

**FIRST AMENDMENT TO MAY 7, 2024 INTERLOCAL FUNDING AGREEMENT  
BY AND BETWEEN ST LUCIE COUNTY, FLORIDA AND THE CITY OF FORT PIERCE FOR HOMELESS  
SERVICES**

**THIS FIRST AMENDMENT** is made this \_\_\_\_ day of \_\_\_\_\_, 2024, by and between ST. LUCIE COUNTY, a political subdivision of the State of Florida, hereinafter referred to as the "County" and the CITY OF FORT PIERCE, a Florida municipal corporation, hereinafter referred to as the "City".

**WHEREAS**, on January 9, 2024, the County entered into a grant agreement with the Treasure Coast Homeless Services Council ("TCHSC") to fund staffing as well as operational costs at the Housing Hub and to expand services by developing a women's facility (Attachment "A"); and,

**WHEREAS**, on May 7, 2024, the parties entered into an Interlocal Funding Agreement (the "Agreement") wherein the City contributed funds to support the Housing Hub and TCHSC's expansion of services to women (Attachment "B"); and,

**WHEREAS**, on September 17, 2024, the County amended its grant agreement with the TCHSC to reflect additional eligible activities and extend the term as detailed in the attached Amendment No. 1 to the Housing Hub Grant Agreement (Attachment "C"); and,

**WHEREAS**, the parties desire to amend the Agreement to reflect the changes made to the County's grant agreement with TCHSC.

**NOW, THEREFORE**, the parties hereto, in consideration of the mutual covenants, agreements, terms, and conditions contained herein, do agree as follows:

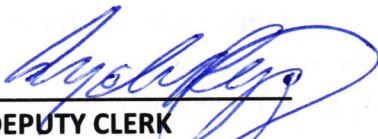
1. Attachment "C" is adopted by the parties as the First Amendment to the Agreement.
2. Except as amended herein, all other terms and conditions of the Agreement shall remain in full force and effect.

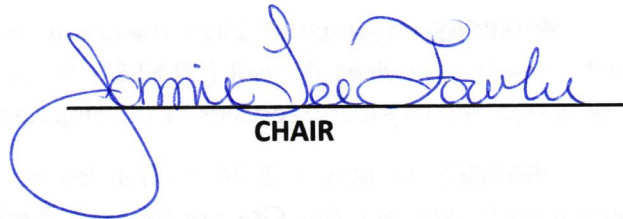
[Remainder of Page Intentionally Left Blank]

IN WITNESS WHEREOF, the parties hereto have accepted, made, and executed this First Amendment in counterparts each of which shall be treated as an original upon the terms and conditions above stated.

ATTEST:

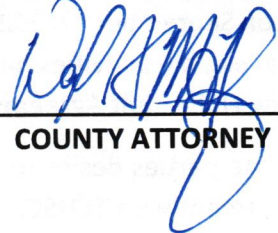
ST. LUCIE COUNTY

  
DEPUTY CLERK

  
CHAIR



APPROVED AS TO FORM AND CORRECTNESS:

  
COUNTY ATTORNEY

ATTEST:

CITY OF FORT PIERCE

\_\_\_\_\_  
CITY CLERK

\_\_\_\_\_  
MAYOR

APPROVED AS TO FORM AND CORRECTNESS:

\_\_\_\_\_  
CITY ATTORNEY

## Attachment A

### ST. LUCIE COUNTY AND TREASURE COAST HOMELESS SERVICES COUNCIL, INC HOUSING HUB GRANT AGREEMENT

**THIS AGREEMENT**, made this 9<sup>th</sup> day of January, 2024 between **ST. LUCIE COUNTY**, a political subdivision of the State of Florida, hereinafter called the "County," and **TREASURE COAST HOMELESS SERVICES COUNCIL, INC.**, a Florida Not-For-Profit Corporation, or its successors, executors, administrators, and assigns hereinafter called "Recipient":

**IN CONSIDERATION** of the mutual benefits received by each part, the parties mutually agree as follows:

1. The County shall disperse to the Recipient a financial award not to exceed six hundred thousand and 00/100 dollars (\$600,000) for the period beginning October 1, 2023 through and including September 30, 2024. The Recipient shall use funds in accordance with the applicable Attachments included with this agreement. Recipient may use up to fifteen percent (15%) of the total award for administrative fees. This fee is meant to cover costs to develop, administer, evaluate and track projects and/or programs described in Exhibit A – Scope of Award. After the initial advance, this Agreement is on a cost-reimbursement basis. The Recipient will be required to submit Quarterly Financial Activity Reports and Quarterly Outcome reports as delineated in Exhibit B – Reporting Requirements. Reports shall be due on or before the 15th of the month following each quarter. Once received, payment will be made to the Recipient within thirty (30) days of County approval. The County reserves the right to request additional data concerning long-term outcomes that the Recipient may have readily available regarding supported programs for up to five (5) years following the full expenditure of the grant funds.
2. Preference shall not be given to any particular population of the homeless i.e., veterans, domestic violence victims, etc.
3. Recipient shall maintain all funds provided under this Agreement in a separate bank account or Recipient's accounting system shall have sufficient internal controls to separately track the expenditure of all funds from the Agreement. The recipient shall expend no more than \$300,000 for the Women's shelter and no more than \$300,000 for the Men's shelter under this combined funding agreement. There shall be no commingling of funds provided under this Agreement, with any other funds, projects, or programs.
4. Recipient shall have internal controls to adequately safeguard funding.
5. If the grant cannot be used or a subsequent audit reveals the grant was not used according to this Agreement, any money not so used shall be reimbursed to the County within thirty (30) days from the date of Recipient's receipt of a written request for reimbursement from the County. The County reserves the right to request, and Recipient must furnish within thirty (30) calendar days, repayment of any sums not used in accordance with this Agreement.
6. If requested, Recipient shall provide an audit, by a certified or duly licensed public accountant, of the expenditure of monies disbursed pursuant to this Agreement. Recipient shall submit all documents required under this paragraph within one hundred and eighty days (180) days after the end of its last fiscal year during which funds are expended under the Contract.
7. Recipient gives the County the right, until the expiration of three (3) years after expenditure of funds under this Agreement, to audit the use of the grant monies. Upon demand, the

County shall have access to and the right to examine any directly pertinent books, documents, papers, and records of Recipient involving transactions related to these grant monies. All required records shall be maintained until an audit is completed and all questions arising there from are resolved, or until the expiration of three (3) years after the expenditure of the funds.

8. Recipient shall ensure rules of conduct for all staff, volunteers, contractors, agents and participants are in place and provide a copy to the County upon request.
9. Recipient shall be responsible for providing necessary security and ensuring the safety of its staff, volunteers, contractors, agents and participants at all times.
10. Recipient is and shall be an independent contractor, responsible to all parties for all of its acts or omissions and the County shall in no way be responsible for such acts or omission. Recipient shall and will indemnify and hold harmless the County from and against any and all liability, claims, damages, expenses, fees, fines, penalties, suits, proceedings, and actions and cost of actions, including reasonable attorney's fees of any kind and nature arising or growing out or in any way connected with the use, occupations, administration or control of the above described services by Recipient or its agents, employees, customers, patrons or invitee, or resulting from injury to person or property, or a loss of life or property of any kind or nature whatsoever sustained during the term of this Agreement. Recipient hereby acknowledges that the payments made under this Agreement include specific consideration for the indemnification provided herein.
11. Recipient agrees to comply with all local, state and federal laws, rules and regulations.
12. Recipient shall procure and maintain during the life of this Agreement insurance of the types and subject to the limits set forth below. Such insurance shall cover Recipient and appropriate personnel, including without limitation, Recipient's employees and contractors. Recipient shall also provide the County with evidence of this insurance in the form of Certificates of Insurance which shall be subject to the County's approval for adequacy. The County shall be an Additional Insured on policies of Commercial General Liability with respect to all claims arising out of the work performed under this Agreement. The County shall be given thirty( 30) days prior written notice of any material changes or cancellations of the policies. Except as otherwise stated, the amounts and types of insurance shall conform to the following minimum requirements:
  - a. Commercial General Liability. Recipient shall provide and maintain during the life of this Agreement, its own expense, Commercial General Liability insurance on an occurrence basis for a minimum combined single limit of \$1,000,000.00 per occurrence, 2,000,000.00 general aggregate for claims of bodily injury including death, property damage and personal injury. Contractual Liability coverage shall be included.
  - b. Commercial Auto Liability. Provider shall provide and maintain during the life of this Agreement, at its own expense, Business Commercial Auto Liability for claims of bodily injury and property damage for minimum limits of \$ 1,000,000.00 combined single limit.
  - c. Workers' Compensation. Provider shall provide and maintain during the life of this Agreement, at its own expense, Workers' Compensation insurance coverage to cover all employees and include Employers Liability coverage with limits of not less than 1,000,000.00 for accidents or disease.

13. All publications, media productions and exhibit graphics shall include the following statement: Sponsored in part by the Board of County Commissioners, St. Lucie County, Florida.

14. Any notice shall be in writing and sent registered or certified mail, postage and charges prepaid, and addressed to the parties at the following address:

**TO THE COUNTY:** St. Lucie County Administrator  
2300 Virginia Avenue  
Fort Pierce, Florida 34982

**WITH COPIES TO:** St. Lucie County Attorney  
Administration Annex 2300 Virginia Avenue  
Fort Pierce, Florida 34982

St. Lucie County Community Services Director  
Administration Annex 2300 Virginia Avenue  
Fort Pierce, Florida 34982

**TO RECIPIENT:** Treasure Coast Homeless Services Council, Inc.  
2525 St. Lucie Avenue  
Vero Beach, Florida 32960

15. No amendment, modification or waiver of this Agreement shall be valid or effective unless in writing and signed by both parties and no waiver of any breach or condition of this Agreement shall be deemed to be a waiver of any other conditions or subsequent breach whether of like or different nature. If the County currently provides or subsequently provides any forms for agreement modification, Recipient agrees to use said forms.

16. Recipient represents that it presently has no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with the performance of services required hereunder, as provided for in Section 112.311, Florida Statutes (2018) and as may be amended from time to time. Recipient further represents that no person having any interest shall be employed for said performance.

17. This Agreement may be terminated by either party without cause, upon ninety (90) days prior written notice to the other party. The County may, if due to the fault of Recipient, without prejudice to any other right or remedy, after thirty (30) days written notice, terminate this Agreement if:

- A. Recipient is adjudged bankrupt or insolvent.
- B. Recipient makes any assignment for the benefit of creditors.
- C. A trustee or receiver is appointed for Recipient or for any of Recipient's property.
- D. Recipient files a petition or seeks in any manner to take advantage of any debtor's act or to reorganize under bankruptcy or any similar law.
- E. Recipient violates any material provision of this Agreement and has failed to cure such violation after thirty (30) days written notice from the County, which describes the alleged violation, and requests cure.

The County may immediately terminate this Agreement without cause at any time upon ascertaining that pursuant to §287.135, Florida Statutes, a company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a contract with an agency or local government entity for goods or services if at the time of bidding or submitting a proposal for a new contract or renewal of an existing contract, or at any time thereafter, the company: (1) is on the Scrutinized Companies that Boycott Israel List, created pursuant to § 215.4725, Florida Statutes, or is engaged in a boycott of Israel; (2) is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to § 215.473, Florida Statutes; or (3) is engaged in business operations in Cuba or Syria. Furthermore, the County may immediately terminate this Agreement if it is determined that the company submitted a false certification stating that it was not (1) on the Scrutinized Companies that Boycott Israel List or engaged in a boycott of Israel; (2) was not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; (3) or was not engaged in business operations in Cuba or Syria when in fact the company was engaged in such activities at the time of the bid or proposal, or at the time of entering into or renewing this Agreement.

Termination is effective on the date specified on the written notice. In any event, of termination under this paragraph, Recipient shall be paid for all services satisfactorily performed the effective date of termination. The County reserves the right to request, and Recipient must furnish within thirty (30) calendar days, repayment of all or a portion of the initial advance payment if recipient elects to terminate this Agreement without cause within the first year of this Agreement.

18. Recipient shall promptly notify the County in writing by certified mail of all potential conflicts of interest prohibited by existing state law for any prospective business association, interest or other circumstance that may influence or appear to influence Recipient's judgment or quality of services being provided hereunder. Such written notification shall identify the prospective business association, interest or circumstance, the nature of work that Recipient may undertake and request an opinion of the County as to whether the association, interest or circumstance would, in the opinion of the County, constitute a conflict of interest if entered into by Recipient. The County agrees to notify Recipient of its opinion by certified mail within thirty (30) days of receipt of notification by Recipient. If, in the opinion of the County, the prospective business association, interest or circumstance would not constitute a conflict of interest by Recipient, the County shall so state in the notification and shall, at his/her option, enter into said association, interest or circumstance and it shall be deemed not in conflict of interest with respect to services provided to the County by Recipient under the terms of this Agreement.
19. Except as otherwise provided, this Agreement shall be binding upon and shall insure to the benefit of the parties.
20. In the event of a dispute between the parties in connection with this Agreement, the parties agree to submit the disputed issue or issues to a mediator for non-binding mediation prior to filing a lawsuit. The parties shall agree on a mediator chosen from a list of certified mediators available from the Clerk of Court for St. Lucie County. The parties shall share the fee of the mediator equally. To the extent allowed by law, the mediation process shall be confidential and the results of the mediation or any testimony or argument introduced at the mediation shall not be admissible as evidence in any subsequent proceeding concerning the disputed issue.
21. In the event it is necessary for either party to initiate legal action regarding this Agreement, venue shall be in the Nineteenth Judicial Circuit for St. Lucie County, Florida

for claims under state law and the Southern District of Florida for any claims that are justiciable in federal court.

22. This Agreement embodies the whole understanding of the parties. There are no promises, terms, conditions, or obligations other than those contained herein, and this Agreement shall supersede all previous communications, representations or agreements, either verbal or written, between the parties hereto.

23. The Recipient shall allow public access to all documents, papers, letters or other material subject to the provisions of Chapter 119, Florida Statutes, and made or received by the Recipient in conjunction with this Agreement. Specifically, the Recipient shall:

- a. Keep and maintain public records that ordinarily and necessarily would be required by the County in order to perform the service.
- b. Provide the public with access to public records on the same terms and conditions that the County would provide the records and at a cost that does not exceed the cost provided in state law or as otherwise provided by law.
- c. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law.
- d. Meet all requirements for retaining public records and transfer, at no cost, to the County all public records and possession of the contractor upon termination of the contract and destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. All records stored electronically must be provided to the County in a format that is compatible with the information technology systems of the County.
- e. **IF THE RECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE RECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT (772)462-1441, [BellamyS@stlucieco.org](mailto:BellamyS@stlucieco.org), COUNTY ATTORNEY'S OFFICE 2300 VIRIGNIA AVENUE, FORT PIERCE, FL 34982.**

24. Effective January 1, 2021, as required by Section 448.095(2)(a), Florida Statutes, the Recipient and any subcontractors shall register with and use the E-Verify System to verify the work authorization status of all newly hired employees. The County, Recipient, and any subcontractors may not enter into a contract unless each party uses the E-Verify System. The Recipient shall provide documentation of its compliance with this requirement upon request by the County.

If the Recipient enters into a contract with a subcontractor, the subcontractor must provide the Recipient with an affidavit stating the subcontractor does not employ, contract with or subcontract with an unauthorized alien. The Recipient shall maintain a copy of the affidavit during the terms of this Agreement.

The County will not intentionally award contracts to any contractor who knowingly employ unauthorized alien workers, constituting a violation of the employment provisions of the Immigration and Nationality Act ("INA"). The County shall consider the employment by the Recipient of unauthorized aliens a violation of 8 Section U.S.C. 1324(a)(3) [Section 274(e) of the INA]. The Recipient agrees that violation by the Recipient shall be grounds for unilateral termination of this Agreement by the County.

IN WITNESS WHEREOF, the parties have caused the execution by their duly authorized officials as of the day and year first written above.

ATTEST:

BOARD OF COUNTY COMMISSIONERS  
ST. LUCIE COUNTY, FLORIDA

*Vera Smith* DEPUTY CLERK BY: *Cathy Townsend* CHAIR



APPROVED AS TO FORM AND  
CORRECTNESS:

*Asst* COUNTY ATTORNEY

WITNESSES:

*Bruce Lady*  
*Martie Halloran*

TREASURE COAST HOMELESS SERVICES COUNCIL, INC.

BY: *[Signature]*  
NAME: Rayme L. Nuckles  
TITLE: Executive Director - Visionary Leader

**EXHIBIT A: SCOPE OF AWARD**

<b>Project Title:</b>	Housing Hub (Men's and Women's)
<b>Project Description:</b>	Each Hub will provide shelter to unaccompanied homeless individuals. Residents will have access to benefit enrollments, healthcare, mental health services, and employment support and training. Individuals will be provided with case management during their stay and for 6 months following their exit from the program with the goal on obtaining permanent housing.
<b>Project Start Date:</b>	October 1, 2023
<b>Project End Date:</b>	September 30, 2024
<b>Amount of Approved Funding:</b>	An amount not to exceed \$600,000.00. 15% of the total award can be used to cover administrative costs. Reimbursement requests to be made by the recipient on a quarterly basis to include all supporting financial documentation describing expenditures and proof of payment.
<b>Year One</b>	<p>The County will provide funding as follows:</p> <p>\$600,000 Annual Award                  -\$217,500 Advance (15% admin fee + 1st quarter payment of \$127,500) upon execution of contract</p> <hr/> <p>\$382,500 Balance paid in remaining 3 quarterly payments of \$127,500.</p>

## **EXHIBIT B: REPORTING REQUIREMENTS**

- Attachment A - Financial Activity Report
- Attachment B - Outcome Report
- Attachment C - Demographic Report
- Attachment D - HMIS Data Report

**FINANCIAL ACTIVITY REPORTING WOMEN'S SHELTER**  
 Treasure Coast Homeless Services Council  
 TCHSC Contract # XXXXXXXX General Revenue Funds

RECIPIENT: Treasure Coast  
 Homeless Services Council  
 FINANCIAL REPORTING Housing  
 Hub

BUDGET CATEGORIES	TOTAL EXPENDITURES																			Total Expended To Date	Unexpended Balance (A-C)		
	Budgeted Allocation	Advance Quarter 1	Reimbursement Quarter 2	Reimbursement Quarter 3	Reimbursement Quarter 4	Total Payments to Date	Quarter 1			Quarter 2			Quarter 3			Quarter 4							
							Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24					
<b>Total Funds Allocated</b>	\$600,000.00						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$600,000.00	
							Expenses	Expenses	Expenses	Expenses	Expenses	Expenses										(3)	(4)
	Budgeted Allocation																					Year to Date	Unexpended Balance (1-4)
<b>PROGRAM EXPENSES</b>																							
Line 1. Administrative Funds - Men's Shelter	\$45,000.00	\$0.00				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,000.00
Line 1. Administrative Funds - Women's Shelter	\$45,000.00	\$0.00				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,000.00
Line 2. Operational costs including Shelter Monitors, Case Management staffing & Program Expenses - Men's Shelter	\$255,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$255,000.00
Line 2. Operational costs including Shelter Monitors, Case Management staffing and Program Expenses - Women's Shelter	\$255,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$255,000.00
<b>Total</b>	\$600,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$600,000.00
1. Total funds received from SLC - YTD	\$0.00		\$0.00																				

I certify that I am authorized to sign reports and the information provided herein is true and accurate to the best of my knowledge.

Name and Title (please type) \_\_\_\_\_ Authorized Signature

Rayme Nuckles, Executive Director \_\_\_\_\_

DATE: \_\_\_\_\_

Attachment B - Outcome Report for St. Lucie County

	Oct – Dec 2023	Jan – Mar 2024	Apr – Jun 2024	July - Sept 2024	Total
St. Lucie – ESG- Rental Assistance & Other Homeless Prevention Services					0
SOAR Services - Social Security Disability Applications					0
Benefits enrollment - Food Stamps					0
Medical Service Referral					0
<b>Residential Program</b>					
Men's - Applications for Residency					0
Women's - Applications for Residency					0
Men's - Residential Enrollments					0
Women's - Residential Enrollments					0
Men's - Number on Waitlist					0
Women's - Number on Waitlist					0
Men's - Successful exits in Permanent Housing					0
Women's - Successful exits in Permanent Housing					0
Men's - Number of Residents voluntarily leaving the program					0
Women's - Number of Residents voluntarily leaving the program					0
Men's - Number of Residents asked to leave the program					0
Women's - Number of Residents asked to leave the program					0

Attachment C - Residential Demographic Report \*

	Oct – Dec 2023	Jan – Mar 2024	Apr – Jun 2024	July - Sept 2024	Total
Age					0
Gender					0
Ethnicity					0
Length of Homelessness					0
Income					0
Education Level					0

\* This report can be provided through the Homeless Management Information Systems (HMIS) printout.

**Attachment D - HMIS Database Access**

Treasure Coast Homeless Services Council agrees to provide St. Lucie County one license to access the Housing Hub and Shelter Data in the Homeless Management Information System



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/15/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Schlitt Insurance Services 1717 Indian River Boulevard Suite 300 Vero Beach FL 32960		CONTACT NAME: Jessica Shephard PHONE (A/C, No, Ext): (772) 567-1188 E-MAIL ADDRESS: jess@schlittservices.com FAX (A/C, No): (772) 778-1416	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		INSURER A: Scottsdale Insurance Co.	
		INSURER B: Technology Insurance Company	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	
<b>INSURED</b> Treasure Coast Homeless Services Council, Inc., DBA: Indian River Rayme Nuckles 2525 St. Lucie Avenue Vero Beach FL 32960		NAIC # 42376	

**COVERAGES**

CERTIFICATE NUMBER: CL2421510901

REVISION NUMBER:

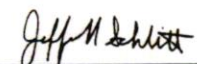
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		Y	UPOLV-O	02/05/2024	02/05/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 Medical Payments \$ 5,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			UPOLV-O	02/05/2024	02/05/2025	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	TWC4272600	07/15/2023	07/15/2024	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

St Lucie County Board of County Commissioners: 2300 Virginia Ave, Fort Pierce, FL 34982 is additional insured with respect to all claims arising out of the work performed under this Agreement.

**CERTIFICATE HOLDER****CANCELLATION**

St Lucie County Board of County Commissioners 2300 Virginia Ave Fort Pierce FL 34982	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

© 1988-2015 ACORD CORPORATION. All rights reserved.

# Attachment B

## INTERLOCAL FUNDING AGREEMENT BY AND BETWEEN ST. LUCIE COUNTY, FLORIDA AND THE CITY OF FORT PIERCE FOR HOMELESS SERVICES

THIS INTERLOCAL AGREEMENT ("Agreement") is entered into this 87 day of May, 2024, by and between the CITY OF FORT PIERCE, a Florida municipal corporation, (hereinafter "City") and ST. LUCIE COUNTY, a political subdivision of the State of Florida (hereinafter "County").

### RECITALS

**WHEREAS**, the County and City desire to enter into this Agreement pursuant to Section 163.01 Florida Statutes, known as the "Florida Interlocal Cooperation Act of 1969," which authorizes local governmental units to make the most efficient use of their powers by enabling them to cooperate with each other on a basis of mutual advantage; and

**WHEREAS**, the County is seeking financial contributions in support of the Treasure Coast Homeless Services Council ("TCHSC"), a non-profit organization, to continue to fund staffing as well as operational costs at the Housing Hub (24-bed shelter for adult men) and to expand services by developing a Women's Facility; and

**WHEREAS**, the City desires to contribute funds to support the TCHSC Housing Hub and TCHSC's expansion of services to women; and

**WHEREAS**, the County acknowledges the importance of the TCHSC Housing HUB and TCHSC's expansion of services to women and is willing to accept the funds provided by the City for the purposes outlined in this Agreement.

**NOW, THEREFORE**, in consideration of the foregoing premises, mutual benefits to be derived from the cooperation of the parties regarding addressing the needs of homeless individuals, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the City and the County agree as follows:

1. **Recitations.** The foregoing recitals are true and are incorporated herein by reference.
2. **City Responsibilities.** The City agrees to provide the County with the sum of One Hundred Twenty-Five thousand Dollars (\$125,000) to be remitted to the TCHSC to fund staffing as well as operational costs at the Housing HUB and to expand services by developing a Women's Facility.
  - a. The City shall remit payment to the County within thirty (30) days of the effective date of this Agreement.

MICHELLE R. MILLER, CLERK OF THE CIRCUIT COURT  
SAINT LUCIE COUNTY  
FILE # 5345963 06/04/2024 11:11:26 AM  
OR BOOK 5159 PAGE 737 - 744 Doc Type: AGR  
RECORDING: \$69.50

- 3. County Responsibilities.** The County shall remit the funds received from the City to the TCHSC for use by the TCHSC to fund staffing as well as operational costs at the Housing HUB and to expand services by developing a Women’s Facility.
- a. The County shall remit the funds received from the City to the TCHSC on a cost-reimbursement basis in accordance with the terms of the grant agreement between the County and TCHSC.
  - b. The County agrees to provide the City with the quarterly Financial Activity Reports and Quarterly Outcome reports provided by TCHSC pursuant to the grant agreement.
  - c. If the funds cannot be used or a subsequent audit reveals the funds were not used according to this Agreement, any money not so used shall be reimbursed to the City within thirty (30) days from the date of County’s receipt of a written request for reimbursement from the City. The City reserves the right to request, and the County must furnish within thirty (30) calendar days, repayment of any sums not used in accordance with this Agreement.
- 4. Term; Termination:** This Agreement shall commence on the effective date set forth in paragraph 11 below, and shall continue until September 30, 2024, or until the funding has been fully expended, whichever comes last. This Agreement may be terminated upon mutual agreement of the parties except in the event of a breach of a provision herein, in which case the non-breaching party may terminate upon thirty (30) days written notice to the other party.
- 5. Notices.** All written notices required under this Agreement, shall be in writing and shall be (as elected by the party giving such notice) hand delivered by messenger or courier service or mailed by certified mail, postage prepaid, return receipt requested, and shall be directed to the following persons and places designated by the parties:

FOR THE CITY:	FOR THE COUNTY
CITY OF FORT PIERCE 100 N. U.S. Highway 1 Fort Pierce, FL 34950	ATTN: COMMUNITY SERVICE DIRECTOR 714 Avenue C, 2 <sup>nd</sup> Floor Fort Pierce, FL 34950
<b>With a copy to:</b> CITY MANAGER CITY OF FORT PIERCE 100 N. U.S. Highway 1 Fort Pierce, FL 34950	<b>With a copy to:</b> ST. LUCIE COUNTY ADMINISTRATOR County Administration Annex 2300 Virginia Avenue Fort Pierce, FL 34982
AND	AND
SARA HEDGES, CITY ATTORNEY	ST. LUCIE COUNTY ATTORNEY

CITY OF FORT PIERCE 100 N. U.S. Highway 1 Fort Pierce, FL 34950	County Administration Annex 2300 Virginia Avenue Fort Pierce, FL 34982
---	--

6. **Invalid Provisions.** In the event any term or provision of this Agreement is held illegal, unenforceable, or inoperative as a matter of law, the remaining terms and provisions will not be affected thereby but will be valid and remain in full force and effect so far as possible. If any provision of this Agreement may be construed in two or more ways, one of which would render the provision invalid or otherwise voidable or unenforceable and another of which would render the provision valid and enforceable, such provision shall have the meaning which renders it valid and enforceable.
7. **Liability.** The parties to this Agreement shall not be deemed to have assumed any liability for the negligent or wrongful acts or omissions of the other party, or their respective officers, employees, servants, or agents. Nothing contained herein shall be construed as a waiver, by either party, of the liability limits established in Section 768.28, Florida Statutes, or any other source of applicable governing law.
8. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.
9. **Entire Agreement.** This Agreement contains the entire agreement between the parties hereto as it pertains to the subject matter contained herein and shall supersede and take precedence over any and all prior and contemporaneous verbal or written agreements and understandings between the parties hereto.
10. **Amendments.** This Agreement may not be amended, modified, altered, or changed in any respect whatsoever, except by a further agreement in writing duly executed by each and all of the parties hereto.
11. **Recording; Effective Date.** This Agreement shall be recorded by the County in the Official Public Records of the Clerk of the Court of St. Lucie County, Florida. A copy of the recorded Agreement shall be forwarded to the City. The Effective Date of this Agreement shall be the date the Agreement is recorded in the public records of St. Lucie County, Florida.

(Remainder of this page left blank)

IN WITNESS WHEREOF, the County and City have caused this Agreement to be executed on behalf of their respective entities, their successors, and assigns, on the day first above written.

ATTEST:

Vera Smith  
DEPUTY CLERK



BOARD OF COUNTY COMMISSIONERS  
ST. LUCIE COUNTY, FLORIDA

BY: Cathy Townsend  
CATHY TOWNSEND, CHAIR

APPROVED AS TO FORM AND CORRECTNESS:

BY: [Signature]  
COUNTY ATTORNEY

ATTEST:

Linda W. Cox  
CITY CLERK

CITY OF FORT PIERCE, FLORIDA

BY: Linda Hudson  
LINDA HUDSON, MAYOR

APPROVED AS TO FORM AND CORRECTNESS:

BY: [Signature]  
SARA HEDGES, CITY ATTORNEY

**FINANCIAL ACTIVITY REPORTING WOMEN'S SHELTER**  
**Treasurer Coast Homeless Services Council**  
**TCSC Contract # XXXXXX General Revenue Funds**

RECIPIENT: Treasurer Coast Homeless Services Council  
 FINANCIAL REPORTING HOUSING HUB

BUDGET CATEGORIES	TOTAL EXPENDITURES												Unexpended Balance (A-C)										
	Budgeted Allocation	Advance Quarter 1	Reimbursement Quarter 2	Reimbursement Quarter 3	Reimbursement Quarter 4	Total Payments to Date	Quarter 1			Quarter 2				Quarter 3			Quarter 4						
							Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24		Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Total Expended To Date	Unexpended Balance (A)		
<b>Total Funds Allocated</b>	\$400,000.00						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$400,000.00
	Budgeted Allocation						Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Expenses	Unexpended Balance (A)
							PROGRAM EXPENSES																
Line 1. Administrative Funds - Men's Shelter	\$45,000.00	\$0.00	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,000.00
Line 1. Administrative Funds - Women's Shelter	\$45,000.00	\$0.00	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,000.00
Line 2. Operational costs including Shelter Monitors, Case Management staffing & Program Expenses - Men's Shelter	\$255,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$255,000.00
Line 2. Operational costs including Shelter Monitors, Case Management staffing and Program Expenses - Women's Shelter	\$755,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$755,000.00
<b>Total</b>	<b>\$600,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$600,000.00</b>
1. Total funds received from S.I.C. YTD																							
																							\$0.00

I certify that I am authorized to sign reports and the information provided herein is true and accurate to the best of my knowledge.

Authorized Signature

Rayme Nuckles, Executive Director

DATE: \_\_\_\_\_

Attachment B - Outcome Report for St. Lucie County

	Oct – Dec 2023	Jan – Mar 2024	Apr – Jun 2024	July - Sept 2024	Total
St. Lucie – ESG- Rental Assistance & Other Homeless Prevention Services					0
SOAR Services - Social Security Disability Applications					0
Benefits enrollment - Food Stamps					0
Medical Service Referral					0
<b>Residential Program</b>					
Men's - Applications for Residency					0
Women's - Applications for Residency					0
Men's - Residential Enrollments					0
Women's - Residential Enrollments					0
Men's - Number on Waitlist					0
Women's - Number on Waitlist					0
Men's - Successful exits in Permanent Housing					0
Women's - Successful exits in Permanent Housing					0
Men's - Number of Residents voluntarily leaving the program					0
Women's - Number of Residents voluntarily leaving the program					0
Men's - Number of Residents asked to leave the program					0
Women's - Number of Residents asked to leave the program					0

Attachment C - Residential Demographic Report \*

	Oct - Dec 2023	Jan - Mar 2024	Apr - Jun 2024	July - Sept 2024	Total
Age					0
Gender					0
Ethnicity					0
Length of Homelessness					0
Income					0
Education Level					0

\* This report can be provided through the Homeless Management Information Systems (HMIS) printout.

**Attachment D - HMIS Database Access**

Treasure Coast Homeless Services Council agrees to provide St. Lucie County one license to access the Housing Hub and Shelter Data in the Homeless Management Information System

## Attachment C

### **Amendment No. 1 to the Housing Hub Grant Agreement between St. Lucie County and Treasure Coast Homeless Services Council, Inc. (C24-01-266)**

This Amendment No. 1 to the Housing Hub Grant Agreement ("Agreement") is made and entered into this 17 day of September, 2024, by and between St. Lucie County, a political subdivision of the State of Florida (the "County"), and Treasure Coast Homeless Services Council, Inc., a Florida Not-For-Profit Corporation (the "Recipient").

**WHEREAS**, the County and the Recipient entered into the Agreement on January 9, 2024, for the provision of services to homeless individuals; and

**WHEREAS**, the parties now desire to amend the Agreement to extend the term of the agreement and reflect certain additions to the Scope of Work as detailed herein.

**NOW, THEREFORE**, in consideration of the mutual covenants contained herein, the parties agree to amend the Agreement as follows to include the following eligible activities:

#### **1. Eligible Activities**

##### **a. Eligible Activity No. 1 – Street Outreach and Shelter Intake Maximum Reimbursement for this Activity: \$80,000.00**

TCHSC will implement proactive outreach to homeless individuals sleeping in parks, encampments, and vehicles within St. Lucie County. Outreach efforts will engage homeless individuals at congregate sites and encampments, aiming to bring them into Housing Hub residential programs for stabilization. TCHSC is authorized to charge staffing costs for these outreach activities to the County.

##### **b. Eligible Activity No. 2 – St. Lucie County Director Maximum Reimbursement for this Activity: \$93,000.00**

To enhance service delivery, TCHSC will appoint a St. Lucie County Director responsible for inter-agency communications and planning. The Director will facilitate intensive wrap-around services for Housing Hub program participants. The role will promote quality service delivery to those experiencing homelessness. The billable rate for this position may not exceed \$48/hour. The following tasks associated with addressing homelessness in St. Lucie County may be billed for using Attachment E:

Deliverable #	Description
1	Conducting assessments of homelessness issues within a community or organization.
2	Analyzing data related to homelessness trends, demographics, and service needs.
3	Developing strategic plans or roadmaps for addressing homelessness.
4	Facilitating planning sessions and workshops with stakeholders.
5	Designing new programs or services to address homelessness.

6	Creating detailed project plans, including objectives, timelines, and resource needs.
7	Writing grant proposals or funding applications to support homelessness initiatives.
8	Developing fundraising strategies and materials.
9	Conducting training sessions for staff or volunteers on best practices in homelessness services.
10	Developing training materials and curricula.
11	Analyzing existing policies related to homelessness and providing recommendations for improvements.
12	Drafting policy briefs or reports for clients.
13	Designing and implementing evaluation plans for homelessness programs.
14	Analyzing program outcomes and providing recommendations for improvement.
15	Facilitating meetings and discussions with stakeholders such as local government officials, non-profits, and community groups.
16	Developing engagement strategies to build support for homelessness initiatives.
17	Providing technical support and advice on best practices and innovative approaches.
18	Assisting with the implementation of new systems or processes.
19	Collecting and analyzing data related to homelessness services and outcomes.
20	Preparing detailed reports and presentations for clients.
21	Assisting clients in advocating for policy changes at local, state, or federal levels.
22	Preparing advocacy materials and coordinating lobbying efforts.
23	Developing plans for crisis management related to homelessness issues.
24	Providing support and recommendations during emergencies or critical situations.

**c. Eligible Activity No. 3 – Per Transaction Reimbursement for Certification of Homeless Form**

**Maximum Reimbursement for this Activity: \$5,000.00**

TCHSC will assist St. Lucie County residents experiencing homelessness in completing the “Self-Certification of Homeless Status” form. A pre-screen assessment will be conducted during this process to initiate the coordinated entry process. TCHSC will be reimbursed \$50 per completed certification, documented in an HMIS service summary along with a copy of the completed form.

**d. Eligible Activity No. 4 – Move-In Rental Assistance Payments for Housing Hub Program Participants**

**Maximum Reimbursement for this Activity: \$55,000.00**

Due to increased demand and successful program exits, TCHSC will utilize funds to cover move-in rental assistance payments. Assistance includes the first month's rent, security deposit, and (if essential for stability) second month's rent. Payments will be made directly to landlords and utility providers, with proper documentation provided.

**Program Guidelines:**

Participants must be current program participants of the Housing Hub Program (Men's Shelter and Women's Shelter). Participants must be literally homeless (Category 1) and have an income at or below 50% Area Median Income. Financial assistance will help households move into rental properties in St. Lucie County. Monthly rent must not exceed Fair Market Rent as defined by HUD. Documentation will include leases, proof of payment, and client eligibility paperwork.

**2. Paragraph 1 of the Contract shall be amended to read as follows:**

1. The County shall disperse to the Recipient a financial award not to exceed six hundred thousand dollars and 00/100 dollars (\$600,000) for the period beginning October 1, 2023 through and including September 30, 2025. The Recipient shall use funds in accordance with the applicable Attachments included with this agreement. Recipient may use up to fifteen percent (15%) of the total award for administrative fees. This fee is meant to cover costs to develop, administer, evaluate and track projects and/or programs described in Exhibit A – Scope of Award. After the initial advance, this Agreement is on a cost-reimbursement basis. The Recipient will be required to submit Quarterly Financial Activity Reports and Quarterly Outcome reports as delineated in Exhibit B – Reporting Requirements. Reports shall be due on or before the 15th of the month following each quarter. Once received, payment will be made to the Recipient within thirty (30) days of County approval. The County reserves the right to request additional data concerning long-term outcomes that the Recipient may have readily available regarding supported programs for up to five (5) years following the full expenditure of the grant funds.
3. Attachment B to the agreement has been amended to reflect reporting of the activities as referenced above.
4. Except as amended herein, the remaining terms and conditions of the January 09, 2024 Housing Hub Grant Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have caused the execution by their duly authorized officials as of the day and year first written above.

ATTEST:

BOARD OF COUNTY COMMISSIONERS  
ST. LUCIE COUNTY, FLORIDA

Vera Smith  
DEPUTY CLERK



BY: Cathy Lawrence  
CHAIR

APPROVED AS TO FORM AND  
CORRECTNESS:

[Signature]  
COUNTY ATTORNEY

WITNESSES:

TREASURE COAST HOMELESS  
SERVICES COUNCIL, INC.

McK Southard  
Bruce Cady

BY: [Signature]

NAME: Rayme L. Nuckles

TITLE: Executive Director - Visionary Leader