

CHECK LIST FOR ALDERMANIC SUBMISSIONS

<input checked="" type="checkbox"/>	Cover Letter
<input checked="" type="checkbox"/>	Resolutions/ Orders/ Ordinances (NOTE: If you are submitting any item to the State you must write a Resolution)
<input checked="" type="checkbox"/>	Prior Notification Form
<input checked="" type="checkbox"/>	Fiscal Impact Statement - Should include comprehensive budget
<input checked="" type="checkbox"/>	Supporting Documentation (if applicable)
<input checked="" type="checkbox"/>	Disk or E-mailed Cover letter & Order

IN ADDITION [IF A GRANT]:

<input type="checkbox"/>	Notice of Intent
<input type="checkbox"/>	Grant Summary
<input type="checkbox"/>	Executive Summary (not longer than 5 pages without an explanation)

Date Submitted: September 29, 2023

Meeting Submitted For: October 02, 2023

Regular or Suspension Agenda: Regular

Submitted By: Carlos Sosa-Lombardo

Title of Legislation:

AN ORDER OF THE NEW HAVEN BOARD OF ALDERS AUTHORIZING THE CITY OF NEW HAVEN (MAYOR OR CONTROLLER) TO ENTER INTO A TWO-YEAR, SIX MONTHS AGREEMENT WITH CONTINUUM OF CARE, INC. IN THE AMOUNT OF THREE-MILLION FIVE HUNDRED THOUSAND DOLLARS (\$3,500,000) TO IMPLEMENT THE EMERGENCY HOUSING PROGRAM AT 270 FOXON BOULEVARD, NEW HAVEN, CT, AND TO UTILIZE TWO MILLION DOLLARS (\$2,000,000) FROM ARPA FUNDING TO EXECUTE THE CONTRACT.

Comments: Legistar File ID: LM-2023-0530

Coordinator's Signature: _____

Controller's Signature (if grant): _____

Mayor's Office Signature: _____

Call (203) 946-7670 or email bmontalvo@newhavenct.gov with any questions.

PLEASE NOTE CLEARLY IF UC (UNANIMOUS CONSENT) IS REQUESTED