

Water Quality Protection Surface Water Management Wastewater Collection & Treatment

November 13, 2025	BCC Agenda Date/Item:
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Board of County Commissioners
Acting as the governing body of Water Environment Services
Clackamas County

Approval of a Grant Application to the Oregon Department of Emergency Management for back-up generator capacity at the Tri-City Water Resource Recovery Facility. Anticipated Grant Value is \$1,000,000 for 3 years. Funding is through Oregon Department of Emergency Management and \$250,000 of required matching WES Sanitary Sewer Construction Funds.

No County General Funds are involved.

Previous Board Action/Review	None		
Performance Clackamas	meet or surpass e standards, to reco	e wastewater and stormwa environmental, safety, and over resources and to prot tunity supports the Count Infrastructure.	l public health ect watersheds.
Counsel Review	N/A	Procurement Review	No
Contact Person	Erin Blue	Contact Phone	503-742-4585

**EXECUTIVE SUMMARY**: WES requests approval to apply for Hazard Mitigation Grant Program (HMGP) funding from the Oregon Department of Emergency Management. The requested HMGP funds will be used to improve backup generator capacity at WES' Tri-City Water Resource Recovery Facility to safeguard wastewater infrastructure, enhance community resiliency, and protect critical services during power outages.

HMGP funding would provide 75% or \$750,000 of project costs through Federal funds, with a required 25% or \$250,000 cost match that will be met using WES Sanitary Sewer Construction Funds.

Total funds available for this grant round are limited to approximately \$7.9 million. WES' project has been selected as an alternate. Approval to submit this application will allow WES to be

considered for funding if additional funds become available.

**RECOMMENDATION:** Staff respectfully recommends that the Board of County Commissioners of Clackamas County, acting as the governing body of Water

Environment Services, approve of a Grant Application to the Oregon Department of

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Emergency Management for Hazard Mitigation Grant Program funding to improve back-up generator capacity and function at the Tri-City Water Resource Recovery Facility.

Respectfully submitted,

Greg Geist Director, WES

Attachment: Grant Lifecycle Form



#### **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 In	nformation - To Be	e Completed by Requeste	e <b>r</b> Award type: Award Renewal?	☐ Direct Appro ☑ Subrecipient ☐ Yes ☑	_
Lead Fund # and Department:	Fund 639 - W		t Services		
				ram	
Name of Funding Opportunity: HMGP-DR-4854-OR Hazard Mitigation Grant Program  Funding Source: ☐ Federal – Direct ☐ Federal – Pass through ☐ State ☐ Local					
Requestor Information: (Name of staff ini	tiating form)	Erin Blue			
Requestor Contact Information:		eblue@clackamas.us	· 971 <b>-</b> 808 <b>-</b> 7533		
Department Fiscal Representative:		Erin Blue	, 311 000 1000		
Program Name & Prior Project #: (please	specify)	Hazard Mitigation Ass	sistance Program		
		Trazara Presgacioni (18	olotalite i rogialii		
Brief Description of Project:					
componets to enable the generator to sup- risk of sanitary sewer overflows during po- name of Funding Agency: Oregon Departi	wer outages, thereby i	ncreasing protection of local wat		ill improve the resi	liency of the TC WRRF and reduce the
			MCD DD 4054 OD NOSO - If		
Notification of Funding Opportunity Web	Address: [Ittps://www	w.oregon.gov/oem/Documents/n	м <b>G</b> F-D <b>R-4</b> 654-OR-NOPO.pui		
OR					
Application Packet Attached: Ye	s 🔽 No				
Completed By:	Date:				
	** NOW R	EADY FOR SUBMISSION TO DEP	ARTMENT FISCAL REPRESENTATI	VE **	
Section II: Funding Opportunity I	nformation - To Be	Completed by Department	Fiscal Rep		
Competitive Application	Non-Competing Applica	tion Other			
Assistance Listing Number (ALN), if applicable	e: N/A		Funding Agency Award Notification D	ate: 10/2	0/2025
Announcement Date:	9/5/2025		Announcement/Opportunity #:	485	4
Grant Category/Title	HMGP-DR-48	354-OR	Funding Amount Requested:		0,000
Allows Indirect/Rate:	Yes / 5%		Match Requirement:	25%	,
Application Deadline:	11/14/2025		Total Project Cost:	\$1,0	000,000
Award Start Date:	1/1/2026		Other Deadlines and Description:		DOG Deadline for OFM to submit a collection of the
Award End Date	1/1/2029		·		D26 - Deadline for OEM to submit applications to FEM/
Completed By:	1/1/2029		Program Income Requirements:	Nor	ne
Pre-Application Meeting Schedule:	Rolling				

Additional funding sources available to fund this program? Please describe:

Yes, WES sewer operating funds are available to fund this program.

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

None.

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

WES would potentially utilize \$250,000 of existing fund reserves to cover one-time installation costs.

### 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

Fiscal
<ol> <li>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.</li> </ol>
Yes, additional revenue sources include WES sewer operating funds from monthly sewer revenue.
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.)?
For the total estimated project cost of \$1 million, the 25% match required is \$250,000. WES will utilize existing cash reserves to meet the match requirement.
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?
Yes, this grant covers management costs of 5%, however WES would not claim indirect costs.
4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?
Yes, this grant would supplement resources to fund WES' existing Plant Operations and Maintenance program. The purpose of the program is to effectively clean wastewater, maintain
equipment and facilities, and recover renewable resources, while meeting or surpassing environmental, safety and public health standards, to protect the vitality of our communities.
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?
Yes, WES has adequate and qualified staff.
2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?
No
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.)?
No
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.)?
This would not create a new program.

Collaboration
1. List County departments that will collaborate on this award, if any.
N/A
Reporting Requirements
1. What are the program reporting requirements for this grant/funding opportunity?
Quarterly progress reports
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?
Performance will be evaluated based on project completion and delivery within the 36-month award period.
3. What are the fiscal reporting requirements for this funding?
Quarterly progress reports, inclusion on the annual SEFA and WES/County ACFRs as required, close-out reporting
Mission/Purpose:
1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?
This funding opportunity increases the reliability of WES' systems used to treat wastewater and protect water quality and public health.
2. Who, if any, are the community partners who might be better suited to perform this work?
N/A
3. What are the objectives of this funding opportunity? How will we meet these objectives?
The objective of Hazard Mitigation Grant Program funds is to reduce or eliminate long-term risk to people and property from future natural hazards. This project will increase resiliency at WES' TC WRRF will reduce the long-term risk to people and property from future power outages resulting from wildfires, inclement weather, and other hazards.
Other information necessary to understand this award, if any.
December Assessed
Program Approval:

10/30/2025

Date

Erin Blue

Name (Typed/Printed)

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

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

Signature

#### Section IV: Approvals

#### DIVISION DIRECTOR (or designee, if applicable)

Department: keep original with your grant file.

Ron Wierenga	Oct 30, 2025	Froll & Wiseyer
Name (Typed/Printed)	Date	Signature
DEPARTMENT DIRECTOR (or designee, if applicable)		
Greg Geist	Oct 30, 2025	Greg Grist
Name (Typed/Printed)	Date	Signature
FINANCE ADMINISTRATION		
Elizabeth Comfort	Nov 3, 2025	Clizabeth Comfort
Name (Typed/Printed)	Date	Signature
EOC COMMAND APPROVAL (WHEN NEEDED FOR D	DISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY	
Name (Typed/Printed)	Date	Signature
(Required for all grant applications. If your grant is awarded, or applications \$150,000 and below:	all grant awards must be approved by the Board on their weekly con	osent agenda regardless of amount per local budget law 294.338.)
COUNTY ADMINISTRATOR	Approved:	Denied:
COUNTY ADMINISTRATOR	Approved:	Denied:
COUNTY ADMINISTRATOR  Name (Typed/Printed)	Approved:	Denied: Signature
Name (Typed/Printed)		Signature
Name (Typed/Printed)	Date	Signature
Name (Typed/Printed)  For applications up to and including \$150 approval.	Date  0,000 email form to BCC staff at <u>CA-Financialt</u>	Signature
Name (Typed/Printed)  For applications up to and including \$150 approval.  For applications \$150,000.01 and above.	Date  0,000 email form to BCC staff at <u>CA-Financialt</u>	Signature team@clackamas.us for Gary Schmidt's
Name (Typed/Printed)  For applications up to and including \$150 approval.  For applications \$150,000.01 and above to be brought to the consent agenda.	Date 0,000 email form to BCC staff at <u>CA-Financialt</u> , email form with Staff Report to the Clerk to	Signature team@clackamas.us for Gary Schmidt's
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# WES - FEMA HMGP TC Generator Lifecycle Process Form (10 30 2025)

Final Audit Report 2025-11-03

Created: 2025-10-30

By: Erin Blue (EBlue@clackamas.us)

Status: Signed

Transaction ID: CBJCHBCAABAAUuzO\_xa6fDPJHwJGbwT\_72ceKGNTN2qW

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