

MEMORANDUM

Date: June 8, 2026
To: Finance and Personnel Committee
From: Owen Carter, Deputy Director of Program Operations for Health & Human Services *o*
Re: Acceptance of DCEO, Weatherization HHS Grant Award 26-221023

Health & Human Services Department/Community Services Division is seeking City Council approval to accept Weatherization HHS grant from Department of Commerce and Economic Opportunity (DCEO) for \$772,748. The grant does NOT require a cost match. The grant term is from June 1, 2026 to September 30, 2027 and the granting agency-assigned award number is 26-221023.

The Grant Purpose

Weatherization will assist eligible clients to conserve fuel and defray rising costs of energy by completing an energy audit of their home and creating a work order. A contractor that has won the bid for this grant will carry out the work order.

How Grant Funds Will Be Used

The funds will pay for approved client's weatherization work order, client's energy usage education, contractor(s), staff training, payroll, and administration. The grant does NOT require the city to bear any additional costs.

RESOLUTION
of the
CITY COUNCIL OF THE CITY OF ROCKFORD, ILLINOIS
SUBMITTED BY: FINANCE AND PERSONNEL COMMITTEE

RESOLUTION APPROVING ACCEPTANCE OF GRANT AWARD

WHEREAS, the City of Rockford has been selected by the Department of Commerce and Economic Opportunity to receive a Weatherization HHS grant award; and

WHEREAS, the grant has been awarded for the purpose of assisting eligible clients to conserve fuel and defray rising energy costs; and

WHEREAS, the City of Rockford intends to use the funds to pay for approved clients' weatherization work orders, energy usage education, contractor services, staff training, payroll, and administration; and

WHEREAS, the City of Rockford will receive \$772,748.00 to provide such services.

BE IT RESOLVED, THEREFORE, by the City Council of the City of Rockford that the City of Rockford accept the grant award and that the Mayor execute a Grant Agreement and any necessary documents in furtherance of acceptance.

BE IT FURTHER RESOLVED that this Resolution shall be in full force and effective immediately upon its adoption.

The above and foregoing Resolution was adopted by the City Council of the City of Rockford, Illinois, this _____ day of June 2026.

Mayor Thomas P. McNamara
City of Rockford, Illinois

ATTEST:

ANGELA HAMMER, Legal Director
Ex Officio Keeper of the Records and
Seal of the City of Rockford, Illinois

ROCKFORD, IL.

Committee Action Taken Date: June 8, 2026

RECOMMENDATION FOR RESOLUTION

TO THE CITY COUNCIL OF THE CITY OF ROCKFORD:

Council Members:

The Committee on Finance & Personnel, to whom was referred the matter of approving acceptance of the Department of Commerce and Economic Opportunity Weatherization HHS award, hereby begs leave to report recommending approval of said award. The Legal Director shall prepare the appropriate resolution.

Kevin Frost (Chair)

Chad Tuneberg (Vice chair)

Frank Beach

Dawn Granath

Jaime Salgado

| | | | |
|-----------|----------|----------|------------|
| Frost: | Ayes:___ | Nays:___ | Absent:___ |
| Tuneberg: | Ayes:___ | Nays:___ | Absent:___ |
| Beach: | Ayes:___ | Nays:___ | Absent:___ |
| Granath: | Ayes:___ | Nays:___ | Absent:___ |
| Salgado: | Ayes:___ | Nays:___ | Absent:___ |

Illinois Grant Accountability and Transparency Notice of State Award

| STATE OF ILLINOIS GRANT INFORMATION | |
|--|---|
| State Award Identification | Name of State Agency (Grantor): Commerce And Econ Opp Department/Organziation Unit: Office of Community Assistance |
| State Award ID Number (SAIN) | 87-66286 |
| State Program Description | The Illinois Home Weatherization Assistance Program (IHWAP) funded through the Department of Energy (DOE), Department of Health and Human Services (HHS), and the State Supplemental Low Income Energy Assistance Fund (SLIHEAP), is implemented through designated grantees to provide services to eligible low income households in Illinois. The client assistance funds available through this grant help eligible households conserve fuel and defray rising costs of energy in accordance with the U.S. DOE Weatherization Assistance Program State Plan. Up to 15% of the HHS LIHEAP Block Grant and 10% of the SLIHEAP funding can be utilized for Weatherization activities. |
| Announcment Type | Initial |
| Agency (Grantor) Contact Information | Name: Ben Moore Phone: 217-558-2874 Email: Ben.Moore@illinois.gov |

| GRANTEE INFORMATION | |
|------------------------------------|---|
| Grantee / Subrecipient Information | Name: City of Rockford Health & Human Services Department Address: 612 N Church Street, Rockford, IL 61103 Phone: Email: |
| Grantee Identification | GATA: 671698 UEI: L8CRGBLX2DA3 FEIN: 366125747 |
| Period of Performance | Start Date: 6/1/2026 End Date: 9/30/2027 |

| FUNDING INFORMATION | | | |
|----------------------------|-------------|--------|--------------|
| FUND | CSFA | CFDA | AMOUNT |
| 870 | 420-70-0087 | 93.568 | \$772,748.00 |
| TOTAL | | | \$772,748.00 |

(M) Currently used by State of Illinois for "Match" or "Maintenance of Effort" (MOE) requirements on Federal Funding. Funding is subject to Federal Requirements and may not be used by Grantee for other match requirements on other awards.

Illinois Grant Accountability and Transparency Notice of State Award

| TERMS AND CONDITIONS | |
|--|---|
| Grantee Indirect Cost Rate Information | Rate: 0.00% Base: N/A Period: 6/1/2026-9/30/2027 |
| Research & Development | No |
| Cost Sharing or Matching Requirements | No |
| Uniform Term(s) | CODE of FEDERAL REGULATIONS Title 2: Grants and Agreements PART 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200) Grant Accountability and Transparency Act (GATA), 30 ILCS 708/1 Illinois Administrative Code |
| Grantor-Specific Term(s) | This Notice of State Award (NOSA) is not an agreement. This NOSA is not a guarantee of an agreement. Grantor-Specific Terms that will be included in the final grant agreement can be found by clicking on "Uniform Grant Agreement Template" under the Grant Agreement Overview section at: https://dceo.illinois.gov/aboutdceo/grantopportunities/learning-library.html |
| Program-Specific Term(s) | Information about the Weatherization Specific Terms and requirements can be found in the Energy Assistance Act (305 ILCS 20), the Illinois Administrative Rules (47 Ill Adm. Code 100), the Weatherization Assistance Program for Low-Income Persons (42 USCA § 6861 et seq.) and the corresponding Department of Energy federal regulations (10 CFR 440). |

**Illinois Grant Accountability and Transparency
Notice of State Award****SPECIFIC CONDITIONS ASSIGNED TO GRANTEE - FISCAL AND ADMINISTRATIVE****The nature of the additional requirements****GATA Conditions:**

None

Agency Adjustments / Explanation:

NO FISCAL AND ADMINISTRATIVE CONDITIONS.

The reason why the additional requirements are being imposed**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The nature of the action needed to remove the additional requirement, if applicable**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The time allowed for completing the actions, if applicable**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The method for requesting reconsideration of the additional requirements imposed**GATA Conditions:**

None

Agency Explanation:

None

Illinois Grant Accountability and Transparency Notice of State Award

SPECIFIC CONDITIONS ASSIGNED TO GRANTEE - PROGRAMMATIC

The nature of the additional requirements

Agency Adjustments / Explanation:
NO PROGRAMMATIC CONDITIONS.

The reason why the additional requirements are being imposed

Agency Adjustments / Explanation:

The nature of the action needed to remove the additional requirement, if applicable

Agency Adjustments / Explanation:

The time allowed for completing the actions, if applicable

Agency Adjustments / Explanation:

The method for requesting reconsideration of the additional requirements imposed

Agency Explanation:

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SIGNATURE PAGE

Circle one: Accept NOSA / Reject NOSA

Institution / Organization

Signature

Name of Official

Title (Chief Financial Officer or equivalent)

Date of Execution