ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. Contact the Mayor's Legislative team with questions

Ples	ase mark one:	☐ Bill Request	or		Request	Date of Request:	03/25/22		
	Type of Request:	☐ Din Kequest	OI .	⊠ Kesolution	Request				
	-	— -			. — -				
\boxtimes	Contract/Grant Ag	reement	ernmenta	l Agreement (IGA) 📙 Rezoni	ng/Text Amendment			
	Dedication/Vacation	on Appropri	ation/Sup	plemental	☐ DRMC	Change			
	Other:								
2. 7	acceptance, contrac Approves an agreer	t execution, contract amer ment with The Community	ndment, m y Firm for	sunicipal code chan	ge, supplemen	tor and indicate the type of ntal request, etc.) nergency Rental Assistance			
	(ERAP) with an end	d date of 07/31/2023. (HC	ST-20226	52616)					
3. 1	Requesting Agency	: Department of Housing	g Stability						
4. (Contact Person:								
		nowledge of proposed			rson to presen	t item at Mayor-Council ar	nd		
_	dinance/resolution ame: Melissa Thate				Council Name: Jack Wylie				
Email: melissa.thate@denvergov.org				Email: jack.wylie@denvergov.org					
5.	General description or background of proposed request. Attach executive summary if more space needed: (in this section, please describe what the additional funding will support if it is an amendment) This agreement creates a \$9,700,000 contract between HOST and The Community Firm to administer the Emergency Renta Assistance Program (ERAP). This contract is funded through the United States Department of the Treasury, pursuant to Section 3201 of the American Rescue Plan Act of 2021, Pub. L. No. 117-2 (ERA2). This is a continuation of the Emergency Renta Assistance Program previously established and funded through the United States Department of the Treasury, pursuant to Section 501(a) of Division N of the Consolidated Appropriations Act, 2021 (ERA1). The Community Firm will provide emergency rental assistance and housing stability services to eligible households in the City and County of Denver earning up to 80% of the area median income that are unable to pay rent during or due to the COVID-19 pandemic. Assistance may also include relocation expenses such as deposit and first month's rent when necessary to relocate to								
	another housing unit to maintain housing stability. The aggregate amount of financial assistance an eligible household may receive under ERA2, when combined with financial assistance under ERA1, must not exceed 18 months. This contract will serve approximately 1400 households.								
6.	City Attorney assigned to this request (if applicable): Andrew Riester								
7.	City Council Distr	ict: All							
8.	**For all contracts, fill out and submit accompanying Key Contract Terms worksheet**								
		To be	completed	d by Mayor's Legis	lative Team:				
Res	olution/Bill Number	:			Date Entere	ed:			

Key Contract Terms

Type of Contr Services > \$50		00K; IGA/Grant Agreement, Sa	le or Lease of Real Property): Professional						
Vendor/Conti	ractor Name: The Community Firm								
Contract cont	trol number: HOST-202262616								
Location: 410	Acoma St., #311, Denver, CO 80204	1							
Is this a new contract? ⊠ Yes □ No Is this an Amendment? □ Yes ⊠ No If yes, how many?									
3/1/2022 to 7/3	m/Duration (for amended contracts 31/2023 ount (indicate existing amount, ame								
	Current Contract Amount	Additional Funds	Total Contract Amount						
	(A)	(B)	(A+B)						
	\$9,700,000		\$9,700,000						
	Current Contract Term	Added Time	New Ending Date						
	3/1/2022 to 7/31/2023	110000 1000	Tien Bland Bate						
stability by as hardship durin Was this cont		essidents (80% area median incomess? Yes If not, why notes							
Source of fund	ds: Emergency Rental Assistance Pro	gram (ERA2)							
Is this contrac	et subject to: W/MBE DB	E SBE XO101 AC	CDBE X N/A						
WBE/MBE/D	BE commitments (construction, des	sign, Airport concession contract	ts): N/A						
Who are the s	subcontractors to this contract? N/.	A							
	To be co	ompleted by Mayor's Legislative Te	eam:						
Resolution/Ril	Resolution/Bill Number: Date Entered:								