Renovation:</td><td>\$0.00</td></tr><tr><td>i. Other:</td><td>\$12,566.00</td></tr><tr><td>j. Consortium/Contractual Costs:</td><td>\$0.00</td></tr><tr><td>k. Trainee Related Expenses:</td><td>\$0.00</td></tr><tr><td>l. Trainee Stipends:</td><td>\$0.00</td></tr><tr><td>m. Trainee Tuition and Fees:</td><td>\$0.00</td></tr><tr><td>n. Trainee Travel:</td><td>\$0.00</td></tr><tr><td>o. TOTAL DIRECT COSTS:</td><td>\$12,566.00</td></tr><tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC):</td><td>\$0.00</td></tr><tr><td>q. TOTAL APPROVED BUDGET:</td><td>\$12,566.00</td></tr><tr><td> i. Less Non-Federal Share:</td><td>\$0.00</td></tr><tr><td> ii. Federal Share:</td><td>\$12,566.00</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:	\$12,566.00	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:	\$12,566.00	p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00	q. TOTAL APPROVED BUDGET:	\$12,566.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$12,566.00	33. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project) <table><tr><th>YEAR</th><th>TOTAL COSTS</th></tr><tr><td colspan="2">Not applicable</td></tr></table> 34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash) <table><tr><td>a. Amount of Direct Assistance</td><td>\$0.00</td></tr><tr><td>b. Less Unawarded Balance of Current Year's Funds</td><td>\$0.00</td></tr><tr><td>c. Less Cumulative Prior Award(s) This Budget Period</td><td>\$0.00</td></tr><tr><td>d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION</td><td>\$0.00</td></tr></table> 35. FORMER GRANT NUMBER 36. OBJECT CLASS 41.51 37. BHCNIS#	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
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:	\$12,566.00																																																		
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:	\$12,566.00																																																		
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00																																																		
q. TOTAL APPROVED BUDGET:	\$12,566.00																																																		
i. Less Non-Federal Share:	\$0.00																																																		
ii. Federal Share:	\$12,566.00																																																		
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																																																		
32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE: <table><tr><td>a. Authorized Financial Assistance This Period</td><td>\$12,566.00</td></tr><tr><td>b. Less Unobligated Balance from Prior Budget Periods</td><td></td></tr><tr><td> i. Additional Authority</td><td>\$0.00</td></tr><tr><td> ii. Offset</td><td>\$0.00</td></tr><tr><td>c. Unawarded Balance of Current Year's Funds</td><td>\$0.00</td></tr><tr><td>d. Less Cumulative Prior Award(s) This Budget Period</td><td>\$0.00</td></tr><tr><td>e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td><td>\$12,566.00</td></tr></table>		a. Authorized Financial Assistance This Period	\$12,566.00	b. Less Unobligated Balance from Prior Budget Periods		i. Additional Authority	\$0.00	ii. Offset	\$0.00	c. Unawarded Balance of Current Year's Funds	\$0.00	d. Less Cumulative Prior Award(s) This Budget Period	\$0.00	e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$12,566.00																																				
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c. Unawarded Balance of Current Year's Funds	\$0.00																																																		
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00																																																		
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$12,566.00																																																		
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: 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.																																																			
39. ACCOUNTING CLASSIFICATION CODES <table><tr><th>FY-CAN</th><th>CFDA</th><th>DOCUMENT NUMBER</th><th>AMT. FIN. ASST.</th><th>AMT. DIR. ASST.</th><th>SUB PROGRAM CODE</th><th>SUB ACCOUNT CODE</th></tr><tr><td>23 - 398BAP1</td><td>93.527</td><td>23H8LCS50718C6</td><td>\$12,566.00</td><td>\$0.00</td><td>N/A</td><td>23H8LCS50718C6</td></tr></table>		FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE	23 - 398BAP1	93.527	23H8LCS50718C6	\$12,566.00	\$0.00	N/A	23H8LCS50718C6																																				
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23 - 398BAP1	93.527	23H8LCS50718C6	\$12,566.00	\$0.00	N/A	23H8LCS50718C6																																													

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 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. Charges to Federal awards for salaries and wages must be based on records that accurately reflect the work performed under each award. These records must reflect the total activity for which the employee is compensated, not to exceed 1 FTE across all Federal awards (45 CFR 75.430(i)(1)). You shall maintain appropriate records and cost documentation including, as applicable, documentation described in 45 CFR § 75.302 – Financial management and 45 CFR § 75.361 through 75.365 – Record Retention and Access, to substantiate the charging of salaries and other project activities costs. You shall promptly submit copies of such records and cost documentation upon the request of HHS, and you agree to fully cooperate in all audits that HHS, the HHS Inspector General, or the Pandemic Response Accountability Committee conducts to ensure compliance with these terms and conditions.
2. Under existing law, and consistent with Executive Order 13535 (75 FR 15599), health centers are prohibited from using federal funds to provide abortions, except in cases of rape or incest, or when a physician certifies that the woman has a physical disorder, physical injury, or physical illness that would place her in danger of death unless an abortion is performed.
3. The Health Center Program COVID-19 Bridge Access Program funding (Bridge funding) may support the following allowable activities (in alignment with your Health Center Program scope of project and consistent with all Health Center Program requirements):

- COVID-19 testing
- COVID-19 vaccination
- COVID-19 therapeutics
- Enabling/patient support services (such as outreach, education, enrollment assistance, transportation, translation, and care coordination) to support COVID-19-related services
- Community COVID-19 vaccination events
- Personnel who support COVID-19-related services and care delivery, including personnel costs necessary to develop, support, or expand collaborations, including collaborations with state/jurisdiction immunization programs
- Supplies that support COVID-19-related services and care delivery

You must make every reasonable effort to get vaccines, therapeutics, and other COVID-19 supplies through the HHS programs that provide free COVID-19 supplies to health centers, as detailed below:

- COVID-19 vaccines for uninsured and underinsured adults from the CDC [Bridge Access Program for COVID-19 Vaccines](#)
- COVID-19 vaccines for children from the CDC [Vaccines for Children Program](#)
- COVID-19 oral antiviral treatments for the outpatient treatment of mild to moderate COVID-19 from HRSA's [COVID-19 Therapeutics Program](#)
- COVID-19 testing supplies from HRSA's [COVID-19 Testing Supply Program](#)

If through reasonable efforts you are not able to meet the COVID-19-related needs of your patients and community at no cost and in a timely manner, the purchase of vaccines, therapeutics, and testing supplies is an allowable use of these funds. If you use Bridge funding for such purposes, you must document both the unmet need among your population and the reasonable efforts made by your health center to secure COVID-19 supplies that are otherwise available through the HHS programs detailed above. You must maintain documentation of your reasonable efforts to obtain them for free and how the result of those efforts was insufficient to meet the needs of your community.

4. Within 90 days of the end of the period of performance, you must submit a final report into the HRSA Electronic Handbooks (EHBs). Reports will document completed activities and use of Bridge funding, and may request additional information such as issues and barriers experienced while implementing projects. HRSA will post details to the [Bridge technical assistance webpage](#) when available.
5. This notice of award provides one-time funding for health centers to continue essential COVID-19-related services and mitigate adverse impacts of COVID-19 on underserved populations as vaccines and therapeutics move to the commercial market. The authority for these awards is section 2401 of the [American Rescue Plan Act of 2021](#), P.L. 117-2 (ARP). HRSA determined your award amount using the following formula: (1) \$10,029, plus (2) \$11.53 per uninsured patient reported in the 2022 Uniform Data System (UDS). When you draw down award funding, you are accepting all the terms and conditions of the award, and must comply with all requirements including the terms, conditions, and all applicable statutes, regulations, and policies. Non-compliance with these terms or other applicable requirements is grounds for HRSA to take actions pursuant to 45 CFR § 75.371 (Remedies for non-compliance) which may include repayment of all or part of the award. The availability of these funds is dependent on your continued status as a current Health Center Program (H80) award recipient or your continued status as a designated look-alike under Section 1861(aa)(4)(B) of the Social Security Act.
Note: This one-time funding is not awarded under the authority of section 330 of the Public Health Service Act (42 U.S.C. 254b); thus, receipt of these funds does not confer Health Center Program award recipient status under Section 330.
6. You must follow all Health Center Program requirements, including those related to billing, collections, and sliding fee discounts. See the [Health Center Program Compliance Manual](#) for information about reasonable efforts to collect appropriate reimbursement for your costs. Review the [Billing and Cost Sharing Overview for COVID-19 Vaccination, Testing, and Treatment resource](#) for information about reimbursement and your sliding fee.
7. Bridge funding activities must be aligned with your Health Center Program scope of project. You are responsible for ensuring that your Health Center Program scope of project is accurate and includes service, site, and/or activity changes necessary to implement your Bridge activities. This includes: (1) Form 5A: Services Provided, (2) Form 5B: Service Sites, and (3) Form 5C: Other Activities/Locations. For additional information, see the [Scope of Project webpage](#).
8. You may not use this funding for: costs not aligned with the Bridge funding purpose and allowable activities; costs already paid for by any other federal award, including H80, H8F, H8G, and L2C funding from HRSA; costs that are reimbursed or compensated by other federal or state programs; equipment purchases, including electronic health record (EHR) systems, vehicles, and mobile units; construction and alteration/renovation projects; and facility or land purchases.

Award funds may not be used to pay the salary of an individual at a rate in excess of [Executive Level II](#), which is currently \$212,100. This amount reflects an individual's base salary including bonuses and overtime, but not including fringe and any income that an individual may be

permitted to earn outside of the duties to your organization. For more information about allowable expenses, see [45 CFR part 75](#) and the [HHS Grants Policy Statement](#) (HHS GPS). The requirements of [45 CFR part 75](#) apply to this award.

You are 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, including, but not limited to, restrictions on use of funds for lobbying, executive salaries, gun control, and abortion. Like those for all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

9. You do not need prior approval to rebudget these funds, except as noted below, if the proposed use of funding aligns with the allowable uses of funds and your Health Center Program scope of project, avoids ineligible uses of funding as outlined in this notice of award, and complies with [45 CFR part 75](#) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. If the amount of the costs to be rebudgeted exceeds 25% of the total federal award or shifts funds to a line item in your approved budget that previously had no federal funds, you must submit a prior approval rebudgeting request for review and approval by HRSA.
10. You must respond to the HRSA [Health Center COVID-19 survey](#), until HRSA ends the survey. You must submit periodic progress reports into the HRSA Electronic Handbooks (EHBs) to document the use of Bridge funding. HRSA will monitor implementation of Bridge funding in part by comparing your progress with your approved post-award submission. HRSA will post details to the [Bridge technical assistance webpage](#) when available.
11. If you cannot use all or part the Bridge funding in accordance with the terms of this award for the allowable uses of funds, you must relinquish all or part of the award back to HRSA. If you choose to relinquish all or part of your award, contact the grants management specialist noted on page 1 of this notice of award to discuss the relinquishment process.
12. Bridge funding may be used to purchase supplies necessary for use by health center patients to access in-scope COVID-19-related services via telehealth or virtual care or to support such services via remote monitoring technology. Items may include health and wellness-related technology hardware and software, computer and mobile phone applications, and devices that support patient participation in virtual appointments, remote home monitoring, and engagement in care through telemedicine. If you choose to use HRSA funds to purchase supplies for these purposes, be aware that funds may not be used to provide these items as incentives to individuals to induce them to select the health center as their provider. Additionally, you must ensure such purchases align with your organization's policies and procedures, and maintain appropriate records and cost documentation as required by [45 CFR §75.302](#). HRSA encourages you to review the following guidance on the federal anti-kickback and physician self-referral law. In particular, you cannot provide incentives conditioned on an individual's past or anticipated future use of services that are reimbursable in whole or in part by federal health care programs. For specific inquiries, please contact OIGComplianceSuggestions@oig.hhs.gov.
 - [Office of Inspector General Safe Harbor Regulations](#)
 - [Final Rule: Safe Harbor for Federally Qualified Health Centers Arrangements Under the Anti-Kickback Statute](#)
 - [Office of Inspector General Fraud and Abuse Laws](#)
13. You are expected to monitor and use available COVID-19 guidance and resources, such as those available at the Centers for Disease Control and Prevention [COVID-19 webpage](#) and [CDC COVID-19 Vaccination Program](#). For health center-specific information, see [COVID-19 Information for Health Centers and Partners](#) and the [Health Center Resource Clearinghouse](#).
14. You may use Bridge funding for allowable activities from September 1, 2023 through December 31, 2024. Pre-award costs dating back to June 1, 2023 are allowable with approval of your post-award submission. Such costs must align with the allowable uses of funds and be necessary for efficient and timely performance of your Bridge funding activities. If you draw down funds before your Bridge funding post-award submission is approved, the costs are incurred at your own risk.

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: 10/02/2023**

Within 30 days of award release date (i.e., the date HRSA emailed you this notice of award), you must submit the following in EHBs: (1) SF-424A Budget Form and (2) Budget Narrative, indicating the activities that Bridge funding will support. Include a statement that no staff member will be budgeted at more than 1 FTE across all Federal awards. If you include pre-award costs in your budget, clearly indicate the date incurred. See the [Bridge technical assistance webpage](#) for instructions to support your submission, a Budget Narrative sample, and information for joining a Q&A webinar to address your submission questions.

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
Anna Thomas	Program Director, Business Official, Point of Contact, Authorizing Official	athomas@manchesternh.gov, athomas@manchesternh.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/>).

Chief of Police
Allen D. Aldenberg
Assistant Chief
Peter A. Marr



Commission
John G. Cronin, *Chairman*
Manny Content
Eva Castillo
John Mercier
Gene Brown

CITY OF MANCHESTER
Police Department

August 28, 2023

To: Alderman Stewart, Chairman, CIP Committee
From: Steve Hoefft, BSO

Re: Substance Abuse Reduction Initiative

Attached is the State of New Hampshire, Department of Safety Grant Award in the amount of \$340,953 for the Substance Abuse Reduction Initiative. This is the same program as 410923.

This grant is for 9/01/23 to 8/31/24.

The funds breakdown is as follows:

Salaries	-	\$257,000
Fringes	-	\$ 83,953

Please process this as a project for approval.

Sincerely,

Steven L. Hoefft
Business Service Officer

Michael L. Briggs Public Safety Building
405 Valley Street • Manchester, New Hampshire 03103 • (603) 668-8711 • FAX: (603) 668-8941
E-mail: ManchesterPD@manchesternh.gov • Website: www.manchesterpd.com

A NATIONALLY ACCREDITED LAW ENFORCEMENT AGENCY



City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2024 Community Improvement Program, authorizing and appropriating funds in the amount of Three Hundred Forty Thousand Nine Hundred Fifty Three Dollars (\$340,953) for the FY2024 CIP 411024 Substance Abuse Reduction Initiative.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2024 CIP as contained in the 2024 CIP budget; and

WHEREAS, the 2024 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept STATE funds in the amount of \$340,953 from the NH Dept. of Safety Division of State Police to provide funding to FY2024 CIP 411024 Substance Abuse Reduction Initiative.

NOW, THEREFORE, be it resolved that the 2024 CIP be amended as follows:

By Adding:

FY 2024 CIP 411024 Substance Abuse Reduction Initiative - \$340,953 STATE

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 411024

Project Year: 2024

CIP Resolution: 6/6/2024

Title: Substance Abuse Reduction Initiative

Amending Resolution: 10/17/2024

Administering Department: Police Department

Revision:

Project Description:

Grant to identify, investigate and apprehend individuals and/or organizations that are involved in narcotics use and trafficking.

Federal Grants

Federal Grant: No

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1. Project Initiation

9/01/2023

2. Project Completion

8/31/2024

3.

4.

5.

Line Item Budget

STATE

TOTAL

Salaries and Wages

\$257,000.00

\$0.00

\$0.00

\$257,000.00

Fringes

\$83,953.00

\$0.00

\$0.00

\$83,953.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$0.00

\$0.00

\$0.00

\$0.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$0.00

\$0.00

\$0.00

\$0.00

TOTAL**\$340,953.00****\$0.00****\$0.00****\$340,953.00****Revisions:****Comments:**

Source of Funds: NH Dept. of Safety Division of State Police. Program initiation and completion dates determined by the grantor,

GRANT AGREEMENT

The State of New Hampshire and the Grantee hereby mutually agree as follows:

GENERAL PROVISIONS

1. Identification and Definitions.

1.1. State Agency Name NH Department of Safety Division of State Police		1.2. State Agency Address 33 Hazen Drive Concord, NH 03305	
1.3. Grantee Name Manchester Police Department		1.4. Grantee Address 405 Valley Street, Manchester, NH 03103	
1.5. Effective Date DOJ Approval	1.6. Completion Date 6/30/2024	1.7. Audit Date N/A	1.8. Grant Limitation \$340,953.00
1.9. Grant Officer for State Agency Pamela Urban-Morin		1.10. State Agency Telephone Number (603) 271-7663	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
1.11. Grantee Signature 1		1.12. Name & Title of Grantee Signor 1	
Grantee Signature 2		Name & Title of Grantee Signor 2	
Grantee Signature 3		Name & Title of Grantee Signor 3	
1.13. Acknowledgment: State of New Hampshire, County of _____, on _____ / _____ / _____, before the undersigned officer, personally appeared the person identified in block 1.12., known to me (or satisfactorily proven) to be the person whose name is signed in block 1.11., and acknowledged that he executed this document in the capacity indicated in block 1.12.			
1.13.1. Signature of Notary Public or Justice of the Peace (Seal)			
1.13.2. Name & Title of Notary Public or Justice of the Peace			
1.14. State Agency Signature(s)		1.15. Name & Title of State Agency Signor(s) Amy L. Newbury, Director of Administration	
1.16. Approval by Attorney General (Form, Substance and Execution) By: _____ Assistant Attorney General, On: _____ / _____ / _____			
1.17. Approval by Governor and Council By: _____ On: _____ / _____ / _____			

2. **SCOPE OF WORK:** In exchange for grant funds provided by the state of New Hampshire, acting through the agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:66, the Grantee identified in block 1.3 (hereinafter referred to as "the Grantee"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

3. AREA COVERED. Except as otherwise specifically provided for herein, the Grantee shall perform the Project in, and with respect to, the State of New Hampshire.
4. EFFECTIVE DATE: COMPLETION OF PROJECT.
- 4.1. This Agreement, and all obligations of the parties hereunder, shall become effective on the date in block 1.5 or on the date of approval of this Agreement by the Governor and Council of the State of New Hampshire whichever is later (hereinafter referred to as "the effective date").
- 4.2. Except as otherwise specifically provided herein, the Project, including all reports required by this Agreement, shall be completed in its entirety prior to the date in block 1.6 (hereinafter referred to as "the Completion Date").
5. GRANT AMOUNT: LIMITATION ON AMOUNT: VOUCHERS: PAYMENT.
- 5.1. The Grant Amount is identified and more particularly described in EXHIBIT B, attached hereto.
- 5.2. The manner of, and schedule of payment shall be as set forth in EXHIBIT B.
- 5.3. In accordance with the provisions set forth in EXHIBIT B, and in consideration of the satisfactory performance of the Project, as determined by the State, and as limited by subparagraph 5.5 of these general provisions, the State shall pay the Grantee the Grant Amount. The State shall withhold from the amount otherwise payable to the Grantee under this subparagraph 5.3 those sums required, or permitted, to be withheld pursuant to N.H. RSA 80:7 through 7-c.
- 5.4. The payment by the State of the Grant amount shall be the only, and the complete payment to the Grantee for all expenses, of whatever nature, incurred by the Grantee in the performance hereof, and shall be the only, and the complete, compensation to the Grantee for the Project. The State shall have no liabilities to the Grantee other than the Grant Amount.
- 5.5. Notwithstanding anything in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made, hereunder exceed the Grant limitation set forth in block 1.8 of these general provisions.
6. COMPLIANCE BY GRANTEE WITH LAWS AND REGULATIONS. In connection with the performance of the Project, the Grantee shall comply with all statutes, laws regulations, and orders of federal, state, county, or municipal authorities which shall impose any obligations or duty upon the Grantee, including the acquisition of any and all necessary permits.
7. RECORDS and ACCOUNTS.
- 7.1. Between the Effective Date and the date seven (7) years after the Completion Date the Grantee shall keep detailed accounts of all expenses incurred in connection with the Project, including, but not limited to, costs of administration, transportation, insurance, telephone calls, and clerical materials and services. Such accounts shall be supported by receipts, invoices, bills and other similar documents.
- 7.2. Between the Effective Date and the date seven (7) years after the Completion Date, at any time during the Grantee's normal business hours, and as often as the State shall demand, the Grantee shall make available to the State all records pertaining to matters covered by this Agreement. The Grantee shall permit the State to audit, examine, and reproduce such records, and to make audits of all contracts, invoices, materials, payrolls, records of personnel, data (as that term is hereinafter defined), and other information relating to all matters covered by this Agreement. As used in this paragraph, "Grantee" includes all persons, natural or fictional, affiliated with, controlled by, or under common ownership with, the entity identified as the Grantee in block 1.3 of these general provisions.
8. PERSONNEL.
- 8.1. The Grantee shall, at its own expense, provide all personnel necessary to perform the Project. The Grantee warrants that all personnel engaged in the Project shall be qualified to perform such Project, and shall be properly licensed and authorized to perform such Project under all applicable laws.
- 8.2. The Grantee shall not hire, and it shall not permit any subcontractor, subgrantee, or other person, firm or corporation with whom it is engaged in a combined effort to perform the Project, to hire any person who has a contractual relationship with the State, or who is a State officer or employee, elected or appointed.
- 8.3. The Grant Officer shall be the representative of the State hereunder. In the event of any dispute hereunder, the interpretation of this Agreement by the Grant Officer, and his/her decision on any dispute, shall be final.
9. DATA: RETENTION OF DATA: ACCESS.
- 9.1. As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.
- 9.2. Between the Effective Date and the Completion Date the Grantee shall grant to the State, or any person designated by it, unrestricted access to all data for examination, duplication, publication, translation, sale, disposal, or for any other purpose whatsoever.
- 9.3. No data shall be subject to copyright in the United States or any other country by anyone other than the State.
- 9.4. On and after the Effective Date, all data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason, whichever shall first occur.
- 9.5. The State, and anyone it shall designate, shall have unrestricted authority to publish, disclose, distribute and otherwise use, in whole or in part, all data.
10. CONDITIONAL NATURE OR AGREEMENT. Notwithstanding anything in this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability or continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available or appropriated funds. In the event of a reduction or termination of those funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Grantee notice of such termination.
11. EVENT OF DEFAULT: REMEDIES.
- 11.1. Any one or more of the following acts or omissions of the Grantee shall constitute an event of default hereunder (hereinafter referred to as "Events of Default"):
 - 11.1.1 Failure to perform the Project satisfactorily or on schedule; or
 - 11.1.2 Failure to submit any report required hereunder; or
 - 11.1.3 Failure to maintain, or permit access to, the records required hereunder; or
 - 11.1.4 Failure to perform any of the other covenants and conditions of this Agreement.
- 11.2. Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:
 - 11.2.1 Give the Grantee a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Grantee notice of termination; and
 - 11.2.2 Give the Grantee a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the Grant Amount which would otherwise accrue to the grantee during the period from the date of such notice until such time as the State determines that the Grantee has cured the Event of Default shall never be paid to the Grantee; and
 - 11.2.3 Set off against any other obligation the State may owe to the Grantee any damages the State suffers by reason of any Event of Default; and
 - 11.2.4 Treat the agreement as breached and pursue any of its remedies at law or in equity, or both.
12. TERMINATION.
- 12.1. In the event of any early termination of this Agreement for any reason other than the completion of the Project, the Grantee shall deliver to the Grant Officer, not later than fifteen (15) days after the date of termination, a report (hereinafter referred to as the "Termination Report") describing in detail all Project Work performed, and the Grant Amount earned, to and including the date of termination.
- 12.2. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall entitle the Grantee to receive that portion of the Grant amount earned to and including the date of termination.
- 12.3. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall in no event relieve the Grantee from any and all liability for damages sustained or incurred by the State as a result of the Grantee's breach of its obligations hereunder.
- 12.4. Notwithstanding anything in this Agreement to the contrary, either the State or, except where notice default has been given to the Grantee hereunder, the Grantee may terminate this Agreement without cause upon thirty (30) days written notice.
13. CONFLICT OF INTEREST. No officer, member of employee of the Grantee, and no representative, officer or employee of the State of New Hampshire or of the governing body of the locality or localities in which the Project is to be performed, who exercises any functions or responsibilities in the review or

- approval of the undertaking or carrying out of such Project, shall participate in any decision relating to this Agreement which affects his or her personal interest or the interest of any corporation, partnership, or association in which he or she is directly or indirectly interested, nor shall he or she have any personal or pecuniary interest, direct or indirect, in this Agreement or the proceeds thereof.
14. GRANTEE'S RELATION TO THE STATE. In the performance of this Agreement the Grantee, its employees, and any subcontractor or subgrantee of the Grantee are in all respects independent contractors, and are neither agents nor employees of the State. Neither the Grantee nor any of its officers, employees, agents, members, subcontractors or subgrantees, shall have authority to bind the State nor are they entitled to any of the benefits, workmen's compensation or emoluments provided by the State to its employees.
15. ASSIGNMENT AND SUBCONTRACTS. The Grantee shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the State. None of the Project Work shall be subcontracted or subgranted by the Grantee other than as set forth in Exhibit A without the prior written consent of the State.
16. INDEMNIFICATION. The Grantee shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based on, resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Grantee or Subcontractor, or subgrantee or other agent of the Grantee. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant shall survive the termination of this agreement.
17. INSURANCE AND BOND.
- 17.1 The Grantee shall, at its own expense, obtain and maintain in force, or shall require any subcontractor, subgrantee or assignee performing Project work to obtain and maintain in force, both for the benefit of the State, the following insurance:
- 17.1.1 Statutory workmen's compensation and employees liability insurance for all employees engaged in the performance of the Project, and
- 17.1.2 Comprehensive public liability insurance against all claims of bodily injuries, death or property damage, in amounts not less than \$1,000,000 per occurrence and \$2,000,000 aggregate; and
- 17.2. The policies described in subparagraph 17.1 of this paragraph shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire. Each policy shall contain a clause prohibiting cancellation or modification of the policy earlier than ten (10) days after written notice thereof has been received by the State.
18. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event, or any subsequent Event. No express waiver of any Event of Default shall be deemed a waiver of any provisions hereof. No such failure of waiver shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other default on the part of the Grantee.
19. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses first above given.
20. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Council of the State of New Hampshire.
21. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the law of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assignees. The captions and contents of the "subject" blank are used only as a matter of convenience, and are not to be considered a part of this Agreement or to be used in determining the intent of the parties hereto.
22. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.
23. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings relating hereto.
24. SPECIAL PROVISIONS. The additional provisions set forth in Exhibit C hereto are incorporated as part of this agreement.

EXHIBIT A
SCOPE OF SERVICES

1. The Department of Safety, Division of State Police (hereinafter referred to as “the State”) is awarding the Manchester Police Department (hereinafter referred to as “the Grantee”) \$340,953.00 for the purpose of investigating and apprehending individuals or organizations that are involved in narcotics related drug use and trafficking.
2. “The Grantee” agrees that the project grant period ends June 30, 2024 and that all expenses must be incurred and paid prior to this date and reimbursement requests submitted on form DSAD 69 must be submitted to the Department of Safety, Grants Management Bureau, prior to June 30, 2024.
3. “The Grantee” agrees to comply with all applicable federal and state laws, rules, regulations, and requirements.
4. “The Grantee”, is responsible for the overall direction and assignment of all grant funded activities.
5. The grant application as submitted by “the Grantee” is hereby fully incorporated into this grant agreement.

EXHIBIT B
GRANT AMOUNT AND METHOD OF PAYMENT

1. Grant Amount: \$340,953.00
2. Payment Schedule
 - a. “The Grantee” agrees that the total payment by “the State” under this grant agreement shall be up to \$340,953.00.
 - b. “The State” shall reimburse up to \$340,953.00 to “the Grantee” upon “the State” receiving appropriate documentation of expended funds (i.e: copies of payroll documentation and proof of payment) submitted with form DSAD 69.
 - c. “The Grantee” is responsible for the overall direction and assignment of all 2024 Law Enforcement Substance Abuse Reduction Initiative grant funded activities. When “the Municipality” is assigned grant funded activities by “the Grantee”, “the State” will reimburse “the Municipality” directly upon receiving appropriate documentation of expended funds and approval from “the Grantee”. Payments made directly to “the Municipality” will be considered payments made to “the Grantee” for the purposes of this grant agreement.

EXHIBIT C

SPECIAL PROVISIONS

1. Grant expenses must be incurred and paid prior to June 30, 2024. All grant reimbursement requests must be submitted prior to June 30, 2024 using form DSAD 69. Only expenses approved as outlined in Exhibit A and outlined in Saf-C 2904.02 Allowable Costs may be reimbursed. Reimbursement requests shall meet all requirements of Saf-C 2908 Administrative Requirements.
2. “The Grantee” shall maintain financial records, supporting documents, and all other pertinent records for a period of 3 years from the grant period end date per Saf-C 2909.01 Recordkeeping.
3. Grant Agreement Revision to Provision 16. INDEMNIFICATION. The Grantee shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based on, resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Grantee or Subcontractor, or subgrantee or other agent of the Grantee. ***The Grantee’s liability herein shall not exceed the amount of \$1,000,000.*** Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant shall survive the termination of this agreement.

Ryan J. Cashin
Chief of Department



Matthew A. K. Lamothe
Assistant Chief

David P. Flurey
Deputy Chief

City of Manchester *Fire Department*

TO: Alderman Stewart, Committee Chair
FROM: Chief Ryan Cashin
DATE: September 18, 2023
RE: Permission to Accept: FY 2023 EOC Grant

I am seeking permission to accept a State of New Hampshire Department of Safety, EOC Grant Award in the amount of \$338,000 for renovations to the City's Emergency Operations Center.

This grant is valid from 09/18/2023 through 08/31/2026.

The funds are to be used for renovations to the City's EOC and the breakdown is as follows:

- Equipment \$200,000
- Supplies \$60,000
- Contractual \$78,000

This grant carries a cost share of \$112,667, for a total project cost of \$450,667.

Please process this as a project for approval, as well as a Certificate of Authority so that the award packet may be completed.

Thank you,

Ryan J. Cashin
Fire Chief

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2024 Community Improvement Program, authorizing and appropriating funds in the amount of Three Hundred Thirty Eight Thousand Dollars (\$338,000) for the FY2024 CIP 411124 City’s EOC Renovations.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2024 CIP as contained in the 2024 CIP budget; and

WHEREAS, the 2024 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept funding in the amount of \$338,000 from the New Hampshire Department of Safety to provide funding to FY2024 CIP 411124 City’s EOC Renovations.

NOW, THEREFORE, be it resolved that the 2024 CIP be amended as follows:

By Adding:

FY 2024 CIP 411124 City’s EOC Renovations - \$338,000 STATE

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 411124

Project Year: 2024

CIP Resolution: 6/6/2024

Title: City's EOC Renovations

Amending Resolution: 10/17/2023

Administering Department: Fire Department

Revision:

Project Description: Funds to be used for renovations to the City's EOC

Federal Grants

Federal Grant: No

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1. Project Initiation

9/18/2023

2. Project Completion

8/31/2026

3.

4.

5.

8/31/2026

Line Item Budget

STATE

Salaries and Wages

\$0.00

\$0.00

\$0.00

\$0.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$200,000.00

\$0.00

\$0.00

\$200,000.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$78,000.00

\$0.00

\$0.00

\$78,000.00

Other

\$60,000.00

\$0.00

\$0.00

\$60,000.00

TOTAL**\$338,000.00****\$0.00****\$0.00****\$338,000.00****Revisions:****Comments:** Funding comes from NH Department of Safety

Planning Department/Startup Form - 07/1/20

\$338,000.00

Ryan J. Cashin
Chief of Department



Matthew A. K. Lamothe
Assistant Chief

David P. Flurey
Deputy Chief

City of Manchester *Fire Department*

TO: Alderman Stewart, Committee Chair
FROM: Chief Ryan Cashin
DATE: September 18, 2023
RE: Permission to Accept: FY 2021 Hazmat Collaborative Allocation

I am seeking permission to accept a State of New Hampshire Department of Safety, State Homeland Security Award in the amount of \$2,000 for the FY 2021 Hazmat Collaborative Allocation.

This grant is valid from 08/22/2023 through 08/31/2024.

The funds are to be used solely for the purchase of a High Range Frisker – HazMat Detection Equipment.

Please process this as a project for approval, as well as a Certificate of Authority so that the award packet may be completed.

Thank you,

Ryan J. Cashin
Fire Chief

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2024 Community Improvement Program, authorizing and appropriating funds in the amount of Two Thousand Dollars (\$2,000) for the FY2024 CIP 411224 FY 2021 Hazmat Collaborative Allocation.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2024 CIP as contained in the 2024 CIP budget; and

WHEREAS, the 2024 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept funding in the amount of \$2,000 from the New Hampshire Department of Safety to provide funding to FY2024 CIP 411224 FY 2021 Hazmat Collaborative Allocation.

NOW, THEREFORE, be it resolved that the 2024 CIP be amended as follows:

By Adding:

FY 2024 CIP 411224 FY 2021 Hazmat Collaborative Allocation - \$2,000 STATE

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 411224

Project Year:

CIP Resolution:

6/6/2023

Title: FY 2021 Hazmat Collaborative Allocation

Amending Resolution:

10/17/2023

Administering Department: Fire Department

Revision:

Project Description:

Funds to purchase High Range Frisker-HazMat Detection Equipment

Federal Grants

Federal Grant:

No

Environmental

Review Required:

No

Grant Executed:

Completed:

Critical Events

1. Project Initiation

8/22/2023

2. Project Completion

8/31/2024

3.

4.

5.

8/31/2024

Line Item Budget

STATE

Salaries and Wages

\$0.00

\$0.00

\$0.00

\$0.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$2,000.00

\$0.00

\$0.00

\$2,000.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$0.00

\$0.00

\$0.00

\$0.00

TOTAL**\$2,000.00****\$0.00****\$0.00****\$2,000.00****Revisions:****Comments:**

Funding from NH Department of Safety

Timothy J. Clougherty
Public Works Director

Owen P. Friend-Gray, P.E.
Deputy Public Works Director



Commission
Kathleen Sullivan, Chair
Arthur Gatzoulis, Co-Chair
Mark MacKenzie
Amber Nicole Cannan
Andre Parent

CITY OF MANCHESTER
Department of Public Works

September 13, 2023

Board of Mayor and Alderman
c/o CITY CLERKS OFFICE
One City Hall Plaza
Manchester, New Hampshire 03103

Attention: Alderman Will Stewart
Chairman, CIP Committee

Subject: Transfer of Funds to CIP 510712

Dear Alderman Stewart:

The Department of Public Works (DPW) respectfully requests that \$48,623.00 in funds be transferred from CIP 711422 –Rail Trail Construction into CIP 510712 –South Manchester Rail Trail.

The additional funds are required due to the required match to state funds for additional work. In addition, it is requested that \$194,492.00 in state funding be accepted for this project.

A technical correction has also been made to correctly identify the funds still available in CIP 711422 because Revision #3 was for a transfer of \$54,348.45 in bond funds however the project was only reduced by \$50,909.45. Due to this, the current Revision #4 of the CIP Budget Authorization shows a reduction of bond funds and total funds of \$52,062.00 (\$48,623.00+ \$3,439.00)

A DPW representative will be available for discussion at the next Board of Mayor and Alderman meeting. In the meantime, if you have any questions, please do not hesitate to contact me.

Very truly yours,

Caleb B. Dobbins, P.E.
Highway Chief Engineer

Cc/ Tim Clougherty
Owen Friend-Gray

City of Manchester *New Hampshire*

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2012 and FY2022 Community Improvement Program, authorizing, appropriating and transferring funds in the amount of Two Hundred Forty Three Thousand One Hundred Fifteen Dollars (\$243,115.00) for the FY2012 CIP 510712 South Manchester Rail Trail.

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2012 and 2022 CIP as contained in the 2012 and 2022 CIP budget; and

WHEREAS, the 2012 and 2022 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to accept and effect the transfer of funds from FY2022 CIP 711422 Rail Trail Construction and accept the funds from the NH Department of Transportation to FY2012 CIP 510712 South Manchester Rail Trail;

NOW, THEREFORE, be it resolved that the 2012 and 2022 CIP be amended as follows:

By increasing:

FY 2012 CIP 510712 South Manchester Rail Trail - \$48,623.00 BOND

FY 2012 CIP 510712 South Manchester Rail Trail - \$194,492.00 STATE

By decreasing:

FY 2022 CIP 711422 Rail Trail Construction - \$48,623.00 BOND

Resolved, that this Resolution shall take effect upon its passage

CIP BUDGET AUTHORIZATION

CIP#: 510712 Project Year: 2012 CIP Resolution: 6/14/2011
Title: South Manchester Rail Trail Amending Resolution: 10/17/2023
Administering Department Highway Department-Parks Division Revision: #7

Project Description: To construct the second phase of the South Manchester Rail Trail from Gold Street to Goffs Falls Road.

Federal Grants Federal Grant: No **Environmental** Review Required: No
Grant Executed: Completed:

Critical Events

1	Program Initiation	11/1/2011
2	Program Completion	6/30/2028
3		
4		
5		

Expected Completion Date: 6/30/2028

Line Item Budget

	STATE	OTHER	BOND	TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$3,065,444.28	\$316,470.83	\$449,971.45	\$3,831,886.56
TOTAL	\$3,065,444.28	\$316,470.83	\$449,971.45	\$3,831,886.56

Revisions #7 10-17-23 - Increase budget by \$243,115.00. Increase STATE \$194,492 (\$2,870,952.28 to \$3,065,444.28)
Increase BOND \$48,623.00 (\$401,348.45 to \$449,971.45)
#6 - Increase STATE from \$2,653,558.48 to \$2,870,952.28 (\$217,393.80 additional STATE funding). Increase BOND
\$54,348.45 (from \$347,000 to \$401,348.45) . Funds transferred from 711422

Comments: It also make technical correction from Revision from Revision #4 which should show BOND Funds.
#5 - Increase STATE from \$1,213,604.00 to \$2,653,558.48
#4- Extend completion date from 6/30/23 to 6/30/2028
#3 Increase budget \$347,000 (BOND) from \$1,530,074.83 to \$1,877,074.83 funds come from CIP 711422.
#2 Increases Other budget \$13,070.83 from \$303,400 to \$316,470.83 due to transfer of funds from CIP #511411
#1-Increases budget by \$303,400 Other from CIP Project #711614 and Project #713508 and increases State by

CIP BUDGET AUTHORIZATION

CIP#: 711422

Project Year: 2022

CIP Resolution: 6/8/2021

Title: Rail Trail Construction

Amending Resolution: 10/17/2023

Administering Department DPW-Highway

Revision: #4

Project Description: Design and/or construct of rail trail projects throughout the city, including, but not limited to, the Crosstown Connector.

Federal Grants

Federal Grant: No

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1.	Project Initiation	7/1/2021
2.	Project Completion	6/30/2031
3.		
4.		
5.		
		6/30/2031

Line Item Budget

	BOND	OTHER		TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$550,028.55	\$3,439.00	\$0.00	\$553,467.55
TOTAL	\$550,028.55	\$3,439.00	\$0.00	\$553,467.55

Revisions:

#4 - 10/17/23 - Decrease budget by \$48,623.00 BOND (\$602,090.55 to \$553,467.55) and transfers to CIP #510712
 #3 --Decrease budget by \$54,348.45 BOND (\$656,439.00 to \$602,090.55) transfers money to CIP #510712
 #2 Increase budget \$3,439 OTHER (From \$653,000 to \$656,439).

Comments:

Revision #1 - Decrease budget by \$347,000 (from \$1,000,000 to \$653,000) and transfer to CIP # 510712
 Change project description and name to address more immediate rail trail needs.

Planning Department/Startup Form - 07/1/20

\$553,467.55



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Planning & Land Use Management
Building Regulations
Code Enforcement Division
Community Improvement Program

Jeffrey D. Belanger, AICP
Director

Pamela H. Goucher, AICP
Deputy Director of Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director of Building Regulations

MEMORANDUM

To: Alderman Will Stewart
Chairman, CIP Committee

From: Jeffrey Belanger, AICP
Director, Planning and Community Development

Job

Date: September 25, 2023

Re: CIP #611023 2022 Lead-Based Paint Hazard Reduction Grant Program – Matching Funds

Attached we have submitted for the Committee's consideration an amending resolution that adds \$100,000 of unprogrammed CDBG funds to the 2022 Lead-Based Paint Hazard Reduction Grant Program to meet the City's \$300,000 matching commitment. HUD requires matching funds from municipal recipients of Lead grants, and using CDBG funds has been Manchester's consistent method of meeting the match requirement with prior Lead grants.

Respectfully, I request that the Committee recommend the acceptance of this Amending Resolution and Budget Authorization Form to the full Board.

City of Manchester
New Hampshire

In the year Two Thousand and Twenty Three

A RESOLUTION

“Amending the FY2023 Community Improvement Program, authorizing and appropriating funds in the amount of One Hundred Thousand Dollars (\$100,000) for the FY 2023 CIP 611023 2022 Lead-Based Paint Hazard Reduction Grant Program.”

Resolved by the Board of Mayor and Aldermen of the City of Manchester as follows:

WHEREAS, the Board of Mayor and Aldermen has approved the 2023 CIP as contained in the CIP budget; and

WHEREAS, the 2023 CIP contains all sources of funds to be used in the execution of projects; and

WHEREAS, the Board of Mayor and Aldermen wishes to allocate federal funding from the U.S. Department of Housing and Urban Development Office of Healthy Homes and Lead Hazard Control to assist the City in the reduction and elimination of lead based paint hazards in Manchester housing units; and

WHEREAS, the Board of Mayor and Alderman wishes to allocate a portion of unprogrammed CDBG funds to be used for the City’s required match within the 2022 Lead-Based Paint Hazard Reduction Grant Program;

NOW, THEREFORE, be it resolved that the 2023 CIP be amended as follows:

By increasing:

FY 2023 611023 2022 Lead-Based Paint Hazard Reduction Program - \$100,000 CDBG

Resolved, that this Resolution shall take effect upon its passage.

CIP BUDGET AUTHORIZATION

CIP#: 611023	Project Year: 2023	CIP Resolution: 5/17/2022
Title: 2022 Lead-Based Paint Hazard Reduction Grant Program	Amending Resolution: 10/17/2023	
Administering Department: Planning & Community Development	Revision: #1	

Project Description: Program to assist property owners with the elimination of lead based paint hazards. Lead hazards to be eliminated in a minimum of 200 housing units over a forty-eight month period.

Federal Grants	Federal Grant: Yes	Environmental	Review Required: Yes
	Grant Executed:		Completed: Pending

Critical Events

1.	Program Initiation	11/15/2022
2.	Program Completion	12/31/2026
3.		
4.		
5.		
		12/31/2026

Line Item Budget

Line Item Budget	FEDERAL	CDBG	OTHER	TOTAL
Salaries and Wages	\$551,533.00	\$0.00	\$0.00	\$551,533.00
Fringes	\$332,000.00	\$0.00	\$0.00	\$332,000.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$869,185.00	\$0.00	\$0.00	\$869,185.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$2,400,000.00	\$50,000.00	\$300,000.00	\$2,750,000.00
Other	\$515,107.00	\$0.00	\$0.00	\$515,107.00
TOTAL	\$4,667,825.00	\$50,000.00	\$300,000.00	\$5,017,825.00

Revisions: Revision #1 - Increases CDBG budget \$100,000 (from \$50,000 to \$150,000) 10-17-23

Comments: \$4,667,825 of Federal Funding from U.S. Department of Housing and Urban Development Office of Healthy Homes and Lead Hazard Control; \$50,000 of unprogrammed CDBG (City Match); \$300,000 of Other funding from required Property Owner Match.



CITY OF MANCHESTER

MEMORANDUM

To: Chair Stewart, Committee on Community Improvement
From: Mayor Joyce Craig
Date: September 20, 2023
Re: Project 811722

Dear Alderman Stewart,

The Mayor's Office requests that CIP Project 811722 be extended from 12/31/22 to 09/30/2027, and that the Manchester Economic Development Office be named the Administering Department for the project.

CIP BUDGET AUTHORIZATION

CIP#: 811722

Project Year: 2022

CIP Resolution: 6/8/2021

Title: Southern NH Build Back Better Regional Challenge

Amending Resolution: 10/17/2023

Administering Department Manchester Economic Development Office

Revision: #2

Project Description: Funding to assist in the development of the Phase 2 Build Back Better Regional Challenge application.

Federal Grants

Federal Grant: Yes

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1.	Project Initiation	12/21/2021
2.	Project Completion	9/30/2027
3.		
4.		
5.		
		9/30/2027

Line Item Budget

	FEDERAL	OTHER		TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$500,000.00	\$7,500.00	\$0.00	\$507,500.00
TOTAL	\$500,000.00	\$7,500.00	\$0.00	\$507,500.00

Revisions: #1- 2/15/22 Increase budget by \$7,500 (from \$500,000 to \$507,500). Funds transferred from CIP #812421.
#2- 10/17/23 Extend completion date from 12/31/22 to 9/30/2027 and change the administering department from Mayor's Office to the Manchester Economic Development Office

Comments: Source of Funding - Economic Development Administration

Planning Department/Startup Form - 07/1/20

\$507,500.00

City of Manchester
Housing Stability



Adrienne Beloin
Director

To: Alderman Will Stewart
RE: CIP Allocation Request

I am writing to request that the following budget authorizations be revised to change the administering department from Fire Department to Department of Housing Stability.

CIP 410322 ARPA - Director of Homelessness Initiatives

CIP 810324 ARPA – Coordinator

CIP 610024 ARPA - Winter Emergency Shelter

CIP 611423 ARPA - Homelessness Response & Emergency Shelter Operations

CIP 212023 Gatehouse TST Initiative

Thank you,
Adrienne Beloin

CIP BUDGET AUTHORIZATION

CIP#:	212023	Project Year:	2023	CIP Resolution:	5/17/2022
Title:	Gatehouse TST Initiative			Amending Resolution:	10/17/2023
Administering Department	Department of Housing Stability			Revision:	#1

Project Description: Triage through intensive street outreach with a goal of detox and placement for individuals with co-occurring mental health and substance use disorders. Stabilization will include a continuum of care for all individuals screened and placed in triage from phase one only. Stabilization may include a psychiatric unit, residential level of care, partial hospitalization program, intensive outpatient program with housing, and supportive housing. Transition will consist of sober living homes throughout the city of Manchester and throughout the state of New Hampshire.

Federal Grants	Federal Grant:	Yes	Environmental	Review Required:	No
	Grant Executed:			Completed:	

Critical Events

1.	Program Initiation	2/21/2023
2.	Program Completion	3/1/2024
3.		
4.		
5.		
		3/1/2024

Line Item Budget

	STATE	ARPA		TOTAL
Salaries and Wages	\$0.00	\$0.00	\$0.00	\$0.00
Fringes	\$0.00	\$0.00	\$0.00	\$0.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$350,000.00	\$150,000.00	\$0.00	\$500,000.00
TOTAL	\$350,000.00	\$150,000.00	\$0.00	\$500,000.00

Revisions: #1- 9/5/23 Increases budget \$200,000 (\$300,000 to \$500,000) \$200,000 of State funds transferred from CIP 211723
#2 - 10/17/23 change administering department from Fire Dept. to Department of Housing Stability

Comments: \$150,000 transferred from CIP #211723 Opioid Litigation Settlement Trust and \$150,000 transferred from CIP #811422 ARPA - Revenue Replacement (Budget)

Planning Department/Startup Form - 07/1/20

\$500,000.00

CIP BUDGET AUTHORIZATION

CIP#: 410322	Project Year: 2022	CIP Resolution: 6/8/2021
Title: ARPA - Director of Homelessness Initiatives	Amending Resolution: 10/17/2023	
Administering Department Department of Housing Stability	Revision: #2	

Project Description:

Federal Grants

Federal Grant:

Grant Executed:

Environmental

Review Required:

Completed:

Critical Events

1.	Project Initiation	8/1/2021
2.	Project Completion	12/31/2026
3.		
4.		
5.		
		12/31/2026

Line Item Budget

Line Item Budget	FEDERAL			TOTAL
Salaries and Wages	\$384,556.86	\$0.00	\$0.00	\$384,556.86
Fringes	\$182,290.50	\$0.00	\$0.00	\$182,290.50
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL	\$566,847.36	\$0.00	\$0.00	\$566,847.36

Revisions:

Funds transferred from CIP #810622. #1- 7/20/21 Decrease budget by \$144,000 (from \$710,847.36 to \$566,847.36), and transfer to CIP #811422. #2 10/17/23 Changes the administrating department from Fire Dept. to Department of Housing Stability

Comments:

Funding from the US Dept of Treasury.

CIP BUDGET AUTHORIZATION

CIP#:	611423	Project Year:	2023	CIP Resolution:	5/17/2022
Title:	ARPA - Homelessness Response & Emergency Shelter Operations			Amending Resolution:	10/17/2023
Administering Department	Department of Housing Stability			Revision:	#3

Project Description: Funding to support emergency shelter operations and the City's response to the homelessness crisis. Response to include reimbursement of various City Department details and expenditures.

Federal Grants

Federal Grant: Yes

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1.	Project Initiation	1/1/2023
2.	Project Completion	12/31/2023
3.		
4.		
5.		
		12/31/2023

Line Item Budget

	ARPA	AHTF	OTHER	TOTAL
Salaries and Wages	\$197,000.00	\$0.00	\$0.00	\$197,000.00
Fringes	\$101,000.00	\$0.00	\$0.00	\$101,000.00
Design/Engineering	\$0.00	\$0.00	\$0.00	\$0.00
Planning	\$0.00	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00	\$0.00
Construction Admin	\$0.00	\$0.00	\$0.00	\$0.00
Land Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Overhead	\$0.00	\$0.00	\$0.00	\$0.00
Construction Contracts	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$100,000.00	\$226,991.00	\$615,250.00	\$942,241.00
TOTAL	\$398,000.00	\$226,991.00	\$615,250.00	\$1,240,241.00

Revisions:

#1 - Changes administering department from Planning and Community Development to Miscellaneous. Miscellaneous departments responding to the homelessness emergency shall include but not be limited to Police, Fire, MTA and DPW. #2 - 5/16/23 Budget increased \$565,250 (\$515,250 Hillsborough County ARPA & \$50,000 donations) (from \$674,991 to \$1,240,241). #3 - 10/17/23 changes administrating department from Fire Dept. to Department of

Comments:

Housing Stability.

Funding Source: ARPA funds from the U.S. Department of Treasury.
\$398,000 tranferred from CIP #811222, \$226,991 from unprogrammed AHTF, Other Budget - \$100,000 to come from donations and \$515,250 to come from Hillsborough County ARPA funding.

Planning Department/Startup Form - 07/1/20

\$1,240,241.00

CIP BUDGET AUTHORIZATION

CIP#: 610024

Project Year: 2024

CIP Resolution: 6/6/2023

Title: Winter Emergency Shelter

Amending Resolution: 10/17/2023

Administering Department: Department of Housing Stability

Revision: #1

Project Description: Funding to support emergency shelter operations and the City's response to the homelessness crisis.

Federal Grants

Federal Grant: Yes

Environmental

Review Required: Yes

Grant Executed:

Completed: Yes

Critical Events

1. Project Initiation

7/1/2023

2. Project Completion

6/30/2024

3.

4.

5.

6/30/2024

Line Item Budget

CDBG

ARPA

TOTAL

Salaries and Wages

\$0.00

\$0.00

\$0.00

\$0.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$0.00

\$0.00

\$0.00

\$0.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$100,000.00

\$1,000,000.00

\$0.00

\$1,100,000.00

TOTAL**\$100,000.00****\$1,000,000.00****\$0.00****\$1,100,000.00****Revisions:** #1- 10/17/2023 Change the administering department from Fire Dept. to Department of Housing Stability**Comments:** Authorization of Entitlement funds is contingent upon HUD grant execution.

CIP BUDGET AUTHORIZATION

CIP#: 810324

Project Year: 2024

CIP Resolution: 6/6/2023

Title: Coordinator

Amending Resolution: 10/17/2023

Administering Department: Department of Housing Stability

Revision: #1

Project Description: Funding for the position that will provide administrative support to the Director of Homelessness Initiatives to assist individuals experiencing homelessness and/or substance abuse disorders.

Federal Grants

Federal Grant: Yes

Environmental

Review Required: No

Grant Executed:

Completed:

Critical Events

1. Project Initiation

7/1/2023

2. Project Completion

6/30/2024

3.

4.

5.

6/30/2024

Line Item Budget

ARPA

Salaries and Wages

\$100,000.00

\$0.00

\$0.00

\$100,000.00

Fringes

\$0.00

\$0.00

\$0.00

\$0.00

Design/Engineering

\$0.00

\$0.00

\$0.00

\$0.00

Planning

\$0.00

\$0.00

\$0.00

\$0.00

Consultant Fees

\$0.00

\$0.00

\$0.00

\$0.00

Construction Admin

\$0.00

\$0.00

\$0.00

\$0.00

Land Acquisition

\$0.00

\$0.00

\$0.00

\$0.00

Equipment

\$0.00

\$0.00

\$0.00

\$0.00

Overhead

\$0.00

\$0.00

\$0.00

\$0.00

Construction Contracts

\$0.00

\$0.00

\$0.00

\$0.00

Other

\$0.00

\$0.00

\$0.00

\$0.00

TOTAL

\$100,000.00

\$0.00

\$0.00

\$100,000.00

Revisions: #1 - 10/17/2023 Change administering department from Fire Dept. to Department of Housing Stability**Comments:**

Planning Department/Startup Form - 07/1/20

\$100,000.00

Lisa Drabik
Human Resources Director



CITY OF MANCHESTER

Human Resources Department

TO: Alderman Stewart, Committee Chair
FROM: Kevin Kincaid, Security Manager
DATE: September 18, 2023
RE: Permission to Apply

I am requesting permission to apply, including a Certificate of Authority, for the FY 2024 Homeland Security Grant in the amount of \$750,000 to upgrade the City's access control systems and security cameras. This grant does not have a cost share.

Thank you,

Kevin M. Kincaid Digitally signed by Kevin M. Kincaid
Date: 2023.09.27 09:52:41 -04'00'

Kevin Kincaid

Security Manager



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Jeffrey D. Belanger, AICP
Director

Planning & Land Use Management
Building Regulations
Code Enforcement Division
Community Improvement Program

Pamela H. Goucher, AICP
Deputy Director of Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director of Building Regulations

MEMORANDUM

To: Alderman Will Stewart
Chairman, CIP Committee

From: Jeffrey Belanger, AICP
Director, Planning and Community Development

Date: September 25, 2023

Re: CIP #611619 Lead Hazard Control Program – Mortgage Subordination – 23-25 Arlington Street

Michael Bunie, the owner of 23-25 Arlington Street has contacted this office to request the subordination of a City lien totaling \$76,790 placed upon the aforementioned property. The lien was placed due to the use of Lead Hazard Control Program Grant funds used to pursue lead abatement and renovation at the property. This is a forgivable loan which will be forgiven May 24, 2024 if annual compliance requirements have been met.

The requested subordination will allow the owner to acquire a new mortgage in order to raise equity to settle a divorce decree. The new mortgage will be collateralized with five other Manchester properties. The owner represents that the City's security instrument will remain in the same position. The owner has also indicated that the subject property is currently valued at \$909,000.

Documentation that the staff has received confirms that there is sufficient value in the properties to repay the primary lender and the City in the event of foreclosure.

Respectfully, I request that the Committee make a recommendation to accept or deny the subordination request to the full Board.



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Planning & Land Use Management
Building Regulations
Code Enforcement Division
Community Improvement Program

Jeffrey D. Belanger, AICP
Director

Pamela H. Goucher, AICP
Deputy Director of Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director of Building Regulations

MEMORANDUM

To: Alderman Will Stewart
Chairman, CIP Committee

From: Jeffrey Belanger, AICP *JDB*
Director, Planning and Community Development

Date: September 25, 2023

Re: CIP #610810, 329 Douglas Street, Request to Subordinate City Lien

Christine Demers is requesting the subordination of a city lien for \$20,000 placed on her house at 329 Douglas Street. The lien was imposed in 2009 as part of the Down Payment Assistance Program, which used HOME funds to help first-time homebuyers. The terms of the City's loans for this program require repayment upon sale or transfer of the property. As Ms. Demers explains in her attached letter, she intends to take out a home-equity line of credit (HELOC) for \$35,000 to pay off the remainder of a different home-equity loan and use the remaining money to make improvements to her house.

To determine whether to grant the request, I recommend that you follow the CIP Committee Subordination Policy that the Board of Mayor and Aldermen adopted in 2022. As stated in the Policy, the Committee is not required to grant any request to subordinate a lien; however, the Committee may do so, if a number of criteria are met.

First, the total mortgage debt on the property must not exceed its appraised value. That would be the case, here. The total debt on the property would be \$151,515, comprised of the HELOC for \$35,000, the city loan for \$20,000, and a mortgage with a remaining balance of \$96,515. The documents included with Ms. Demers's letter show an estimation of the property's value of \$352,182 from Freddie Mac. Accordingly, all debts could be paid in the event of foreclosure. Please note that the City's lien would remain in third position, after the mortgage and the HELOC.

Second, one of the four following circumstances must be met:

1. The property owner must intend to refinance to reduce the mortgage rate or increase the term affordability in a way that increases the economic viability of the property, and no cash equity may be withdrawn; or
2. The property owner must intend to refinance to withdraw cash equity to make capital improvements to the property, and no proceeds from the refinance may be used for anything other than improvements to the property; or

3. For owner-occupied properties or rental properties with up to four units, the property owner must intend to refinance to withdraw cash equity to offset extenuating financial circumstances, such as medical expenses, emergency home repairs, or other justifiable hardships; or
4. There are other circumstances deemed appropriate by the Committee.

In this case, Ms. Demers's intent with the refinance fits fairly closely with the second circumstance. She would use the \$35,000 HELOC to pay of the remaining balance of a prior home-equity loan, which she initially took out to make capital improvements to the property. After paying the balance on that loan of \$16,744, she would use the remaining amount of the HELOC, which is \$18,256, to make further improvements to the house.

Third, the new loan must be a fixed-rate, rather than an adjustable, mortgage. In this case, the HELOC would have a fixed rate of 8%.

Fourth, the property must have a clear deed and property insurance and must be up-to-date on water, sewer, property tax payments, and all applicable city fees. In this case, the bank making the HELOC has received a certificate of title from a law firm. Ms. Demers has submitted a copy of her homeowner's insurance policy. Water Works, DPW, and the Tax Collector have informed PCD that the property is up-to-date on its fees.

Additionally, the Policy requires that, when the property owner takes out a cash-equity loan, he or she must submit a statement from the lender confirming that the cash being taken out is for an eligible use. In this case, the lender, Members First Credit Union, has submitted a letter stating that the HELOC will be used to pay off a home-equity loan and to make additional improvements to the property. It is my interpretation of the Policy that paying off a prior home-equity loan that was taken out to improve the property, and using the remaining amount of the HELOC to make additional improvements to the property, would meet the Policy's eligibility requirements.

Based on the request's compliance with the Policy, I believe that it would be appropriate for the Committee to recommend approval of the request to the Board of Mayor and Aldermen.

Planning staff have asked Ms. Demers to be present for the meetings of the CIP Committee and the Board of Mayor and Aldermen to respond to any specific questions about her request.

September 11, 2023

Will Stewart
Chairman Alderman of the CIP Committee

RE: Request for Subordination
Christine Demers
329 Douglas Street
Manchester, NH 03102

Dear Mr. Stewart,

I applied for a Home Equity Line of Credit with Members First Credit Union for \$35,000.00. I currently have a Home Equity Loan that I used for home improvement closed in August of 2021 with remaining balance of \$16,744.00. I will be paying the Home Equity Loan in full with the new line of credit and using the remaining funds to replace a bedroom ceiling, roof repairs and bay window repairs. If there are remaining funds, I may replace some windows. I also have a 1st mortgage with Members First Credit Union with a remaining balance of \$96,515.00. Based on the current value of \$352,182.00, the combined loan to value will be 43.02%.

I am requesting a subordination of the \$20,000.00 Manchester Housing Loan dated November 2009.

The Manchester Housing Loan will be in 3rd position.

Very truly yours,


Christine Demers



September 14, 2023

City of Manchester NH
CIP Coordinator Todd Fleming
One City Hall Plaza
Manchester, NH 03101

RE: Christine Demers
329 Douglas Street
Manchester, NH 03102

Mr. Fleming,

The above referenced applicant applied for a Home Equity Line of Credit for the purpose of completing home repairs. More specifically a new bedroom ceiling, roof repairs and a bow window repair. A portion of the funds will payoff a Home Equity Loan that was closed in October of 2021 with a remaining balance of \$16,596.00.

Please feel free to call or email me with any questions.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'Christine Whittaker', is written over the typed name.

Christine Whittaker
AVP Mortgage Lending
cwhittaker@membersfirstnh.org





Catherine Naczas
Executive Director

M A N C H E S T E R
HOUSING AND REDEVELOPMENT AUTHORITY

David H. Quinn
Chair

Steven C. Duffley
Vice-Chair

Thomas Hickman
Commissioner

Mike Lopez
Commissioner

Andrew Papanicolau
Commissioner

Alderman Will Stewart
CIP Committee, Chair
City of Manchester
Office of the City Clerk
One City Hall Plaza
Manchester, NH 03101

RE: Kelley Falls Apartments Fencing

Dear Alderman Stewart,

At this time, the Manchester Housing and Redevelopment Authority is requesting \$50,000 in CIP funds to assist in the clearing/preparation, purchase, and installation of a fence on a portion of the property line between the Kelley Falls Apartments campus and City of Manchester Parks and Recreation property known as Rimmon Acres.

Kelley Falls is a large, open property of 132 family units. The perimeter is wooded but allows easy concealed entry for trespassers to access the City of Manchester's property. The installation of an 8-foot fence would increase the safety of our residents and staff as it would mitigate issues with transients accessing City property and also theft of the Kelley Falls residents' belongings (propane tanks, bicycles, etc.). Both have been ongoing issues that have increased recently with the added concerns of potential fires, shooting of guns, and alcohol and drug use/paraphernalia.

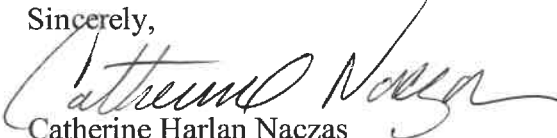
A review of the property was completed this summer by the Manchester Police Department's Community Affairs Division under the Crime Prevention Through Environmental Design program. Their observations and recommendations support our proposal. MHRA consulted with the Fire Department this week and they have no issues.

The funds requested would specifically be used for the purchase and installation of a rear perimeter fence running approximately 100 feet from Upland Street at the rear of the abutting single-family property, along the abutting City and Kelley Falls property line up to the 4-foot fence surrounding the City of Manchester's Rock Rimmon Fields Soccer Park and then along the remainder of the property to Mason Street.

Attached please find estimates for the work, the Manchester Police Department's analysis and recommendations, and the Manchester Fire Department's email correspondence.

If you have any questions or wish to discuss further, I can be reached at 603-722-9650. Thank you for your consideration of this important request.

Sincerely,


Catherine Harlan Naczas
Executive Director





Manchester Police Department
Community Affairs Division
Crime Prevention Through Environmental Design
Working together for a safer Manchester



***CPTED Survey for fencing
Kelley Falls apartment housing Kimball Street Manchester, NH 03103***



Initial Observations:

Issues concerning trespassing, fires, property theft and other quality of life crimes at Kelley Falls apartments. During the initial survey several unauthorized subjects were observed coming from the Rimmon Acres wooded area in the rear of 399 Kimball Street. Several well traveled trails were observed from the rear of 399 Kimball Street leading into the Rimmon Acres area with evidence of drug/alcohol use and general trash. It appears that the unauthorized subjects coming from the Rimmon Acres area are contributing to the criminal activity at Kelley falls.

Recommendations: Limit access from the Rimmon Acres area to Kelley Falls apartments.

Install a rear perimeter fence from Upland Street to Mason Street. This fence should be 6-8 Ft high, anchored in concrete and constructed of steel or aluminum preferably with a finial top. Fence design should take in to account access for MFD to reach Rimmon Acres. A double gate for MFD with a knox box would accomplish this. Consult with MFD for specifics and to see if pedestrian egress gates are required.



Richard Ell
Community Affairs Division
Manchester Police Department (603) 792-5452 rell@manchesternh.gov

Disclaimer: The recommendations listed here are made for the purpose of reducing the likelihood of criminal activity and providing for a safer environment. The recommendations listed here are not designed, offered, or intended to be used against any specific group or individual. The recommendations listed are offered solely for the purpose of curtailing the likelihood of criminal activity based on the information provided by the requesting party. While the concepts of Crime Prevention Through Environmental Design (CPTED) have been proven internationally, neither the City of Manchester nor the Manchester Police Department warrants either directly or implicitly that measures if adopted will achieve a particular result. The Manchester Police Department recommends these measures as a public service, with the understanding that there is no way to predict or prevent all crime risks. All applicable codes (including local zoning, building, and fire/life safety) must be considered when implementing CPTED strategies. It is the responsibility of the requesting party to comply with all codes, regulations and permitting requirements. All costs associated with implementing the suggested CPTED strategy shall be born by the requesting party.

Catherine Naczas

From: Michael DiSabato
Sent: Wednesday, September 20, 2023 8:20 AM
To: Catherine Naczas; Mary Ellen Jutras
Subject: FW: Kelley Falls Development - Fence

FYI....

Michael DiSabato

Housing Operations Director
Manchester Housing and Redevelopment Authority
198 Hanover Street
Manchester, NH 03104
(603)624-2110
Fax (603)624-2104
mdisabato@manchesterhousing.org



M A N C H E S T E R
HOUSING AND REDEVELOPMENT AUTHORITY

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From: Lennon, Peter <PLennon@manchesternh.gov>
Sent: Wednesday, September 20, 2023 7:39 AM
To: Michael DiSabato <mdisabato@manchesterhousing.org>
Subject: RE: Kelley Falls Development - Fence

CAUTION: This email originated from outside of MHRA. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Mike,

We have no issues with this. Please let us know if you need anything from us for this project.

Thanks,

Peter Lennon
Fire Marshal
Manchester Fire Department
Fire Marshal Division
(603)669-2256, Ext. 3861

From: Michael DiSabato <mdisabato@manchesterhousing.org>

Sent: Tuesday, September 19, 2023 9:20 AM

To: Lennon, Peter <PLennon@manchesternh.gov>

Subject: [External Email] Kelley Falls Development - Fence

Peter,

Not sure if you're the person to discuss this, if not can you point me in the right direction.

MHRA is in the process of fencing off the woods area that belongs to park and recs, and the rear of our buildings on Kimball Street. This is to stop/prevent/hinder the homeless activity using our property while coming and going into the woods. Also, to stop the criminal activity that is occurring such as thefts of bikes, propane tanks, and defecation in the hallways of our buildings. We Had MPD (Rich Ell) do a CEPTED study of the area and they agree with the concept of fencing off the area with a 6-to-8-foot high fence, to discourage the criminal activity and homeless subjects using it as a cut through. MPD did suggest that we touch base with you, MFD, to see if you have any concerns, questions or suggestions.

Attached is a site plan, and below is MPD's site plan using google.

Please let me know your thoughts.

Mike



Michael DiSabato
Director of Housing Operations
Manchester Housing & Redevelopment Authority
Manchester, NH 03104
603-624-2110



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The Right-To-Know Law (RSA 91-A) provides that most e-mail communications, to or from City employees and City



Tel. 603-485-7197

Fax 603-485-3300

1814 Hooksett Rd, Hooksett, NH 03106

www.americanfences.net

info@americanfences.net

September 22, 2023

Manchester Housing
Attn: Mary Ellen Jutras
198 Hanover Street
Manchester, NH 03104

Site:
315-579 Kimball St.
Manchester, NH 03102

Dear Mary Ellen,

I am pleased to quote you a **rough** price for furnishing and installing approximately 2,300' of 2" mesh, #6 gauge wire, 8' high (knuckle-knuckle) galvanized commercial chain link fence. All posts are set in concrete. Fence will be racked to follow any grade changes.

For the ROUGH sum of: **\$139,400.00**

- **Price subject to change after final site visit.**
- If ledge, boulders, concrete or frost is encountered during installation there will be an equipment charge of \$300.00 and a \$30.00 per hole drilling charge added to your account.

Specifications: All pipe is 40 weight galvanized steel. 2-7/8" o.d. end, corner and pull posts, 2-3/8" o.d. line posts, spaced not over 10' apart, 1-5/8" o.d. top rail, and 1-5/8" o.d. middle bracing at terminal posts.

Please do not hesitate to call with any questions.

Sincerely,

Catie Mafera | VP of Sales & Marketing
American Fences, Inc.



John Brown & Sons, Inc.

Mowing Division

14 B & B Lane, Sawyer Industrial Park
Weare, New Hampshire 03281



August 25, 2023

Manchester Housing Authority

198 Hanover Street

Manchester, NH 03104

Attn: Mary Ellen Jutras

Re: Kimball Street Fence Line

John Brown and Sons, Inc. proposes to mow and land clear the fence line from #315 – 579 Kimball Street, approximately 1,000' long by 30' wide, for the lump sum price of \$8,000.00. This includes an aerial bucket truck for some trees to be taken down safely that are near the power lines.

If you have any questions, please feel free to contact us.

Respectfully,

Steve Snook



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Jeffrey D. Belanger, AICP
Director

Planning & Land Use Management
Building Regulations
Code Enforcement Division
Community Improvement Program

Pamela H. Goucher, AICP
Deputy Director of Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director of Building Regulations

MEMORANDUM

To: Alderman Will Stewart
Chairman, CIP Committee

From: Jeffrey Belanger, AICP
Director, Planning and Community Development

JDB

Date: September 25, 2023

Re: Funding for Bicycle Master Plan

At the Board of Mayor and Aldermen's September 5 meeting, the Planning Board submitted a request to fund the drafting of a bicycle master plan for the city. The Planning and Community Development Department had assisted the Planning Board with its request by speaking to consultants to get pricing estimates, and that information was included in the Planning Board's letter. The request was referred to this Committee for further study. The purpose of this memorandum is to inform the Committee of progress that has occurred regarding the Planning Board's request.

Since the September 5 meeting, staff of PCD have held further discussions with consultants to determine whether pricing could be lowered and whether the work could be done in phases, with the goal of making payments across successive budgets, rather than all in one. We have found consultants to be amenable to breaking the plan into two phases, such as conducting research and gathering public input as an initial phase and drafting the plan as a second. We have not found reduced prices yet, but these have been preliminary discussions. There has not been an RFP issued.

PCD staff have also worked with the Mayor's Office and the Economic Development Department to explore leveraging the Build Back Better Regional Challenge Grant to assist with the bicycle plan. Although the grant could not directly fund a bicycle plan, the grant will fund a transportation equity study from the U.S. DOT's Volpe Center, which will consider how all modes of transportation, including bicycles, access the Millyard from around the city. The study will include public outreach and data collection, along with possible suggestions for new street designs. This work may be able to form the foundation for a future bicycle plan, and the work is likely to begin this calendar year. If the data collection and outreach are relevant to a bicycle plan, then a consultant may be able to use them and reduce their fee for the plan.

Lastly, PCD staff have attempted to identify unencumbered CIP funds that might be eligible for use in a bicycle plan. We have not identified any such funds at this point, but that work is continuing. Should we

not be successful in finding unencumbered funds, there are always the options of including funding in next year's budget or using contingency funding toward the end of this fiscal year.

I believe that we will learn more in the coming weeks, as we continue with discussions with consultants, progress on the BBBRC Grant, and research into funding sources. Ultimately, the bicycle plan is an initiative lead by the Planning Board, but PCD, Economic Development, and DPW are happy to assist in the effort, as staff capacity allows.

Please find the Planning Board's request, PCD's initial letter to the Planning Board, and the scope of work for the Volpe Center included with this memorandum.



City of Manchester Planning Board
c/o City of Manchester Planning & Community Development Dept.
One City Hall Plaza
Manchester, New Hampshire 03101
603-624-6450
Fax (603-624-6529)

July 20, 2023

Honorable Mayor Joyce Craig and Board of Aldermen
1 City Hall Plaza
Manchester, NH 03103

RE: Planning Board - Bicycle Master Plan Revamp

Dear Mayor Craig and Aldermen,

In Board of Mayor and Aldermen

Date: 09/05/2023

On motion of Ald. Levasseur

Seconded by Ald. Cavanaugh

**Voted to refer to the Committee on
Community Improvement.**

City Clerk

The Manchester Planning Board would like to engage the services of a consultant in order to draft an updated Bicycle Master Plan based on contemporary data and community feedback.

Bicycling is an increasingly important mode of transportation for a wide range of activities here in Manchester such as getting to work, running errands, and general wellness. DPW recognized this in 2016 when it created the original document to “develop a workable, realistic plan for the future that will encourage bicycle use and make it safer for residents to ride their bicycles.”

Since then, the need for improved bicycling facilities has only become more critical. We have approved thousands of new housing units downtown; new multi-use trails are under construction across the city; and more people are exploring alternative forms of transportation. It is imperative that we create a built environment where all Manchester residents, regardless of age or ability, are kept safe and feel safe when enjoying what this city has to offer.

It has become clear to various stakeholders including the Manchester Planning Board and DPW that the official Bicycle Master Plan is outdated and in need of updates. In order to ensure that our plan remains accurate and relevant, the Manchester Planning Board has voted unanimously to respectfully request that the Board of Mayor and Aldermen allocate funding for a new official analysis of bicycle infrastructure in the Queen City and future opportunities for improvement.

This effort will help align our citywide Bicycle Master Plan with the targeted 2020 TOD Plan, the broader 2021 Master Plan, and the 2023 Trail Master Plan, all of which strongly advocate for the creation of new bicycle and pedestrian facilities to foster improved community connections.

Planning staff contacted five consultants with adequate experience and four responded. Based on the comprehensive scope of work and estimates provided, we believe that the cost would be approximately \$150,000. The corresponding staff memo holds additional relevant information. We respectfully request that amount as one-time funding and are available to discuss this request in detail at your convenience.

Sincerely,



Bryce Kaw-uh
Chair, Manchester Planning Board



CITY OF MANCHESTER

PLANNING AND COMMUNITY DEVELOPMENT

Planning & Land Use Management
Building Regulations
Code Enforcement Division
Community Improvement Program
Zoning Board of Adjustment

Jeffrey D. Belanger, AICP
Director

Pamela H. Goucher, AICP
Deputy Director Planning & Zoning

Michael J. Landry, PE, Esq.
Deputy Director Building Regulations

MEMORANDUM

To: Honorable Board of Mayor and Aldermen
From: Jonathan Golden, Senior Planner 
Date: August 16, 2023
Re: Bicycle Master Plan

The Planning Staff was asked by the Planning Board to reach out to potential consultants regarding the development of a Bicycle Master Plan for the City. While we did not prepare an RFP, we did outline a very general scope of work so that all the consultants would be provided with the same guidelines. The base criteria were as follows:

- Analysis of comparable cities with successful bicycle infrastructure, in a four season region;
- Analysis of the existing bicycle infrastructure, including both local and regional rail trails;
- Bicycle Level of Traffic Stress analysis;
- Maps that highlight proposed new infrastructure needs and deficiencies;
- Maps that highlight proposed new routes for commuting and recreation access;
- Highlight best practices in streetscape design;
- Definitions and visualizations of proposed bicycle infrastructure elements;
- Community outreach and engagement methods utilizing the Regional Planning Commission and local voluntary community organizations;
- GIS based data and maps.

We reached out to five consultants and four of those consultants responded. Their estimates varied from a low of just under \$100,000 to a high of \$300,000. The difference in potential costs was dependent on the detail of the concept design elements, the detail of the proposed expanded infrastructure, and the number of community engagement meetings.

Should the Planning Board be successful in securing funds for this proposal, staff will help the Planning Board draft an RFP.



Manchester BioFabrication Cluster Transportation Equity Study

Scope of Work
August 8, 2023

Volpe Project No. VP260023
Period of Performance: From Execution through July 15, 2024

Project Purpose

The purpose of this project is for the Volpe Center to conduct a “Manchester BioFabrication Cluster Transportation Equity Study” (“study”) to assist the City of Manchester in performance of its grant obligations to the Economic Development Administration (EDA), U.S. Department of Commerce, Phase 1 grant award no. ED22HDQ3070054. To facilitate the transfer of funds to the Volpe Center for the study, the Advanced Regenerative Manufacturing Institute (ARMI) has agreed to fund the Volpe Center work in advance as required by 49 USC §328.

Project Goal: Connect people from underserved populations with access to education and opportunity in the Millyard TOD District / BioFabrication Industry

Objective 1: Improve equitable, multimodal connections **between** the Greater Manchester area and the Millyard TOD District

Objective 2: Improve equitable, multimodal connections **within** the Millyard TOD District

Background

Without a dedicated project to support workforce education and skills training activities, historically underserved and marginalized populations in the Greater Manchester, NH may not have the opportunity to obtain jobs created through the growth of the BioFabrication cluster in the Millyard Transit Oriented Development (TOD) District. Working with trusted community partners, the BioFabrication Work and Learn Program aims to create a sustainable, equitable, and well-trained workforce to power the cluster, providing area residents with opportunities to participate in and benefit from this emerging industry.

Led by Southern New Hampshire University (SNHU) in partnership with the University of New Hampshire (UNH), Manchester Community College (MCC), and the Advanced Regenerative Manufacturing Institute (ARMI), the Work and Learn program will provide training, work-study programs, and other career and technical education pathways in biofabrication. By also focusing on

removing barriers such as technology, transportation, and language, the program aims to have at least 30 percent of direct new jobs created filled by area residents most in need, increasing their ability to earn a family-supporting wage.

This scope of work describes the tasks and deliverables to be completed by the U.S. Department of Transportation Volpe National Transportation Systems Center (U.S. DOT Volpe) in support of the BioFabrication Work and Learn Program’s “transportation equity study.” This study will identify and propose strategies to remove transportation barriers to education and opportunity in the BioFabrication cluster for underserved and marginalized populations in the Greater Manchester, NH area. It will also identify and propose strategies to reduce reliance on automobiles within the Millyard TOD District to provide congestion relief, improved air quality, and safer streets for pedestrians and cyclists.

Manchester Transit Agency (MTA) will be a key partner in this study. Volpe will provide community engagement support as referred to in the SOW below. An “Outreach Contractor,” to be selected and contracted separately from Volpe, will lead community engagement as defined in a separate SOW. Volpe may assist in developing the SOW for this Outreach Contractor to ensure it is coordinated with Volpe’s tasks.

Scope of Work

Task 0: Project Management

The Volpe team project manager will maintain a monthly status report that includes task-level budget and project work product updates (completed / up next). The Volpe project manager will host monthly project status meetings with the Work and Learn Program Leads. These meetings will include Volpe team members, Outreach Contractor staff, and potentially other partners as may be relevant to the project timeline and deliverables.

Task 0 Deliverables:

- Monthly budget and status reports
- Monthly project status meetings

Task 1: Project Initiation and Site Tour

The Volpe team and the Outreach Contractor (“project team”) will meet in person with the Work and Learn Program leads (“program leads”) from the City of Manchester, SNHU, UNH, MCC, ARMI, as well as key partners such as MTA, as determined by the program leads. This project initiation meeting, or a follow-on meeting during the same visit, will include staff and leadership from the City of Manchester, Southern New Hampshire Planning Commission, New Hampshire Departments of Transportation, Labor, Health and Human Services, and other state, county, regional, and municipal agencies as determined by the program leads. The project initiation meeting(s) will allow the project team, program leads, and key partners to become more familiar with one another and to discuss the SOW and timeline.

Task 1 will include a site tour of the Millyard TOD District and surrounding environs. The site tour will provide an opportunity for additional discussion with participants.

Prior to the project initiation meeting(s) and site tour, the project leads will provide Volpe with relevant prior studies, reports, and information related to relevant ongoing and upcoming projects, studies, or initiatives. These may variously relate to community transportation and land use planning, and equity, labor, and public health issues in and around the Millyard TOD District and Greater Manchester area. Volpe will conduct an initial review of these identified prior studies and reports. Additional resources that may be identified during the project initiation will be provided to Volpe following the meetings.

Anticipated roles and responsibilities are as follows (to be confirmed/revised during the project kick-off meeting):

Name	Roles and Responsibilities
City of Manchester, NH	Party to Agreement with Volpe Center The City of Manchester is the grant award recipient for the Transportation Equity Study and will provide oversight of the project and access to relevant data, resources, and staff as necessary to support SOW activities.
Advanced Regenerative Manufacturing Institute (ARMI)	Party to Agreement with Volpe Center ARMI is the sub-award recipient for the Transportation Equity Study and will handle project management aspects through its match assets.
Southern New Hampshire University (SNHU)	Primary, Work and Learn Program Lead Approves final deliverables; consolidates and rectifies conflicting comments on draft deliverables from other program lead members, partners, and stakeholders; provides final direction on behalf of other program lead members.
University of New Hampshire (UNH) Manchester Community College (MCC)	Member, Work and Learn Program Leads Provides feedback on draft deliverables; participates in program lead meetings with project team.
Manchester Transit Agency (MTA)	Partner, Work and Learn Program Participates in draft deliverable review and program lead meetings with the project team as determined by SNHU.
U.S. DOT Volpe Center (Volpe)	Project Team Lead Develops draft and final deliverables; collaborates with program leads to coordinate the work of the Outreach Contractor
Outreach Contractor (TBD)	Member, Project Team Conducts outreach activities per the SOW with direction from program leads, in coordinate with Volpe

Task 1 Deliverables:

- Meeting agenda(s) including site tour schedule
- Visit to Manchester to conduct meetings and site tour

Task 2: Outreach and Engagement Plan

The Work and Learn Program's first task is to launch an Equity Advisory Committee (EAC) composed of representatives from community organizations and other groups working with people from the program's target underserved populations. In coordination with EAC, the Work and Learn Program Leads ("program leads") will identify, engage, and/or represent the perspectives and needs of underserved and marginalized community members in the Greater Manchester area as part of the Transportation Equity Study.

Volpe and the Outreach Consultant will meet with the program leads and relevant EAC members to discuss and solicit input on an outreach and engagement plan. Volpe will encourage a plan that ensures the voices of community members, and their lived experiences are directly incorporated into defining the

general and specific challenges associated with access and mobility in the Greater Manchester area, and within the existing and future/proposed Millyard TOD District.

As part of this task, Volpe will review and comment on the Outreach Consultant's Outreach and Engagement Plan, to ensure it identifies relevant community groups, organizations, or other entities to include in engagement activities, as well as language access, accessibility requirements, and virtual public engagement strategies to ensure all materials and engagement opportunities are available to as broad a range of participants as possible. The Outreach Consultant's tasks and specific details of the Outreach and Engagement Plan will be documented in a separate SOW / contract between the appropriate program lead parties and the selected consultant.

Task 2 Deliverables:

- Meeting with EAC members and program leads
- Volpe review and comment on Outreach Consultant's Outreach and Engagement Plan

Task 3: Background Memorandum

Volpe will collate the key findings and recommendations from existing plans, studies, reports, and available information from ongoing or proposed projects that may inform develop of future tasks. This may include follow-up interviews and/or meetings with key partners and stakeholders to clarify or expand upon the documents and other information collected in Task 1. The deliverable for this task will take the form of a brief memorandum.

Task 3 Deliverables:

- Interviews/meetings with key partners and stakeholders
- Draft and Final Background Memorandum

Task 4: Data Collection and Analysis Plan

Informed by Task 1 through 3, Volpe will write a Data Collection and Analysis Plan (DCAP) to outline the types of information needed (metrics, geographic and temporal scope, etc.) and the methods for their collection (static/dynamic data sources, in-person data collection, surveys, focus groups, community meetings, etc.). This component of the DCAP will implement elements of the outreach and engagement plan developed in Task 2. The DCAP will also document proposed methods for analysis of those data and describe how those analyses will inform future steps in defining challenges and identifying potential solutions.

Wherever possible, the DCAP will identify how data can help serve as a benchmark for performance-based planning in future project programming and implementation stages. Such data can help inform performance measures and targets to guide project prioritization and selection (pilot and full-scale infrastructure projects and operational strategies/projects), gauge projects' success as they are implemented, adjust prioritization and/or recalibrate project designs as necessary to remain on track to achieve targets, and/or adjust targets as necessary. Such targets may relate to mode-shift, safety, demographics, etc., to help ensure the projects advance the top-level goal and objectives established in this SOW, in support of the Work and Learn Program's equity vision (at least 30 percent of direct new jobs created filled by area residents most in need).

Volpe will implement the DCAP, identifying, collecting, and tabulating data, and performing analyses as described therein.

Task 4 Deliverables:

- Draft and Final Data Collection and Analysis Plan (DCAP)
- Collected Data and Completed Analyses

Task 5: Equity Challenges Report

Based on the results of Tasks 1 through 4, Volpe will develop an equity challenges report. The report will document the social, economic, and geographic challenges that must be overcome to achieve the Work and Learn Program's equity vision. It will characterize both general and specific challenges associated with access and mobility to and within the Millyard TOD District, for all people, but especially for members of underserved and marginalized populations. Challenges may include access to a vehicle, transit service, personal mobility/micromobility device; real and perceived personal safety; interpersonal/institutional bias; child and elder care and other challenges to travel and transportation. Where applicable, Volpe will represent analyses and findings in both written and visual (graphic and geographic) formats to maximize legibility for a broad audience for use by the Outreach Consultant in their engagement activities with the community.

Task 5 Deliverables:

- Draft and Final Equity Challenges Report
- Outreach and Engagement Presentation Materials

Task 6: Transportation Equity Plan Framework

Volpe will develop a multimedia framework to address the challenges identified in Task 5. The framework will begin as a fiscally unconstrained set of principles and goals for future surface transportation infrastructure improvements and operational strategies. Volpe will work to avoid duplication of efforts already underway through the U.S. Department of Transportation's Rebuilding American Infrastructure with Sustainability and Equity (RAISE) discretionary grant program.

Once these principles and goals are established, Volpe will develop a menu of potential elements for the framework. These may include but are not limited to changes to the design and operation of existing and future highways, streets, sidewalks, trails, bicycle facilities, public transit (e.g., bus, rail), as well as policies and programs to increase access to transportation, such as subsidies, vouchers, and other strategies to reduce barriers to public and private/cooperative transit, paratransit, ridehailing, personal mobility / micromobility, and other modes of transportation. The framework will consider existing and proposed/future land uses and circulation needs in the Millyard TOD District, identifying opportunities to maximize equitable access for the circulation of people and goods in contextually appropriate formats, reduce reliance of automobiles, improve air quality, maximize pedestrian and bicyclist safety, and explore innovative solutions including the potential use of automated shuttles.

Where applicable, Volpe will represent the framework in both written and visual (plan/graphic and mapping/geographic) formats to maximize legibility for a broad audience. Volpe will format materials documenting key details from the framework for use in engagement events to be used by the Outreach Consultant. Volpe will also develop order of magnitude cost estimates for specific (e.g., new rail terminal) and generic (e.g., expanded sidewalks) components of the framework to inform the Implementation Action Plan.

Task 6 Deliverables:

- Draft and Final Transportation Equity Plan Framework
- Outreach and Engagement Presentation Materials

Task 7: Implementation Action Plan

Volpe will develop an implementation action plan to lay out potential phasing and/or collections of coordinated project elements from Task 6 with order of magnitude cost estimates. These may include synergistic combinations of infrastructure changes and new or revised transit, shuttle, rideshare, or other transportation services. These may also include recommendations to sequence implementation actions over time, in coordination with other developments. Volpe will align the plan as feasible with known and anticipated land use redevelopment, infrastructure projects, and operational actions including but not limited to those of the Millyard TOD District, project lead institutions and organizations, and partners

such as the MTA. The action plan will also identify potential applicable funding sources for improvements, high-level futures steps (follow-on actions) to further develop individual elements of the Action Plan, and key roles/responsibilities for partners.

Volpe will present the final plan to a broad coalition comprising the program team, stakeholders, partners, and community members.

Task 7 Deliverables:

- Draft and Final Implementation Action Plan
- Presentation Materials

Budget & Timeline

Task	Task Description	Months to Complete	Budget Authority
0	Project Management	Ongoing	\$ 15,000
1	Project Initiation and Site Tour	1	\$ 6,000
2	Outreach and Engagement Plan	1	\$ 6,000
3	Background Memorandum	2	\$ 8,000
4	Data Collection and Analysis Plan	4	\$ 25,000
5	Equity Challenges Report	6	\$ 35,000
6	Transport Equity Plan Framework	9	\$ 70,000
7	Implementation Action Plan	on or before 7/15/2024	\$ 25,000
	TOTAL		\$ 190,000