



Legislation Details (With Text)

**File #:** 21-2601      **Version:** 1      **Name:**

**Type:** Request for approval      **Status:** Passed

**File created:** 5/31/2021      **In control:** Commissioners Court

**On agenda:** 6/8/2021      **Final action:** 6/8/2021

**Title:** Request for approval of certification of income survey results for one 2017 Hurricane Harvey Texas Community Development Block Grant Disaster Recovery Round One (Harris County Engineering Department Street & Drainage Improvements) Infrastructure project, and approval to submit to the Texas General Land Office.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:** 1. HCED\_Street\_Drainage\_Income\_Survey Pct2.pdf

Date	Ver.	Action By	Action	Result
6/8/2021	1	Commissioners Court		

**To:** Harris County Commissioners Court

**Through:** Adrienne M. Holloway, Ph.D., Executive Director, Community Services  
**Prepared By:** Mike Nguyen, Special Project Manager, Community Services

**Subject:** Harris County Engineering Street & Drainage Improvements - Income Survey  
**Project ID (If applicable):**

**Purpose and Request:**

Request for approval of certification of income survey results for one 2017 Hurricane Harvey Texas Community Development Block Grant Disaster Recovery Round One (Harris County Engineering Department Street & Drainage Improvements) Infrastructure project, and approval to submit to the Texas General Land Office.

**Background and Discussion:**

Approval of Harris County Infrastructure Project Texas 2017 Hurricane Harvey CDBG-DR Funding- Income Survey Certification for Harris County Engineering Department Street & Drainage Improvements project.

**Fiscal Impact:**

*[INSTRUCTIONS: A short description of the cost of the request and where you are requesting funding from. No more than 2 sentences. In addition please fill out the table below. This includes financial impact to the current fiscal year and subsequent fiscal years along with the source of funding (general fund, grant, etc.). If the amount is within the current budget, please indicate the amount from 'Existing Department Budget'. If all of or part of the request is a new expense, please indicate funding source in the space provided.]*

**Fiscal Summary**

Expenditures	FY 20-21	FY 21-22 Projected	Future Years Projected [3 additional years]
<b>Service Impacted:</b> <i>[Please identify the division where expenditures will be incurred]</i>			
Existing Budget			
Additional Appropriation Request			
<b>Total Expenditures</b>			
<b>Funding Sources</b>			
Existing Department Budget			
Please Identify Funding Sources: Special Revenue, Grant, etc.			
[INSERT FUNDING SOURCES]			
<b>Total Sources</b>			

**Alternatives:**

*[INSTRUCTIONS: In this section you should briefly discuss any viable alternatives, including the benefits and consequences of each. Include subtitles on the first line of each alternative to identify it. If appropriate, the financial impact of each alternative can be discussed. If taking no action is a viable alternative it should also be discussed, including any financial or other impacts that would result.]*

**Alignment with Strategic Objective:**

*[INSTRUCTIONS: Please write out the Department Strategic Objective impacted by this item.]*

**Attachments:**

*[INSTRUCTIONS: Please include a list of backup for this item with a short description of each if more than one.]*