

Harris County, Texas

1001 Preston St., 1st Floor Houston, Texas 77002

Legislation Text

| ile #: 21-4963, Version: 1 | | | | |
|----------------------------|---|--|--|--|
| | Department: Purchasing | | | |
| | Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent | | | |
| | Regular or Supplemental RCA: ☐ Regular RCA ☐ Supplemental RCA | | | |
| | Type of Request: Contract - Award | | | |
| | Project ID (if applicable): Vendor/Entity Legal Name (if applicable): MWDBE Participation (if applicable): | | | |
| | Request Summary (Agenda Caption): Request by the Office of the Purchasing Agent for approval of an order authorizing the County Judge to execute an agreement with Grace Solutions International, Inc dba Grace Solutions for isolation and recovery shelter to assist vulnerable residents for the Community Services Department in the amount of \$248,100 for the period of September 14, 2021 - December 31, 2021, with a three-month renewal option, in connection with a public health or safety exemption. | | | |
| | Background and Discussion: | | | |
| | Expected Impact: | | | |
| | Alternative Options: | | | |
| | Alignment with Goal(s): Ustice and Safety Economic Opportunity Housing | | | |

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|---|----------------------|-------------------------|-------------------|------------|--|
| ☐ Public Health | | | | | |
| ☐ Transportation☐ Flooding☐ Environment | | | | | |
| Governance and Customer Service | e Prior Court | Action (if any): | | | |
| Location: | | | | | |
| Address (if applicable list below) | : | | | | |
| ☐ Countywide☐ Precinct 1☐ Precinct 2☐ Precinct 3 | | | | | |
| ☐ Precinct 4 Fiscal and Personnel Summ | | | | | |
| Service Name - | | FY 21-22 | Estimates | | |
| | | | FY 22 | Next 3 FYs | |
| Incremental Expenditures | | | | | |
| Labor Expenditures | | - | - | - | |
| Non-Labor Expenditures | | - | - | - | |
| Total Incremental Expenditure | | - | <u> </u> | | |
| Funding Sources (General Fund, | PIC Fund, Deb | ot or CP, Grants, or Ot | her - Please Spec | cify) | |
| Existing Budget | - | - | - | - | |
| | - | | - | | |
| T. 10 | <u> </u> | | - | | |
| Total Current Budget | <u> </u> | - | - | - | |
| Additional Budget Requested | <u> </u> | - | - | - | |
| | - | | - | | |
| | <u> </u> | | - | | |
| Total Additional Budget Reques | ted | - | - | - | |
| Total Funding Sources | | - | - | - | |
| Personnel (Fill out section only if | ew PCNs) | | | | |
| Current Position Count for Serv | | - | - | - | |
| Additional Positions Requested | | - | - | - | |
| Total Personnel | | - | - | - | |

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|-----------------------------|---|--|
| | Anticipated Implementation Date: | |
| | Emergency/Disaster Recovery Note: | |
| | \square Not an emergency, disaster recovery, or COVID-19 related item | |
| | ☐ Emergency Item | |
| | □ COVID-19 related Item | |
| | ☐ Disaster Recovery related Item | |
| | Contact(s) name, title, department: | |
| | Attachments (if applicable): | |