RECORDING REQUESTED BY & WHEN RECORDED RETURN TO: County of Santa Barbara General Services Department Real Property Division 1105 Santa Barbara St. 2<sup>nd</sup> Floor Santa Barbara, CA 93101

## COUNTY OF SANTA BARBARA OFFICIAL BUSINESS

No fee pursuant to Gov. Code § 27383

SPACE ABOVE THIS LINE FOR RECORDER'S USE APN 091-040-04-

## NOTICE OF FEDERAL INTEREST

On August 22, 2022, the Department of Health and Human Services, Health Resources and Services Administration ("HRSA"), awarded Grant Award Number 1 CE1HS46915-01-00 (FAIN# CE146915) to the County of Santa Barbara in the amount of Nine Hundred Thousand Dollars (\$900,000.00). The grant provides Federal funds for building construction and the addition of a generator on property owned by the County of Santa Barbara and located at 301 N R Street, CA 93436 in the City of Lompoc, identified as Assessor Parcel Number 091-040-04 and described below:

Suburban block 291 of the subdivision of the Ranchos Lompoc and Mission Vieja in the City of Lompoc, County of Santa Barbara, State of California, according to the map thereof, recorded in Book 1, page 45 of Maps and Surveys, Records of said County. Site address: 301 N R St, Lompoc, CA 93436.

HRSA's Federal interest is subordinate to all pre-existing mortgages or obligations recorded against the property described herein. HRSA's Federal interest is also subordinate to loans and obligations identified in the grant application as sources of financing for this project. Future modifications and new mortgages and obligations will require HRSA's prior approval.

The Notice of Award for this grant includes conditions on use of the aforementioned property and provides for a continuing Federal interest in the property. Specifically, the property may not be (1) used for any purpose inconsistent with the statute and any program regulations governing the award under which the property was acquired; (2) mortgaged or otherwise used as collateral without the written permission of the Associate Administrator, Office of Federal Assistance Management (OFAM), Health Resources and Services Administration (HRSA), or designee; or (3) sold or transferred to another party without the written permission of Associate Administrator, Office of Federal Assistance Management (OFAM), Health Resources and Services and Services Administration (HRSA), or designee. These conditions are in accordance with the statutory provisions set forth in the Consolidated Appropriations Act, 2022, (PL 117-103), Title 45 CFR part 74 or 92 (as appropriate), the Federal Department of Health and Human Services Grants Policy Statement dated January 1, 2007, and other terms and conditions of award.

These grant conditions and requirements cannot be nullified or voided through a transfer of ownership. Therefore, advance notice of any proposed change in usage or ownership must be provided to the Health Resources and Services Administration (HRSA), Office of Federal Assistance Management (OFAM).

This Notice of Federal Interest was prepared on behalf of the County of Santa Barbara and executed on the \_\_\_\_\_ day of \_\_\_\_\_, 2022.

## COUNTY OF SANTA BARBARA

## JOAN HARTMANN, CHAIR BOARD OF SUPERVISORS

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of SANTA BARBARA

On \_\_\_\_\_\_, 2022 before me, Sheila de la Guerra, a Deputy Clerk, personally appeared <u>SUPERVISOR JOAN HARTMANN</u>, <u>CHAIR OF THE BOARD OF</u> <u>SUPERVISORS</u>, who proved to me on the basis of satisfactory evidence to be the person whose names is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Sheila de la Guerra

California Civil Code section 1189