

DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT

DEVELOPMENT SERVICES BUILDING

150 BEAVERCREEK ROAD OREGON CITY, OR 97045

September 19, 2024	BCC Agenda Date/Item:
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Board of County Commissioners Clackamas County

Approval of a Grant Application to the US Department of Transportation National Culvert Removal, Replacement and Restoration Grant Program for the Hackett Creek Culvert Replacements Project at E. Mountain Creek Circle and E. Hideaway Lane in Rhododendron. Total Grant Value of \$6,997,600 with \$5,598,080.00 in grant funds and \$1,399,520.00 County Road Funds. No County General Funds are involved.

Previous Board	09/17/2024: Request for Consent			
Action/Review				
Performance	Build a strong infrastructure			
Clackamas				
Counsel Review	N/A	Procurement Review	N/A	
Contact Person	Joel Howie	Contact Phone	503-742-4658	

EXECUTIVE SUMMARY Department of Transportation and Development staff requests Board support and approval to submit a grant funding request of \$5,598,080.00 for the National Culvert Removal, Replacement, and Restoration Grant Program (Culvert Aquatic Organism Passage (AOP) Program). The Culvert AOP program allows requests up to 80 percent, in this case \$5,598,080.00. The matching funds of 20 percent in the amount of \$1,399,520.00 will be provided by County Road Fund. The overall project cost is \$6,997,600.00.

Grant funding of this project would replace six, 42-inch diameter corrugated metal culverts that convey Hackett Creek under E. Mountain Creek Circle (3 culverts) and E. Hideaway Lane (3 culverts) in Rhododendron with two precast, pre-stressed modular bridge structures. The existing culverts are dated, undersized, prone to over-topping, and are a full or partial fishpassage barrier under certain flow regimes. The culverts on E. Hideaway Lane have begun to experience joint failure and E. Hideaway Lane has been tapered to one lane at the culvert site. The project will restore the creek channel to a natural state that will meet full state and federal fish passage requirements.

	For Filing Use Only	

Both of these locations are on the ODFW's state-wide fish-passage barrier priority list as Hackett Creek supports wild coho salmon, winter steelhead, and possibly chinook salmon in addition to cutthroat trout, lamprey, and other aquatic species. Hackett Creek is known to harbor these various species in all forms and life stages and is an important cold-water refugia habitat.

Replacing the six culverts with two modular bridge structures with an open bottom that meets full fish-passage criteria will provide for a more resilient and a less maintenance intensive travel route for County residents and visitors and will also aid in the recovery of historic and wild aquatic species in the Sandy River Basin.

RECOMMENDATION:

Staff respectfully recommends the board support and provide approval to apply for a grant through the National Culvert Removal, Replacement, and Restoration Grant Program (Culvert Aquatic Organism Passage (AOP) Program) for the Hackett Creek Culvert Replacements Project and E. Mountain Creek Circle and E. Hideaway Lane in Rhododendron.

Respectfully submitted,

Danjohnson

Dan Johnson
Director of Transportation & Development

Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

 $Sections \ of this form \ are \ designed \ to \ be \ completed \ in \ collaboration \ between \ department \ program \ and \ fiscal \ staff.$

If renewal or direct appropriation, complete sections I, II, IV & V only. Section III is not required.

If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC

CONCEPTION								
Section I: Funding Opportunity Information - To Be Completed by Requester			Award type: Award Renewal?	Direct App Subrecipio	oropriation (no a ent Award No	pplication) Direct Award		
Lead Fund # and Department:								
Name of Funding Opportunity:								
Funding Source: Federal – Direct	:		Federal – Pass through	State	Loc	cal		
Requestor Information: (Name of staff in	itiating forn	n)						
Requestor Contact Information:								
Department Fiscal Representative:								
Program Name & Prior Project #: (please	specify)							
Brief Description of Project:								
Name of Funding Agency:								
Notification of Funding Opportunity Web	Address:							
OR								
Application Packet Attached: Ye	<u>e</u> s	No						
Completed By:		Date:						
		** NOW RE	EADY FOR SUBMISSION TO D	DEPARTMENT FISC	CAL REPRESENTATIVE *	**		
Section II: Funding Opportunity	Informat	ion - To Be	Completed by Departme	nt Fiscal Rep				
Competitive Application	Non-Comp	eting Applicat	tion Other					
Assistance Listing Number (ALN), if applicable	le:			Funding Agency	Award Notification Date:			
Announcement Date:				Announcement/	Opportunity #:			
Grant Category/Title				Funding Amount	t Requested:			
Allows Indirect/Rate:				Match Requiren	nent:			
Application Deadline:				Total Project Cos	st:			
Award Start Date:				Other Deadlines	s and Description:			
Award End Date								
Completed By:				Program Income	e Requirements:			
Pre-Application Meeting Schedule:								
Additional funding sources available to	fund this p	rogram? Ple	ase describe:					

 $\label{thm:control_control_control_control} How much General Fund will be used to cover costs in this program, including indirect expenses?$

How much Fund Balance will be used to cover costs in this program, including indirect expenses?

In the next section, limit answers to space available.

Section III: Funding Opportunity Information - To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Mission/Purpose: 1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?
2. Who, if any, are the community partners who might be better suited to perform this work?
3. What are the objectives of this funding opportunity? How will we meet these objectives?
4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?
Organizational Capacity: 1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?
2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?
3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?
4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

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Collaboration 1. List County departments that will collaborate on this award, if any.
Reporting Requirements 1. What are the program reporting requirements for this grant/funding opportunity?
2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?
3. What are the fiscal reporting requirements for this funding?
Fiscal 1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.
2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?
3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?

Name (Typed/Printed)

Date

Signature

Other information necessary to understand this award, if any.

Program Approval:

** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR**

ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN

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Section IV: Approvals

Department: keep original with your grant file.

DIVISION DIRECTOR (or designee, if applicable)		
	09/10/2024	mefor
Name (Typed/Printed)	Date	Signature
DEPARTMENT DIRECTOR (or designee, if applicab	ole) 09/10/2024	Dufin
Name (Typed/Printed)	Date	Signature
FINANCE ADMINISTRATION		
Elizabeth Comfort	9.10.2024	Clizabeth Comfort Signature
Name (Typed/Printed)	Date	Signature
EOC COMMAND APPROVAL (WHEN NEEDED FOR	DISASTER OR EMERGENCY RELIEF APPLICAT	CIONS ONLY)
Name (Typed/Printed)	Date	Signature
COUNTY ADMINISTRATOR	Approved:	Denied:
Name (Typed/Printed)	Date	Signature
approval.		- <u>Financialteam@clackamas.us</u> for Gary Schmidt's he Clerk to the Board at <u>ClerktotheBoard@clackamas.us</u>
BCC Agenda item #:	Date:	
OR		
Policy Session Date:		
	County Administration	Attestation
County Administration: re-route to department a and	t	
Grants Manager at financegrants@clackamas.us		

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Revised 11/2023