#### Shireen McSpadden, Executive Director

London Breed, Mayor

То	Homelessness Oversight Commission
Through	Shireen McSpadden, Executive Director
From	Marion Sanders, Chief Deputy Director Gigi Whitley, Chief of Finance and Administration Edilyn Velasquez, Director, Contracts
Date	November 7, 2024
Subject	Grant Agreement Approval: Tenderloin Housing Clinic, Inc.   Mission Hotel Elevator Modernization Program

Agreement Information					
F\$P Contract ID#	1000034242				
Provider	Tenderloin Housing Clinic, Inc.				
Program Name	Mission Hotel Elevator Modernization Program				
Agreement Action	Original Agreement				
Agreement Term	December 1, 2024 - June 30, 2026				

#### **Agreement Amount**

Budget	Capital Reserves	Total Not to Exceed (NTE)
\$176,815	\$34,863	\$211,678

Funding Information	
<b>Funding Sources</b>	98.8% Certificate of Participation (COP) Bonds
	1.2% General Fund

The Department of Homelessness and Supportive Housing (HSH) Contracts team requests authorization to enter into a new grant agreement with Tenderloin Housing Clinic, Inc. (THC) for the provision of the Mission Hotel Elevator Modernization Program for the period of December 1, 2024 to June 30, 2026.

#### **Background**

To promote viability, improve quality of life, and increase accessibility for San Francisco residents in permanent supportive housing (PSH), HSH announced a Notice of Funding Availability ("NOFA") for Nonprofit Master Leased single room occupancy ("SRO") buildings. The goal of the Elevator Modernization Program is to address necessary major repairs, modernization and alteration of antiquated elevators that may otherwise affect the health and safety of residents residing in PSH. The Office of Public Finance made available \$10,000,000 of the City's Certificate of Participation (COP) bonds to support modernization and repairs of elevators at these buildings.

#### Services to be Provided

The purpose of this grant is to address necessary major repairs, modernization and alteration of antiquated elevators that may otherwise affect the health and safety of residents residing in PSH. Grantee shall project manage the completion of repair and/or modernization of the existing passenger

elevator and relevant additional work required to support the elevator repair/modernization including but not limited to electrical, fire and safety upgrades to comply with all applicable legal requirements, including building codes. Building owner/landlords committed to a partial match through cash contribution or rent reduction. The building owner has elected to reduce Grantee's master lease payments over five years by a total of \$79,929.00 as their contribution.

#### Selection

Grantee was selected through NOFA #145 - Elevator Modernization Project, issued February 16, 2024, to invite proposals from qualified entities for modernization and repairs of elevators in privately held SRO buildings that are part of the PSH system. NOFA 145 is valid until June 30, 2035.

#### **Agreement Materials**

- HOC Approval Package
  - o Appendix A, Services to be Provided
  - o Appendix B, Budget

# Appendix A, Services to be Provided by

## Tenderloin Housing Clinic, Inc. Mission Hotel Elevator Modernization Program

#### I. Background

To promote viability, improve quality of life, and increase accessibility for San Francisco residents in PSH, the City and County of San Francisco (City) Department of Homelessness and Supportive Housing (HSH) announced a Notice of Funding Availability ("NOFA") for Nonprofit Master Leased single room occupancy ("SRO") buildings. The goal of the Elevator Modernization Program ("EMP") is to address necessary major repairs, modernization and alteration of antiquated elevators that may otherwise affect the health and safety of residents residing in PSH.

#### II. Purpose of Agreement

To address necessary major repairs, modernization and alteration of antiquated elevators that may otherwise affect the health and safety of residents residing in PSH.

#### III. Description of Services

Grantee shall project manage the completion of repair and/or modernization of the existing passenger elevator and relevant additional work required to support the elevator repair/modernization including but not limited to electrical, fire and safety upgrades to comply with all applicable legal requirements, including building codes.

#### IV. Location

Grantee shall provide project management at Mission Hotel located at 520 South Van Ness Avenue, San Francisco, CA 94110.

#### V. Service Requirements

- A. As part of this agreement, Grantee shall, within thirty (30) days following the commencement date of this agreement:
  - 1. Submit a project plan that includes project start date, milestones, projected completion date, budget, and proposed consultants/contractors.
  - 2. Agency must submit above documents in .pdf format by e-mail to rachel.gage@sfgov.org.
- B. As part of this agreement, Grantee shall, within ninety (90) days following the commencement date of this agreement:
  - 1. Initiate and execute the Master Lease amendment between Owner (lessor) and Nonprofit (lessee) and submit a copy of the fully executed amended Master Lease. The Master Lease amendment must include the following terms:
    - Extend the master lease term to end no earlier than five (5) years following project completion.
    - Reduce the monthly rent by the amount required to fulfill the building owner's agreed upon monetary contribution to the elevator project within the five (5) year term following project completion.
  - 2. Submit for HSH approval the following: a communication plan that details how Grantee will engage residents about the planned elevator work, a tenant complaint procedure, and

- an accessibility request policy, and if applicable, a temporary relocation plan as detailed below in subsection H.
- 3. Agency must submit above documents in .pdf format by e-mail to rachel.gage@sfgov.org.
- C. Construction Management and Contract Negotiation/Administration: Grantee shall ensure that all required permits are in place prior to starting construction. Grantee shall supervise and track the elevator contractor's performance for the duration of the project, which may include but not limited to pre-construction, negotiation of construction contract and during construction, ensuring elevator contractor obtains necessary construction permits, execution of the permitted scope of work through the resolution of any issues that arise during final inspections to ensure timely project completion. Grantee shall also manage such contracts including contract compliance and invoicing, including withholding of retention and the release of retention at the end of this project. Grantee shall ensure the contractor has met all requirements for retention release prior to releasing final payment and retention.
- D. <u>Budget Management and Administration</u>: Grantee shall manage and adhere to the approved budget and make commercially reasonable efforts to promote cost savings and efficiencies. All owner contingency may only be utilized at HSH's sole discretion and with prior written approval. The construction draw procedure is outlined in Appendix C, Method of Payment. Any unspent funds subject to owner/HSH 50/50 cost share are to be returned to owner and HSH. Any unspent contingency funds covered solely by HSH must be returned to HSH upon final payment to Grantee.
- E. <u>Schedule Management:</u> Grantee is responsible for managing the elevator contractor's schedule and holding them accountable to meet their schedule milestones and completion date, as delineated in elevator contractor's contract with Grantee.
- F. <u>Procurement</u>: As necessary, to effectively perform project management of the improvements, Grantee may subcontract work to subject matter experts and experienced contractors. Grantee may enter into any necessary professional services contracts, such as architect, engineer, general construction contractor, project management, construction management, permit specialist, and other related services, for the duration of the project. Such procurement and administration shall comply with all applicable laws.
  - Prior to entering into any agreement for contractor or consultant services for Ten Thousand Dollars (\$10,000.00) or more, Grantee must obtain at least three bids (unless waived in writing by HSH after a showing of due diligence and good faith effort), and submit to HSH for review and approval the responsive bids, proposed agreement with Grantee's proposed contractor, information concerning the qualifications and licensing of the proposed contractor or consultant, and any additional information requested by HSH. All proposed contracts must detail the responsibilities, standards and compensation of the contractor or consultant. Reasons for disapproval of such contract may include, but are not limited to, scope of work or budget that does not reflect the Project Budget or Work Program.
- G. <u>Financing and Compliance</u>: Where applicable, Grantee shall coordinate and assist in funding applications to state and federal funding sources (e.g., Office of Public Finance) and/or assist with any audits, reporting and compliance obligations related to applicable local, city, state or federal funding related to the project.
- H. <u>Temporary Relocation</u>: If there are existing occupants that will be affected by the elevator work, Grantee shall work with property management, support services provider, and any other applicable consultants, to develop a phased on-site relocation plan or identify any time-limited off-site relocation, and manage the temporary relocation process (including working

- with residents to provide them with communication regarding relocation timing, moving assistance, cleaning of units to allow for on-site relocation, etc.) in compliance with all applicable laws.
- I. Accounts and Records: Grantee shall keep such books of account and other records in connection with the elevator repairs and/or modernization, which may include but is not limited to vouchers, statements, receipted bills and invoices and all other records, covering all collections, if any, disbursements, correspondence, and other data in connection with design and construction of the project prior to final completion of the project. Grantee shall deliver copies of all project documents, change orders, invoices, pay applications, etc. to property management and HSH in a format and delivery method acceptable to HSH.
- J. <u>Meetings and Site Visits</u>: Grantee is required to hold regular meetings with elevator contractor, pay app meetings as needed, and other additional meetings as required. HSH and/or designee may conduct periodic site visits with Grantee to review progress on site.
- K. <u>Progress Reports</u>: Grantee shall ensure that contractors are providing monthly schedule updates, review these updates for accuracy and variance, and review and approve any schedule changes as a result of change orders. Grantee shall submit monthly reports to HSH on project timeline and any schedule variances or risks to the scheduled substantial completion date.
- L. Project Close Out: Grantee shall coordinate delivery of project close out documents to property management. Documents include, but not limited to, as-built drawings and specs and warranty doc/binder. Documents shall be stored onsite with property management. Grantee shall coordinate and schedule site inspections, punch walks, and warranty walk two to three months prior to end of the warranty period. Grantee shall follow up and coordinate warranty items with the elevator contractor and property management. Grantee shall ensure warranty items are delivered in a timely manner.

### VI. Reporting Requirements

- A. Grantee shall timely and accurately submit invoices, supporting documentation, and pay applications per Appendix C, Method of Payment. Grantee is responsible for the timeliness, accuracy, and proper documentation.
- B. Grantee shall comply with HSH Critical Incident Policy by reporting critical and serious incidents to HSH. Events include, but not limited to, life endangerment or serious injury, significant damage to a unit that cause units to go offline, displacement or unit transfer of a resident, major service interruptions, damage to the building, insurance events, and recordable events as specified in elevator contractor's contract. This section is intended to address incidents that fall under HSH Critical Incident Policy, and does not relieve or affect any legal duty of Grantee to report to applicable regulatory agencies.
- C. As needed, Grantee shall manage other regulatory reporting such as LCPtracker and Local Business Enterprise (LBE)/ Small Business Enterprise (SBE) reporting.

#### VII. Monitoring Activities

- A. <u>Program Monitoring</u>: Grantee is subject to program monitoring and/or audits, such as, but not limited to review of the following, Grantee's administrative records, site visits, data reported on project reports, documentation of funding match sources, proper accounting for funds and other operational and administrative activities, and back-up documentation for reporting progress towards meeting service and outcome objectives.
- B. <u>Fiscal Compliance and Contract Monitoring</u>: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly balance sheet, cost allocation

procedures and plan, State and Federal tax forms, audited financial statement, fiscal and accounting policies, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and memoranda of understanding (MOUs), and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

	Α	В	С	D						
1	1 DEPARTMENT OF HOMELESSNESS AND SUPPORTIVE HOUSING									
2	APPENDIX B, BUDGI	ET								
3	<b>Document Date</b>	12/1/2024								
4	Contract Term	Begin Date	End Date	Duration (Years)						
5	<b>Current Term</b>	12/1/2024	6/30/2026	2						
6	Amended Term	12/1/2024	6/30/2026	2						
7	Program	Mission Hot	el Elevator Mod	dernization Program						
8										
9		Approved S	ubcontractors							
10	None.									
11										
12										
13										

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2	APPENDIX B, BUDG		•					
3	Document Date	12/1/2024		Duration				
4	Contract Term	Begin Date	End Date	Duration (Years)				
5	Current Term	12/1/2024	6/30/2026	2	1			
6	Amended Term	12/1/2024	6/30/2026	2	Ī			
7	Provider Name	Tend	derloin Housing Cli	inic				
8	Program	Mission Hotel E	levator Moderniza	ation Program				
9	F\$P Contract ID#		1000034242					
10	Action (select)		New Agreement					
11	Effective Date		12/1/2024					
	_	General Fund - O	ne-Time, COP - O	ne-Time				
12	Budget Names	Capital, COP - Re	eserves					
13		Current	New					
14	Term Budget	\$ -	\$ 211,678					
16	Not-To-Exceed		\$ 211,678					
17		•	•	•	-			
						Year 1	Year 2	All Years
18								
						2/1/2024 -	6/1/2026 -	12/1/2024 -
19					5,	/31/2025	11/30/2026	6/30/2026
20						New	New	New
21	Expenditures							
27	Other Expenses				\$	2,500	\$ -	\$ 2,500
28	Capital Expenditure				\$	209,178	\$ -	\$ 209,178
30	Total Expenditures				\$	211,678	\$ -	\$ 211,678
31								
32	HSH Revenues (sele							
_	General Fund - One-				\$	2,500	\$ -	\$ 2,500
	Certificate of Partici		e-Time		\$	209,178	\$ -	\$ 209,178
	Total HSH Revenues				\$	211,678	\$ -	\$ 211,678
52	Rev-Exp (Budget Ma	,			\$	-	\$ -	\$ -
54	Total Adjusted Salar	y FTE (All Budgets	)			0.00	0.00	
55		т			7	_	s typically project ou	
56	Prepared by		Tabitha Allen				s, strictly for budget	
57	Phone	415	-885-3286 Ext. 11	18		-	at any given year ar	-
58	Email	<u>ta</u>	abitha@thclinic.org		1		Supervisors discretio	_
		•				•	not guaranteed. For of the G-100 Grant A	further information,
59					11111111111	- SEE ALLICIE / (	or the a-too arant A	PI PPINPIN

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3	Document Date	12/1/2024			Duration						
4	Contract Term	Begin Date		End Date	(Years)						
5	Current Term	12/1/2024		/30/2026	2						
6	Amended Term	12/1/2024		/30/2026	2						
7	Provider Name			Housing Clini							
8	Program	Mission Hotel Ele									
9	F\$P Contract ID#	IVIISSIOII FIOLEI LIE		)034242	on Flogram						
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17 18 19		7	<u>, y</u>	211,078			2/1/2024 - /31/2025	6/1/2026 - 11/30/2026		12/3 6/3	1/2024 - 0/2026
17 18 19 20		7	7	211,078			2/1/2024 -	6/1/2026 -		12/3 6/3	1/2024 -
17 18 19 20 21	Expenditures		7	211,078		5	2/1/2024 - /31/2025 <b>New</b>	6/1/2026 - 11/30/2026 <b>New</b>		12/3 6/3	1/2024 - 0/2026 <b>New</b>
17 18 19 20 21 27	Expenditures Other Expenses		, , , , , , , , , , , , , , , , , , ,	211,078		\$	2/1/2024 - /31/2025	6/1/2026 - 11/30/2026 New		12/3 6/3 \$	1/2024 - 0/2026
17 18 19 20 21 27 28	Expenditures Other Expenses Capital Expenditure		7	211,078		\$	2/1/2024 - /31/2025 New 2,500	6/1/2026 - 11/30/2026 New \$	5	12/3 6/3 \$ \$	1/2024 - 0/2026 New 2,500
17 18 19 20 21 27 28 30	Expenditures Other Expenses Capital Expenditure		7	211,078		\$	2/1/2024 - /31/2025 <b>New</b>	6/1/2026 - 11/30/2026 New	-	12/3 6/3 \$	1/2024 - 0/2026 <b>New</b>
17 18 19 20 21 27 28 30 31	Expenditures Other Expenses Capital Expenditure Total Expenditures		7	211,078		\$	2/1/2024 - /31/2025 New 2,500	6/1/2026 - 11/30/2026 New \$	-	12/3 6/3 \$ \$	1/2024 - 0/2026 New 2,500
17 18 19 20 21 27 28 30 31 32	Expenditures Other Expenses Capital Expenditure Total Expenditures HSH Revenues (selection)	ct)	7	211,078		\$ \$ \$	2/1/2024 - /31/2025 New 2,500 - 2,500	6/1/2026 - 11/30/2026 New \$ \$		\$ \$ \$	1/2024 - .0/2026 New 2,500 - 2,500
17 18 19 20 21 27 28 30 31 32 33	Expenditures Other Expenses Capital Expenditure Total Expenditures HSH Revenues (selections)	ct) Time	7	211,078		\$ \$ \$ \$	2/1/2024 - /31/2025 New 2,500 - 2,500	6/1/2026 - 11/30/2026 New \$ \$ \$	-	\$ \$ \$	1/2024 - .0/2026 New 2,500 - 2,500
17 18 19 20 21 27 28 30 31 32 33 42	Expenditures Other Expenses Capital Expenditure Total Expenditures  HSH Revenues (selection of the content of t	ct) Time	7	211,078		\$ \$ \$ \$	2/1/2024 - /31/2025 New 2,500 - 2,500	6/1/2026 - 11/30/2026 New \$ \$ \$		\$ \$ \$ \$ \$	1/2024 - .0/2026 New 2,500 - 2,500
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tabitha@thclinic.org

57 Email

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1	1 DEPARTMENT OF HOMELESSNESS AND SUPPORTIVE HOUSING						
2	2 OPERATING DETAIL						
3	3 <b>Document Date</b> 12/1/2024						
4	Provider Name	Tend	derloin Hous	ing C	linic		
5	Program	Miss	ion Hotel Ele	evato	r Moderniza	ation	Program
6	F\$P Contract ID#	1000	0034242				
7	Budget Name	Gen	eral Fund - C	ne-T	ime		
8		_					
9			Year 1		Year 2	Α	II Years
10			2/1/2024 - 5/31/2025	_	/1/2026 - 1/30/2026		/1/2024 - 30/2026
11			New		New		New
12	Operating Expenses		Budgeted Expense		Budgeted Expense		udgeted xpense
69							
70	Other Expenses						
71	Elevator Evaluation Report	\$	2,500	\$	-	\$	2,500
84	TOTAL OTHER EXPENSES	\$	2,500	\$		\$	2,500
97	HSH #3		_				7/26/2022

BUDGET NARRATIVE	Fiscal Year			_		
General Fund - One-Time	FY24-25		<- Select fro	m the drop-down list the fis		
Other Expenses (not subject to indire	ect cost %)	<u>Aı</u> \$	<u>mount</u> 2,500	Cost of Audit	<u>Justification</u>	
		\$	-			
TOTAL OTHER EXPENSES		\$	2,500			

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2	APPENDIX B, BUDG	Ī	1						
3	Document Date	12/1/2024		Duration	1				
4	Contract Term	Begin Date	End Date	(Years)					
5	Current Term	12/1/2024	6/30/2026	2					
6	Amended Term	12/1/2024	6/30/2026	2					
7	Provider Name	Tend	lerloin Housing Cl	inic					
8	Program	Mission Hotel E	levator Moderniz	ation Program	]				
9	F\$P Contract ID#		1000034242						
10	Action (select)		New Agreement						
11	Effective Date		12/1/2024						
12	<b>Budget Name</b>	COF	- One-Time Capi	tal					
13		Current	New						
14	Term Budget	\$ -	\$ 174,315	0%					
16	Not-To-Exceed	\$ -	\$ 211,678						
17									
18	J					Year 1	Year 2		II Vaava
					i Cai I	Teal Z	μ	All Years	
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	Expenditures					2/1/2024 - 5/31/2025	6/1/2026 - 11/30/2026	12	/1/2024 - /30/2026
20	Expenditures					2/1/2024 - 5/31/2025	6/1/2026 - 11/30/2026	12	/1/2024 - /30/2026
20 21	Expenditures				5	2/1/2024 - 5/31/2025 <b>New</b>	6/1/2026 - 11/30/2026 New	12 6/	/1/2024 - /30/2026 New
20 21 28	Expenditures Capital Expenditure				\$	2/1/2024 - 5/31/2025 New 174,315	6/1/2026 - 11/30/2026 New	12 6/	/1/2024 - /30/2026 New 174,315
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20 21 28 30 31 32	Expenditures Capital Expenditure Total Expenditures	<del></del>	e-Time		\$	2/1/2024 - 5/31/2025 New 174,315	6/1/2026 - 11/30/2026 New  \$ - \$ -	12 6/	/1/2024 - /30/2026 New 174,315
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20 21 28 30 31 32 35 42 52	Expenditures Capital Expenditure Total Expenditures  HSH Revenues (sele Certificate of Partici	pation (COP) - One s	e-Time		\$ \$ \$	2/1/2024 - 5/31/2025 New 174,315 174,315	6/1/2026 - 11/30/2026 New  \$ - \$ -	\$ \$	/1/2024 - /30/2026 New 174,315 174,315
20 21 28 30 31 32 35 42	Expenditures Capital Expenditure Total Expenditures  HSH Revenues (sele Certificate of Partici Total HSH Revenues Rev-Exp (Budget Ma	pation (COP) - One s			\$ \$ \$	2/1/2024 - 5/31/2025 New 174,315 174,315	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	\$ \$ \$ \$	/1/2024 - /30/2026 New 174,315 174,315
20 21 28 30 31 32 35 42 52	Expenditures Capital Expenditures Total Expenditures HSH Revenues (sele Certificate of Partici Total HSH Revenues	pation (COP) - One s	e-Time Tabitha Allen		\$ \$ \$	2/1/2024 - 5/31/2025 New 174,315 174,315	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	\$ \$ \$ \$	/1/2024 - /30/2026 New 174,315 174,315
20 21 28 30 31 32 35 42 52 54 55	Expenditures Capital Expenditure Total Expenditures  HSH Revenues (sele Certificate of Partici Total HSH Revenues Rev-Exp (Budget Ma	pation (COP) - One s atch Check)		18	\$ \$ \$	2/1/2024 - 5/31/2025 New 174,315 174,315	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	\$ \$ \$ \$	/1/2024 - /30/2026 New 174,315 174,315
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1	DEPARTMENT OF HOMELESSNESS AND SUPPORTI	VE HOUSING		
2	OPERATING DETAIL			
3	Document Date	12/1/2024		
4	Provider Name	Tenderloin Hous	ing Clinic	
5	Program	Mission Hotel El	evator Moderniza	ation Program
6	F\$P Contract ID#	1000034242		
7	Budget Name	COP - One-Time	Capital	
8				
9		Year 1	Year 2	All Years
10		12/1/2024 - 5/31/2025	6/1/2026 - 11/30/2026	12/1/2024 - 6/30/2026
11		New	New	New
12	Operating Expenses	Budgeted Expense	Budgeted Expense	Budgeted Expense
86	<u>Capital Expenses</u>	'		
87	Elevator Repair Materials	\$ 45,539	\$ -	\$ 45,539
88	Elevator Repair Labor	\$ 101,361	\$ -	\$ 101,361
89	Non-Elevator Work Materials	\$ 10,055	\$ -	\$ 10,055
90	Non-Elevator Work Labor	\$ 17,360	\$ -	\$ 17,360
91				\$ -
94				
95	TOTAL CAPITAL EXPENSES	\$ 174,315	\$ -	\$ 174,315
96				
97	HSH #3			7/26/2022

# BUDGET NARRATIVE Fiscal Year COP - One-Time Capital FY24-25

## <- Select from the drop-down list the fiscal year in whicl

COF - One-Time Capital	1 124-2	3	'
<u>Capital Expenses</u>	<u>-</u>	Amount	<u>Justification</u>
Elevator Repair Materials	\$	45,539	Modernization
Elevator Repair Labor	\$	101,361	Modernization
Non-Elevator Work Materials	\$	10,055	Electrical, patch and paint, emergency call button
Non-Elevator Work Labor	\$	17,360	Electrical, patch and paint, emergency call button
	\$	-	
TOTAL CAPITAL EXPENSES	\$	174,315	

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	Α	В	С	D		G	J	AK	
1	DEPARTMENT OF HOMELESSNESS AND SUPPORTIVE HOUSING								
2	APPENDIX B, BUDG		1						
3	Document Date	12/1/2024		Duration	1				
4	Contract Term	Begin Date	End Date	(Years)					
5	Current Term	12/1/2024	6/30/2026	2					
6	Amended Term	12/1/2024	6/30/2026	2					
7	Provider Name	Tenderloin Housing Clinic							
8	Program	Mission Hotel Elevator Modernization Program							
9	F\$P Contract ID# 1000034242								
10	Action (select)		New Agreement						
11	Effective Date 12/1/2024								
12	Budget Name		COP - Reserves						
13		Current	New	]					
14	Term Budget	\$ -	\$ 34,863	0%					
16	Not-To-Exceed	\$ -	\$ 211,678						
17					='				
18						Year 1	Year 2	All Years	
							. 66. 1	All Tears	
					12				_
19						/1/2024 - /31/2025	6/1/2026 - 11/30/2026	12/1/2024 6/30/2026	
19 20						/1/2024 -	6/1/2026 -	12/1/2024	
	Expenditures					/1/2024 - /31/2025	6/1/2026 - 11/30/2026	12/1/2024 6/30/2026	
20	•					/1/2024 - /31/2025	6/1/2026 - 11/30/2026	12/1/2024 6/30/2026	5
20 21					5,	/1/2024 - /31/2025 <b>New</b>	6/1/2026 - 11/30/2026 <b>New</b>	12/1/2024 6/30/2026 New	363
20 21 28	Capital Expenditure				\$	/1/2024 - /31/2025 <b>New</b> 34,863	6/1/2026 - 11/30/2026 New	12/1/2024 6/30/2026 New \$ 34,8	363
20 21 28 30 31 32	Capital Expenditure  Total Expenditures  HSH Revenues (sele				\$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026 New \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8	363
20 21 28 30 31 32	Capital Expenditure Total Expenditures		e-Time		\$ \$ \$	/1/2024 - /31/2025 <b>New</b> 34,863	6/1/2026 - 11/30/2026 New  \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8	863 8 <b>63</b>
20 21 28 30 31 32 35 42	Capital Expenditure  Total Expenditures  HSH Revenues (selectorificate of Particity  Total HSH Revenues	pation (COP) - One	e-Time		\$ \$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8 \$ 34,8	363 363 363
20 21 28 30 31 32 35 42 52	Capital Expenditure  Total Expenditures  HSH Revenues (selectificate of Partici	pation (COP) - One	e-Time		\$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026 New  \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8	363 363 363
20 21 28 30 31 32 35 42	Capital Expenditure  Total Expenditures  HSH Revenues (selectificate of Particitate)  Total HSH Revenues  Rev-Exp (Budget Ma	pation (COP) - One			\$ \$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8 \$ 34,8	363 363 363
20 21 28 30 31 32 35 42 52	Capital Expenditure  Total Expenditures  HSH Revenues (selectorificate of Particity  Total HSH Revenues	pation (COP) - One	e-Time Tabitha Allen		\$ \$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8 \$ 34,8	363 863 863
20 21 28 30 31 32 35 42 52 54 55 56	Capital Expenditure  Total Expenditures  HSH Revenues (selectorificate of Particitate)  Total HSH Revenues  Rev-Exp (Budget Management)  Prepared by  Phone	pation (COP) - Ones stch Check) 415	Tabitha Allen -885-3286 Ext. 11:	18	\$ \$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8 \$ 34,8	363 863 863
20 21 28 30 31 32 35 42 52 54 55 56	Capital Expenditure  Total Expenditures  HSH Revenues (selectificate of Particitate)  Total HSH Revenues  Rev-Exp (Budget Management)  Prepared by	pation (COP) - Ones stch Check) 415	Tabitha Allen	18	\$ \$ \$ \$	/1/2024 - /31/2025 New 34,863 34,863	6/1/2026 - 11/30/2026  New  \$ - \$ - \$ -	12/1/2024 6/30/2026 New \$ 34,8 \$ 34,8 \$ 34,8	363 363 363

	А	D	G	AH					
1	DEPARTMENT OF HOMELESSNESS AND SUPPORTIVE HOUSING								
2	OPERATING DETAIL								
3	Document Date 12/1/2024								
4	Provider Name Tenderloin Housing Clinic								
5	Program Mission Hotel Elevator Modernization Program								
6	<b>F\$P Contract ID#</b> 1000034242								
7	Budget Name	COP - Reserves							
8									
9		Year 1	Year 2	All Years					
10		12/1/2024 - 5/31/2025	6/1/2026 - 11/30/2026	12/1/2024 - 6/30/2026					
11		New	New	New					
12	Operating Expenses	Budgeted Expense	Budgeted Expense	Budgeted Expense					
85									
86	Capital Expenses								
87	Capital Reserves	\$ 34,863	\$ -	\$ 34,863					
94									
95	TOTAL CAPITAL EXPENSES	\$ 34,863	\$ -	\$ 34,863					
97	HSH #3			7/26/2022					