

**CITY OF MITCHELL
HISTORIC PRESERVATION COMMISSION
CARNEGIE RESOURCE CENTER, 119 W. 3RD AVE
TIME: 5:15 PM, THURSDAY, MARCH 8, 2018**

1. CALL TO ORDER

2. ROLL CALL

3. Approval Of Agenda

4. Approval Of Minutes:

Documents:

HPCMIN122017.PDF

5. Update On New Grant For 2017-2018

Documents:

HPCGRANTINFO.PDF

6. Report From Mitchell Main Street And Beyond

7. Continued Discussion Of Possible Historic Standards

8. Other Business & Reports

9. ADJOURNMENT

**CITY OF MITCHELL
HISTORICAL PRESERVATION COMMISSION
MINUTES, DECEMBER 13, 2017**

NOT APPROVED

Chairman Logan called the December 13, 2017 Mitchell Historical Preservation Commission meeting to order at 5:15 pm at the Carnegie Resource Center, 119 W 3rd Ave, Mitchell, SD.

Members Present: Logan, Ramsay, Clark, Swenson, Pooley, Jirsa, and Putnam (ex-officio).

Members Absent: Johnston, Collins, & Buechler

Approval of Agenda: Motion by Pooley, seconded by Clark to approve the agenda as presented. All members present voting aye, motion carried.

Approval of Minutes: Motion by Ramsay, seconded by Swenson to approve the minutes of the October 18, 2017 meeting. All members present voting aye, motion carried.

Election of Vice-President: Motion by Pooley, seconded by Swenson to nominate Larry Jirsa as the vice-chairman of the commission. There being no other nominations, all members voting aye to elect Jirsa, motion carried.

Possible Council Presentation: The commission discussed making a presentation to the city council about the commission's activities and projects. It was decided to wait until the HPC annual report is completed. Putnam will commence work on it and have the commission review it, prior to submission to SHPO.

Discussion of possible design standards in historic districts. The commission discussed that it may be helpful to have some suggested guidelines for property owners that have historic building. The guidelines may be including appropriate remodeling, façade improvement, signage, and restoration. This may be particular helpful for properties seeking various historic incentives. Commissioner members will be taking photos and notes of buildings that have features that should be encouraged and those that should not be encouraged. Discussion will continue at a later date. Putnam will take the feedback and see it would be appropriate to codify some suggested guidelines.

Other Business & Reports: Jirsa gave an update on the 3rd and Main building. Logan gave a report on Mitchell Main Street & Beyond activities.

It was decided the next meeting will be in February, 2018.

Chairman Logan adjourned the meeting at 6:45 pm.

PRESERVATION PROJECT APPLICATION

The completed application form must be submitted with a cover letter signed by an authorized representative of the applicant certifying that the Allocation Guide has been read. Attach supplemental sheets coded to the appropriate questions if needed. If you need assistance, call the, SD SHPO at 605-773-3458. Applications must be completed in correct format and typed.

Project _____

Location of Project Area _____

Applicant Name and Address: **Project Manager Name and Address:**

Telephone: _____ **Telephone:** _____

Email: _____ **Email:** _____

2017-18 Federal Amount Requested: Basic \$ _____ Supplemental \$ _____

Project Products: _____

PROJECT SUMMARY: For each project.

TENTATIVE SCHEDULE. Indicate sequence of work and anticipated time required to complete each stage of the project. Please be as specific as possible.

COST ESTIMATES: List major categories of work involved and the estimated cost of each, using the major budget heading cited in the Allocation Guide. **Divide into Federal/Match columns.** Federal share should be matched dollar for dollar of the total project costs. Make a separate budget for the Basic and the Supplemental Funds.

ATTACH A LIST OF MEMBERS: Provide an updated resume of members using the form provided.

I certify that the information contained in this application is true and correct to the best of my knowledge, and that I am the duly authorized representative of the applicant. I have read the Allocation Guide and am familiar with all terms and conditions set forth therein. Attached are necessary resumes of project personnel and the completed copies of the Assurances and Debarment and Suspension Certification forms.

Dated:

Project Manager's Signature

Commission Member Resume Form

Name

Date

Commission

Current Address

Employment History

Preservation/History Experience

Publications

Education

U. S. Department of the Interior

**Certification Regarding
Debarment, Suspension, Ineligibility and
Voluntary Exclusion**

Lower Tier Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 43 CFR Part 12, Section 12.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211). Copies of the regulations are included in the proposal package. For further assistance in obtaining a copy of the regulations, contact the U. S. Department of the Interior, Acquisition and Assistance Division, Office of Acquisition and Property Management, 18th and C Streets, N. W., Washington, D.C. 20240.

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTION ON REVERSE)

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such as prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

Instruction for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant unknowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transactions." without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to check the Nonprocurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transaction authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

<p>1. What percentage of funding would this award be in comparison to your organization's total funding?</p> <p><input type="checkbox"/> Less than 30%</p> <p><input type="checkbox"/> 30% - 60%</p> <p><input type="checkbox"/> More than 60%</p>	
<p>2. What type of accounting system will be used to manage the financial records?</p> <p><input type="checkbox"/> Manual</p> <p><input type="checkbox"/> Automated</p> <p><input type="checkbox"/> Combination of manual and automated (please explain)</p> <p><input type="checkbox"/> Our organization does not have an accounting system in place at this time (please explain)</p>	<p>Explanation:</p>
<p>3. Has the State awarded federal funds to your organization previously?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure</p>	<p>Explanation:</p>
<p>4. Does a conflict of interest exist between your organization and the Department of Education?</p> <p><i>A conflict of interest would entail key personnel of your organization, such as the Executive Director, Finance Officer, Business Manager, Board Members, etc. and/or the granting organization, such as a state officer and/or employee having an interest in, or deriving a direct benefit from, a contract. Please see SDCL 5-18A-17.1 through 5-18A-17.6 for more information about conflict of interest.</i></p> <p><input type="checkbox"/> Yes* (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p> <p>*Disclosing a potential conflict of interest does not automatically render the applicant disqualified from receiving the award.</p>	<p>Explanation:</p>
<p>5. If your organization answered "yes" to the previous question, has the conflict been disclosed in writing? If so, please attach a copy of the disclosure. If your organization answered "no" to the previous question, please skip to question number 6.</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (please explain)</p>	<p>Explanation:</p>

<p>6. Does anyone within your organization currently work for the State of South Dakota or have they worked for the State within the last year?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>
<p>7. Does the project manager have more than three (3) years of experience in managing the scope of service required under this program?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>
<p>8. Does your organization's financial and programmatic staff who will oversee this award have more than one (1) year prior experience with a federal grant award?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>
<p>9. How long has your organization been in operation?</p> <p><input type="checkbox"/> 0-2 years</p> <p><input type="checkbox"/> 3-5 years</p> <p><input type="checkbox"/> 6-9 years</p> <p><input type="checkbox"/> 10+ years</p>	
<p>10. Does your organization anticipate passing the award on to other entities?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>
<p>11. If your organization answered "yes" to the previous question, does a conflict of interest exist between your organization and the entity in which your organization will pass the award onto?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>12. If your organization answered "yes" to the previous question, has the conflict of interest been disclosed in writing? If so, please attach a copy of the disclosure.</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (please explain)</p>	<p>Explanation:</p>

Answer questions #13 to #28 if your CLG grant request exceeds \$10,000:

<p>13. Does your organization have experience with a similar award?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>
<p>15. Does your organization maintain policies which include procedures for assuring compliance with the terms of this award?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>16. Does your organization have an accounting system that will allow your organization to completely and accurately track the receipt and disbursements of funds related to this award?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>17. Does your organization have a system in place which can track employee time spent on multiple programs?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>18. Does your organization have a procurement system or procedures in place that meet the minimum federal requirements for procurement as stated in 2 CFR §200.317 – §200.326 (see attached)?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>19. Does your organization have a property management system in place that meets the minimum federal requirements for equipment management as found in 2 CFR §200.310 – §200.316 (see attached)?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>

<p>20. Does your organization have an adequate system or procedures in place for tracking and evaluating in-kind match?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p> <p><input type="checkbox"/> Not applicable</p>	<p>Explanation:</p>
<p>21. Has your organization been audited within the last 3 years?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (please explain)</p>	<p>Explanation:</p>
<p>22. If your organization received over \$750,000 total in federal funds from all sources last year, was a single audit conducted on the entity per 2 CFR §200.501 (see attached)?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (please explain) <i>Skip to question 24.</i></p> <p><input type="checkbox"/> Our organization did not receive over \$750,000 total in federal funds from all sources last year. <i>Skip to question 25.</i></p>	<p>Explanation:</p>
<p>23. If your organization answered "yes" to the previous question, did your organization have one or more audit finding in your last single audit regarding significant internal control deficiency?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>
<p>24. Does your organization currently have any unresolved audit issues?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p> <p><input type="checkbox"/> My organization has not been audited</p>	<p>Explanation:</p>
<p>25. Does your organization intend to claim use of personal property (i.e. a vehicle, cell phone, etc.) as an expense?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Unsure (please explain)</p>	<p>Explanation:</p>

<p>26. Please list key personnel (i.e. Executive Director, Finance Officer, Business Manager, Chief Information Officer, Board Members, etc.) who will be involved with the award and the number of years they have worked for your organization. Please attach a separate document if your organization has more than seven (7) key personnel who will be involved with the award.</p>	<table border="1"> <thead> <tr> <th data-bbox="781 128 1073 163">Name</th> <th data-bbox="1073 128 1445 163"># of Years Worked</th> </tr> </thead> <tbody> <tr><td data-bbox="781 163 1073 233">i.</td><td data-bbox="1073 163 1445 233"></td></tr> <tr><td data-bbox="781 233 1073 302">ii.</td><td data-bbox="1073 233 1445 302"></td></tr> <tr><td data-bbox="781 302 1073 371">iii.</td><td data-bbox="1073 302 1445 371"></td></tr> <tr><td data-bbox="781 371 1073 441">iv.</td><td data-bbox="1073 371 1445 441"></td></tr> <tr><td data-bbox="781 441 1073 510">v.</td><td data-bbox="1073 441 1445 510"></td></tr> <tr><td data-bbox="781 510 1073 575">vi.</td><td data-bbox="1073 510 1445 575"></td></tr> </tbody> </table>	Name	# of Years Worked	i.		ii.		iii.		iv.		v.		vi.	
Name	# of Years Worked														
i.															
ii.															
iii.															
iv.															
v.															
vi.															
<p>27. Has there been any turnover in key personnel within your organization in the last year?</p> <p><input type="checkbox"/> Yes (please explain)</p> <p><input type="checkbox"/> No</p>	<p>Explanation:</p>														
<p>28. Please check all of the following circumstances that apply to your organization (explain as necessary):</p> <p><input type="checkbox"/> A new or substantially changed system or software packages (i.e. accounting, payroll, reporting, technology, administration, etc.)</p> <p><input type="checkbox"/> External risks including: economic conditions, political conditions, regulatory changes, unreliable information, etc.</p> <p><input type="checkbox"/> Loss of license or accreditation to operate program</p> <p><input type="checkbox"/> New activities, products, or services</p> <p><input type="checkbox"/> Organization restructuring</p> <p><input type="checkbox"/> Inadequate system to segregate indirect from direct costs</p>	<p>Explanation:</p>														

Applicant's Name (Please Print)	Applicant's Title
Applicant's Signature	Date

2 CFR §200.310-2 CFR §200.326, and 2 CFR §200.501 (February 2018)

<https://www.gpo.gov/fdsys/search/pagedetails.action?collectionCode=CFR&searchPath=Title+2%2FSubtitle+A%2FChapter+II%2FSubchap%2FPart+200%2FSubpart+D%2FSubjgrp&granuleId=CFR-2014-title2-vol1-part200&packageId=CFR-2014-title2-vol1&oldPath=Title+2%2FSubtitle+A%2FChapter+II%2FSubchap%2FPart+200%2FSubpart+D&fromPageDetails=true&collapse=true&ycord=691>

Section § 200.310 - Insurance coverage. [PDF](#) | [XML](#) | [More](#)

Section § 200.311 - Real property. [PDF](#) | [XML](#) | [More](#)

Section § 200.312 - Federally-owned and exempt property. [PDF](#) | [XML](#) | [More](#)

Section § 200.313 - Equipment. [PDF](#) | [XML](#) | [More](#)

Section § 200.314 - Supplies. [PDF](#) | [XML](#) | [More](#)

Section § 200.315 - Intangible property. [PDF](#) | [XML](#) | [More](#)

Section § 200.316 - Property trust relationship. [PDF](#) | [XML](#) | [More](#)

Section § 200.317 - Procurements by states. [PDF](#) | [XML](#) | [More](#)

Section § 200.318 - General procurement standards. [PDF](#) | [XML](#) | [More](#)

Section § 200.319 - Competition. [PDF](#) | [XML](#) | [More](#)

Section § 200.320 - Methods of procurement to be followed. [PDF](#) | [XML](#) | [More](#)

Section § 200.321 - Contracting with small and minority businesses, women's business enterprises, and labor surplus... [PDF](#) | [XML](#) | [More](#)

Section § 200.322 - Procurement of recovered materials. [PDF](#) | [XML](#) | [More](#)

Section § 200.323 - Contract cost and price. [PDF](#) | [XML](#) | [More](#)

Section § 200.324 - Federal awarding agency or pass-through entity review. [PDF](#) | [XML](#) | [More](#)

Section § 200.325 - Bonding requirements. [PDF](#) | [XML](#) | [More](#)

Section § 200.326 - Contract provisions. [PDF](#) | [XML](#) | [More](#)

Section 200.501 - Audit requirements. [PDF](#) | [XML](#) | [More](#)