

**Resolution of the Board of Supervisors of the
County of Santa Barbara, State of California**

IN THE MATTER OF APPLYING FOR AN
ACCEPTANCE OF GRANTS FROM THE
STATE OF CALIFORNIA, HOUSING AND
COMMUNITY DEVELOPMENT
DEPARTMENT FOR HOUSING
NAVIGATORS PROGRAM

RESOLUTION NO: _____

WHEREAS, the State of California, Department of Housing and Community Development (“Department”) issued an Allocation Acceptance form, dated February 7, 2020 under the Housing Navigators Program (“HNP” or “Program”) for \$5 million authorized by item 2240-103-0001 of section 2.00 of the Budget Act of 2019, as amended by Section 16 of Chapter 363 of the Statutes of 2019 (SB 109);

WHEREAS, the Allocation Acceptance form relates to the availability of the HNP Allocation funds; and

WHEREAS, the Santa Barbara County Department of Social Services (“Applicant”), was mentioned in the Allocation Acceptance form, dated February 7, 2020.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors of the County of Santa Barbara (“County”) does hereby declares and directs as follows:

SECTION 1. That Applicant is hereby authorized and directed to apply for and accept its HNP Allocation award, as detailed in the Allocation Acceptance form, up to the amount authorized in the Allocation Acceptance form and applicable state law.

SECTION 2. That the Board of Supervisors authorizes the Director of the Department of Social Services, or his designee, to act on behalf of the County in connection with the HNP Allocation award, and to enter into, execute, and deliver any and all documents required or deemed necessary or appropriate to be awarded the HNP Allocation award, and all amendments thereto (collectively, the “HNP Allocation Award Documents”).

SECTION 3. That Applicant shall be subject to the terms and conditions that are specified in the HNP Allocation Award Documents, and that Applicant will use the HNP Allocation award funds in accordance with the Allocation Acceptance form, other applicable rules and laws, the HNP program documents, and any and all HNP

requirements.

PASSED, APPROVED AND ADOPTED on this 2nd day of June, 2020, by the following vote:

AYES _____

NOES _____

ABSTENTIONS _____

ABSENT _____

Chair, Board of Supervisors

ATTEST:
MONA MIYASATO, COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

BY: _____
Deputy Clerk

APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

BY: _____
Deputy County Counsel

APPROVED AS TO FORM:
BETSY M. SCHAFFER, CPA
AUDITOR CONTROLLER

BY: _____
Deputy