

CITY OF MENIFEE
GRANT SUMMARY REPORT
FINANCE DEPARTMENT

FISCAL YEAR OF GRANT AWARD: 2024/2025 **DATE CITY COUNCIL APPROVED:** 11/6/24
Grant Name: Permanent Local Housing Allocation Program (PLHA) **Granting Agency:** CA Dept of Housing and Community Development (HCD)
City Department: Community Development **City Grant Administrator:** Edna Lebron
Grant performance period: 6/30/25-4/30/27 **Type of Grant:** ☒ State ☐ Federal ☐ Local ☐ Other: _____

Grant Purpose/City Program:

Provides funding for housing-related projects and programs that assist in addressing the unmet housing needs in the City of Meniffee.

If Federal Grant:

Federal Awarding Agency: - **Federal CFDA Number:** -

If Pass-through Grant:

Pass-through Agency: - **Pass-through Number:** -

Grant ID Number: -

Grant Funding Period: 6/30/25-4/30/27

Amended Through: -

Amount from Granting Agency: \$646,059

Method of Funding: Reimbursement

City Matching Funds: _____

Frequency of Funding: -

Total Grant Amount: \$646,059

If other, please describe: N/A

City Expenditure Account No: 2301-52-CDD-CDBG-000-00000-652843

City Revenue Account No: 2301-28-XNC-XNCL-000-00000-441002

Reporting Requirements:

Annual Reports are required from all grantees each year by July 31 for the term of the Standard Agreement.

Does the funding agency require a compliance audit? No

If yes, what kind of report? N/A

Additional reporting required: N/A

Does the funding agency require a copy of the Single Audit report? No

Is this a federal grant (subject to Single Audit)? No

Can grant funds be carried over to other fiscal years? Yes

If yes, which years? FY25/26 & FY26/27

Is allocated interest a grant requirement? No