



Recipient Information

1. **Recipient Name**
FAMILY CENTERS INC
40 Arch St
Greenwich, CT 06830-6525
2. **Congressional District of Recipient**
04
3. **Payment System Identifier (ID)**
1060646656A1
4. **Employer Identification Number (EIN)**
060646656
5. **Data Universal Numbering System (DUNS)**
614387322
6. **Recipient's Unique Entity Identifier**
E1NNX2TP8QD1
7. **Project Director or Principal Investigator**
Dennis Torres
Chief Health Officer
dtorres@familycenters.org
(203)977-5108
8. **Authorized Official**

Federal Agency Information

9. **Awarding Agency Contact Information**
India Blankenship
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
IBlankenship@hrsa.gov
(301) 443-0687
10. **Program Official Contact Information**
Ilene J Lish
PO Civil Engineer
Bureau of Primary Health Care (BPHC)
ilish@hrsa.gov
(301) 443-3164

Federal Award Information

11. **Award Number**
1 CE2CS52803-01-00
12. **Unique Federal Award Identification Number (FAIN)**
CE252803
13. **Statutory Authority**
Consolidated Appropriations Act, 2022, (PL 117-103)
14. **Federal Award Project Title**
Congressionally Directed Spending for Construction Projects
15. **Assistance Listing Number**
93.493
16. **Assistance Listing Program Title**
Congressional Directives
17. **Award Action Type**
New
18. **Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2023 - End Date 09/29/2026	
20. Total Amount of Federal Funds Obligated by this Action	\$1,000,000.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$1,000,000.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$1,000,000.00
26. Project Period Start Date 09/30/2023 - End Date 09/29/2026	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$1,000,000.00

28. **Authorized Treatment of Program Income**
Addition
29. **Grants Management Officer – Signature**
Christie Walker on 09/21/2023

30. Remarks



Notice of Award
Award Number: 1 CE2CS52803-01-00
Federal Award Date: 09/21/2023

Bureau of Primary Health Care (BPHC)

31. APPROVED BUDGET: (Excludes Direct Assistance)

Grant Funds Only
 Total project costs including grant funds and all other financial participation

a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$1,000,000.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
l. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$1,000,000.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
q. TOTAL APPROVED BUDGET:	\$1,000,000.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$1,000,000.00

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	\$1,000,000.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$1,000,000.00

33. RECOMMENDED FUTURE SUPPORT:
(Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
	Not applicable

34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)

a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Award(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

35. FORMER GRANT NUMBER

36. OBJECT CLASS
41.60

37. BHCNIS#

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
23 - 370CONS	93.493	23CE2CS52803	\$1,000,000.00	\$0.00	N/A	23CE2CS52803

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Condition(s)

1. Due Date: Within 120 Days of Budget Start Date

The award recipient must consult with the HRSA Project Officer and environmental reviewer to determine if other environmental compliance reviews are required for the proposed project. Additional information will be provided within 120 days of the Project Period Start Date to identify the extent of the information that will be needed for this specific project. This information may include an Environmental Assessment (EA) under NEPA, consultation under Section 106 of the National Historic Preservation Act with the State Historic Preservation Officer (SHPO) / Tribal Historic Preservation Officer (THPO) (and any other consulting parties if identified), a hazardous materials survey, Coastal Zone Consistency Determination, Floodplain Management, Environmental Justice, etc. The documentation must be completed and submitted to HRSA for review and approval. This condition must be approved and lifted from the Notice of Award prior to initiating any physical site preparation, demolition, alteration and renovation, or construction related to the project. Funds may only be drawn down for pre-construction activities, such as the purchase of moveable equipment, completion of architectural and engineering plans, licensing and permitting requirements, State Historic Preservation Office/Tribal Historic Preservation Office consultation, and preparation of the EA or related testing and surveys.

2. Due Date: Within 60 Days of Budget Start Date

Property Documentation is Required. Within 60 days of Project Period Start Date, the award recipient must submit documentation (deeds, titles, local land records, etc.) describing ownership of the property.

3. Due Date: Within 60 Days of Budget Start Date

Within 60 days of the Project Period Start Date, the award recipient must submit schematic drawings including floor plan(s) and, if applicable to the project, a site plan that provide clear and complete information on the project into HRSA's Electronic Handbook to support the requested funding amount for this project. Floor plans/site plans must be drawn to scale including proposed exam rooms, waiting area, etc. Documents must include rough dimensions for major project components. Drawings should clearly identify the project components that are being proposed, as well as distinguishing improved space from unaffected space. Contact the assigned Project Officer for additional information.

Existing Plan

- Identify what's to be demolished such as walls/doors.
- Add dimensions and existing room names.

Proposed Plan

- Identify new walls and doors.
- Add dimensions and room names.

Program Specific Condition(s)

1. Due Date: Within 60 Days of Budget Start Date

Within 60 days of Project Period Start Date, the award recipient must submit into HRSA's Electronic Handbook a revised SF-424C budget page, revised budget justification and revised equipment list, in accordance with the application guidance.

Grant Specific Term(s)

1. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this

award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.

2. This Notice of Award (NoA) is issued to inform your organization of the awarding of Community Project Funding/Congressionally Directed Spending (CPF/CDS): Construction Projects (HRSA-23-117) funding. This funding is authorized by the FY 2023 Consolidated Appropriations Act (P.L. 117-328) for projects that relate to the construction and renovation (including equipment) of health care and other facilities. This award cannot be transferred to another entity.
3. As required by the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, recipients must report information for each subaward of \$30,000 or more in Federal funds and executive total compensation, as outlined in Appendix A to 2 CFR Part 170. You are required to submit this information to the FFATA Subaward Reporting System (FSRS) at <https://www.fsrs.gov/> by the end of the month following the month in which you awarded any subaward. The FFATA reporting requirements apply for the duration of the project period and so include all subsequent award actions to aforementioned HRSA grants and cooperative agreement awards (e.g., Type 2 (competing continuation), Type 5 (non-competing continuation), etc.). Subawards to individuals are exempt from these requirements. For more information, visit: <https://www.hrsa.gov/grants/ffata.html>.
4. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under “Expanded Authority,” as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See “Prior-Approval Requirements” in the DHHS Grants Policy Statement: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>.
5. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**
You may use your existing PMS username and password to check your organizations’ account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: <https://pmsapp.psc.gov/pms/app/userrequest>. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:
<http://pms.psc.gov/find-pms-liaison-accountant.html>
6. For awards with program- or grant-specific conditions, funds are restricted and may not be drawn down until all conditions have been met and lifted from the Notice of Award. The only exceptions to this restriction on drawdown are limited to pre-construction activities related to meeting one of these conditions, such as expenses for completing architectural and engineering plans, meeting licensing and permitting requirements, historic preservation consultation with the State Historic Preservation Office/Tribal Historic Preservation Office, and/or preparing the Environmental Assessment.
7. *For awards with program- or grant-specific conditions, funds are restricted and may not be drawn down until all conditions have been met and lifted from the Notice of Award. The only exceptions to this restriction on drawdown are limited to pre-construction activities related to meeting one of these conditions, such as expenses for completing architectural and engineering plans, meeting licensing and permitting requirements, historic preservation consultation with the State Historic Preservation Office/Tribal Historic Preservation Office, and/or preparing the Environmental Assessment.*

Program Specific Term(s)

1. On September 15, 2010, the United States Department of Justice published revised Americans with Disabilities Act (ADA) regulations in the Federal Register that update and amend some of the provisions in the original 1991 ADA regulations (see <http://www.ada.gov/>). These changes include revised accessibility standards, called the 2010 Standards for Accessible Design (2010 Standards), which establish minimum criteria for accessibility in design and construction (http://www.ada.gov/2010ADAstandards_index.htm).
2. The award recipient must submit an annual Federal Financial Report with expense date for each consecutive twelve (12) month budget period. This report is submitted through the Payment Management System (PMS).
3. This Notice of Award (NoA) is issued to inform your organization of the awarding of Community Project Funding/Congressionally Directed Spending (CPF/CDS): Construction Projects (HRSA-23-117) funding. This funding is authorized by the FY 2023 Consolidated Appropriations Act (P.L. 117-328) for projects that relate to the construction and renovation (including equipment) of health care and other facilities. This award cannot be transferred to another entity.
4. Each budget has a Federal Percentage Share based upon the award amount and the total allowable costs. Grant funds can only be drawn down from the Payment Management System (PMS) as allowable costs are incurred. Unless otherwise authorized, draw down should be done in the same proportion as the grant is to total project costs in the approved budget. For example, for a project with a total allowable cost of \$100,000, and a federal contribution of \$75,000, the federal share is 75 percent. If \$100 in allowable costs are incurred, then \$75 of grant funds would be drawn down from PMS to pay this incurred cost, while the other \$25 will be paid by other sources of funds. The draw

down percentage may be re-evaluated based on any modifications to the project that have been received from the grantee and approved by HRSA.

5. Equipment includes all moveable equipment that has a useful life of more than one year and a per-unit acquisition cost of \$5,000 or more, including information technology systems. Moveable equipment can be readily shifted from place to place without requiring a change in the utilities or structural characteristics of the space. Any equipment purchased with your CDS award must be procured, maintained, tracked, and disposed of in accordance with 45 CFR part 75.
6. Applicants that are NOT required to file a Notice of Federal Interest, still acknowledge with the receipt of the Notice of Award that the Federal interest exists in real property and equipment and will be maintained in accordance with 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR AWARDS AND SUBAWARDS TO INSTITUTIONS OF HIGHER EDUCATION, HOSPITALS, OTHER NONPROFIT ORGANIZATIONS, or 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS, as applicable. The recipient shall maintain adequate documentation to track and protect the Federal Interest. For real property, adequate documentation will also include communications between the lessor and the lessee related to protecting such interest, in accordance with the standard award terms and conditions. Such documentation should be available for subsequent review by HRSA.
7. The preferred method for accomplishing construction development is by soliciting for competitive bids and then selecting the lowest responsive and responsible bid (where the contractor has adequately responded to the terms, conditions, and specification of the bid and has the capability to satisfactorily perform the contract). However, some award recipients may wish to accomplish construction using their own work force (force account). The award recipient must justify the use of force account by demonstrating that it would be more cost effective and that qualified personnel are available to accomplish the work. Consultation with the Project Officer is needed to determine if force account labor will be permitted.
8. If a Notice of Federal Interest (NFI) is required, HRSA's Federal interest is subordinate to all pre-existing mortgages or obligations recorded against the property. HRSA's Federal interest is also subordinate to loans and obligations identified in the application as sources of financing for the project. Future modifications and new mortgages and obligations will require prior approval.
9. You will need to submit a pre-award prior approval request to HRSA for review of any costs incurred up to 90 day prior to the Consolidated Appropriations Act, 2023 (P.L. 117-328; enacted December 29, 2022). Please refer to HRSA-23-117 for further guidance.
10. The award recipient does not have expanded authority under this program. Items that require prior approval from the awarding office as indicated in 45 CFR Part 75. HRSA has not waived cost-related or administrative prior approvals for recipients unless specifically stated on this Notice of Award] or 45 CFR Part 75, or the HHS Grants Policy Statement Prior-Approval Requirements, must be submitted in through the Electronic Handbook. Only responses to prior approval requests signed by the GMO and authorized under a Notice of Award are considered valid. award recipients who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the HRSA.
HRSA requires award recipients to seek prior approval through the Electronic Handbook for: (a) all pre-award costs, (b) rebudgeting of funds between construction and nonconstruction work; (c) rebudgeting of project costs exceeding 25 percent of the total approved budget (inclusive of direct and indirect costs and Federal funds and required matching or cost sharing) for that budget period; (d) changes in project scope, which occurs when the recipient proposes to change (or changes) the objectives, aims, or purposes identified in the approved application, including changing location, changing the approved design under a construction grant, eliminating a primary care delivery site, or making budget changes that cause a project to change substantially from that which was approved. Approval of a prior approval request may be conditioned by new terms and conditions that must be met and lifted from the Notice of Award prior to implementing work.
11. An award recipient may acquire a variety of commercially available goods or services in connection with a grant-supported project or program. Award recipients may use their own procurement procedures that reflect applicable state and local laws and regulations, as long as those procedures conform to the following applicable U.S. Department of Health and Human Services (HHS) regulations: HHS regulations at 45 Code of Federal Regulations (CFR) 75 UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS. States must follow the requirements at Title 45 CFR 75. Generally, States must follow the same policies and procedures they use for procurements from non-Federal funds. Local and Tribal governments must follow the requirements at 45 CFR 75.
12. All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under the addition/additive alternative. Additional requirements found at 45 CFR § 75.307.
13. Although this NoA approves funds for the project(s) identified in the submitted application, HRSA may take action to withdraw the approval and funds for the project(s) if subsequent events lead HRSA to conclude that a project as originally proposed is ineligible or cannot be completed. Subsequent events could include, but are not limited to, non-compliance with the implementation of the project (such as excessive drawdown, improper procurement, conflicts of interests, etc.), significant changes to the location or physical scope of the project without prior approval, or the identification of previously undocumented environmental or historic preservation issues that lead the HRSA to

conclude that the proposed project cannot be carried out consistent with the eligibility and program requirements. If this occurs, please contact the assigned Project Officer to discuss.

Standard Term(s)

1. Your organization is required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding, per HRSA [Standard Terms](#) (unless otherwise specified on your Notice of Award), and [Legislative Mandates](#). The effectiveness of these policies, procedures, and controls is subject to audit.

Reporting Requirement(s)

1. **Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.**
The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. **All FFRs must be submitted through the Payment Management System (PMS).** Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal ([PMS Self-Service Web Portal](#)), or calling 877-614-5533.
2. **Due Date: Within 90 Days of Project End Date**
Within 90 days of project completion, the award recipient must submit into HRSA's Electronic Handbook a final SF-424C budget page, budget justification, and equipment list (if applicable), for the completed project.
3. **Due Date: Within 90 Days of Project End Date**
Within 90 days of project completion, the award recipient must scan and upload photographs, with brief descriptions, of the project prior to initiating work, during renovation/construction, and of the completed project, including exterior shots (front, rear of building), major rooms and examples of grant provided major equipment items, into the EHB for the approved project.
4. **Due Date: Within 90 Days of Project End Date**
Within 90 days of project completion, the award recipient will submit documentation for the approved project certifying that the project have been completed in accordance with the previously provided certified documents and in accordance with all mandatory requirements imposed on +D3 federally-assisted projects by specific laws enacted by Congress, Presidential Executive Orders, or Departmental Policy, as well as all applicable program standards, State codes, and local codes and ordinances.
5. **Due Date: Semi-Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 30 days after end of reporting period.**
The award recipient will submit a semi-annual Progress Report for the approved project(s) into the HRSA Electronic Handbook (EHB) approximately every six months until the project is completed.
6. **Due Date: Within 90 Days of Project End Date**
The award recipient must submit within 90 days after the project end date the SF-428 (Tangible Personal Property Report) with the SF-428B (Final Report Attachment) and if applicable the SF-428S (Supplemental Sheet). These documents must be completed using the Electronic Handbooks (EHBs). The award recipient is required to report federally-owned property, acquired equipment with an acquisition cost of \$5,000 or more for which HRSA has reserved the right to transfer title, and residual unused supplies with total aggregate fair market value exceeding \$5,000. Records for equipment acquired with Federal funds shall be retained for three years after final disposal.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

NoA Email Address(es):

Name	Role	Email
Dennis Torres	Program Director	dtorres@familycenters.org

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

<p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p> <p>HEALTH RESOURCES AND SERVICES ADMINISTRATION</p> <p>ENVIRONMENTAL INFORMATION AND DOCUMENTATION (EID)</p>	FOR HRSA USE ONLY			
	Award Recipient Name	Family Centers Inc.		
	Award Number	N/A	Application Tracking #	215042
	Project #	Grant 13838577	Project Type	Alteration/Renovation
	Project Title	Turn of River MS SBHC		

This Environmental Information and Documentation (EID) checklist consists of information that the agency is required to obtain to comply with the National Environmental Policy Act of 1969 (NEPA). NEPA establishes the Federal government's national policy for protection of the environment. HRSA has developed the EID for applicants of funding that would potentially impact the environment and to ensure that their decision-making processes are consistent with NEPA. Applicants must provide information and requested on the EID checklist so that HRSA may ensure compliance with NEPA.

HRSA will provide applicants with the results of the agency's environmental review through the NGA. If HRSA determines that additional environmental compliance is necessary, HRSA will notify applicable grantees of specific requirements.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0915-0324 and is valid until xx/xx/202x. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857.

Grantee Authorized Official: Dennis Torres, JD, LCSW
Phone: 203-977-5108
Email: dtorres@familycenters.org

Grantee EID Preparer: Dennis Torres, JD, LCSW
Phone: 203-977-5108
Email: dtorres@familycenters.org
Address: 888 Washington Blvd, 8th floor, Stamford CT 06901

Project Location/Address (Please note - separate EID forms are required for each project location)
 Please provide the address where the action will occur (e.g. where equipment will be located or where renovations/new construction will occur)

117 Vine Rd, Stamford CT 06905

Scope of work**Describe all actions that are part of the proposed action (Please include a description of the entire project, including elements that will use non-federal funding)**

This proposal is a request for funding for the renovation and alteration to an unused former locker room at Turn of River Middle School. Located at 117 Vine Rd, in Stamford, CT.

Turn of River Middle School is solid three-level brick building, built in a square surrounding an open courtyard, with an additional wing added several years ago. The proposed alterations and renovations are limited to the former Girls Locker Room, on the ground level of the school. It is currently a large open space that will be transformed into a health center with room for integrated primary medical care, mental health services, and health education and outreach, as well as group educational/meeting space. Proposed renovations and alterations are as follows:

- As noted in the proposed Turn of River floor plan, the approximately 1,285 available square feet will be divided into 11 distinct spaces.
- Major clinical spaces include two medical exam rooms, one with desk, at 155 total sq. ft., two mental health counseling/consultation rooms (70 sq. ft each) and, one and group meeting space (171 sq. ft)
- Nonclinical space includes one reception area with storage, two bathrooms, and one storage closet.
- As an open room there would be minimal demolition, however the project will require plumbing and electrical work, safely dismantling and reconnecting fire sprinkler system, and adding a drop ceiling.
- There will be work done to assure sound proofing room divisions.
- The room will require climate control and the reconfiguration of HVAC duct work.
- Lighting, electrical switches, electric upgrades and electrical outlets will need to be reconfigured or added to accommodate lighting and equipment needs.
- Permanently affixed equipment is limited to locking cabinetry and counter space in the medical exam rooms.
- Plumbing work is more reconfiguring as there is already existing bathrooms and sinks in the space that will accommodate the proposed changes to the layout.

Site Description - required for all building renovations (e.g. interior renovations, new windows, roofs, etc.) and new construction (including building additions, temporary facilities, and trailers)

Site acreage: 28.54 acres

Land use on site: 902c Exempt Commercial (school)

Land use surrounding site (current use, zoning and proposed changes if applicable): Residential

Buildings currently on site (stories, height, age, total sq. footage): There is one building, two stories high (ground floor, first floor (main) and upper floor). The building was built in 1963 and has 128,000 total square footage.

Vegetation on site (e.g. grasses, shrub, heavily wooded, none because it's paved, etc.): Grasses, shrubs, some trees, sporting fields (baseball and soccer), and pavement.

Streams/wetlands on site or adjacent to the site: No

Proposed ground disturbance (sq. footage): None

A. Scope of Proposed Action

This set of questions is concerned with size and scope of the proposed action

A.1. Will the action involve the purchase, construction or lease of new facilities (including temporary facilities and trailers), or substantially increase the capacity of an existing health care facility?

Yes No

A.2. Is the action significantly greater in scope than other development taking place in the area, or will it have significant unusual characteristics?

Yes No

B. Potential for Public Controversy

This set of questions is concerned with whether or not the proposed action has or could generate public controversy.

B.1. Are there any public concerns or controversy with respect to effects of the action on environmental or cultural resources based on reasonable and substantial issues?

Yes No

B.2. Have comments on the action's impacts to environmental or cultural resources been received from the public or from local, State, or Federal agencies?

Yes No

C. Degradation of Environmental Conditions

This set of questions concerns the potential for actions to degrade, even slightly, already existing poor environmental conditions.

C.1. Will the action increase identifiable ambient air pollution levels from a new emission source or from existing sources (e.g., lab fume hoods, HVAC systems, etc.)?

Yes No

C.2. Will the action increase identifiable ambient air pollution levels through a major increase in the number of or use of automobiles, trucks (e.g., will there be a large number of new employees or patients traveling to the site, or a large number of deliveries to the site?)

Yes No

C.3. Will the action exceed city or State health or Federal air quality standards with exhausts from fume hoods

Yes No

C.4. Will the action cause or increase soil erosion?

Yes No

C.5. Will the action discharge stormwater or pollutants into a stream, river, lake, etc.?

Yes No

C.6. Will the action overload existing waste treatment plants due to new loads (water volume, chemicals, toxicity, etc.)?

Yes No

C.7. Will the action allow seepage of contaminants into the water table?

Yes No

D. New or Unproven Technology

This set of questions is concerned with the deployment of new or unproven technology with the potential adverse effects or actions involving unique or unknown environmental risks

D.1. Will the action involve the purchase or use of new or unproven technology?

Yes No

D.2. Will the action involve the purchase or use of technology for which the environmental impacts are unknown?

Yes No

E. Presence of cultural, archaeological, historical or other protected resources

This set of questions is concerned with potential impacts to cultural resources including, but not limited to, buildings; archaeological sites; National Historic Landmarks; objects of significance to a Native

American Tribe including graves, funerary objects, and traditional cultural properties; or other protected resources. HRSA will provide applicants with the results of the agency's historic preservation assessment through the Notice of Grant Award (NGA). If HRSA determines that additional review by the State Historic Preservation Office (SHPO) is necessary, HRSA will instruct applicable grantees on how to initiate consultation with the SHPO.

E.1. Will the action involve the purchase, construction, alteration, renovation, or lease of real property or portion of real property?

Yes No

If yes, when was the building constructed?

1963

E.2. Will the proposed action occur in or near a building listed on or eligible for listing on the National Register of Historic Places?

Yes No

E.3. Will the proposed action adversely affect properties listed on or eligible for listing on the National Register of Historic Places?

Yes No

E.4. Will the action encroach upon, change views to, or change noise levels around any historical, architectural, or archeological cultural property?

Yes No

F. Protected Species

This set of questions is concerned with protected plant and animals, including endangered or threatened species or their critical habitat.

F.1. Will the action be likely to adversely affect a plant or animal species listed on the Federal or applicable State list of endangered or threatened species or a specific critical habitat of an endangered or threatened species?

For assistance, contact the appropriate State Fish and Wildlife Agency or the regional office of the U.S. Fish and Wildlife Service.

Yes No

F.2. Will the action adversely affect nesting Bald Eagles or migratory birds?

Yes No

G. Special Status Areas and Critical Resources

These questions are concerned with actions with the potential to adversely affect special status areas or other critical resources such as wetlands, floodplains, coastal zones, wildlife refuge and wilderness areas, wild and scenic rivers, or sole or principal drinking water aquifers.

G.1. Are there wetlands or waters of the U.S. on or adjacent to the site?

Yes No

G.2. Will the action include discharge to or the filling or dredging of wetlands?

Yes No

G.3. Will the action require a section 404 (Clean Water Act) permit for actions in a wetland and/or section 10 (Rivers and Harbors Act) permit for actions in a stream or river? (Activities in or near a wetland or river may require a permit from the U.S. Army Corps of Engineers or U.S. Coast Guard. Includes: construction in or near any wet or dry waterway, stream crossings, intake structures, outfalls, etc.)

Yes No

G.4. Is the project site located in either a 100-year or a 500-year floodplain?

Yes No

Regardless of whether the project is in a known floodplain, please attach a Flood Insurance Rate Map to this document. **Clearly mark** the location of the facility, and the NFIP Panel Number. FIRMettes can be generated electronically at no cost at <http://www.msc.fema.gov>. The FIRMette module is located in the upper left hand corner, while the tutorial is at the lower right hand corner of the webpage. (If Flood Insurance Rate Maps do not exist for the project site, a floodplain survey or consultation may be required.)

FIRMette attached.

G.5. Will the proposed action include new construction or new site features (e.g., new buildings, additions, fences, parking lots, signage, etc.) in the floodplain?

Yes No

G.6. Will the proposed action adversely impact flood flows in a floodplain or support development in a floodplain?
 Yes No

G.7. Will the proposed action include alter floodplain levels?
 Yes No

G.8. Will the proposed action discharge stormwater to the floodplain?
 Yes No

G.9. Is the project located in a state that borders the Atlantic Ocean, Pacific Ocean, Great Lake, Chesapeake Bay, or Gulf of Mexico?
 Yes No N/A

If yes, is your project located in the state's coastal zone?

Yes No N/A

If yes, you may be asked in your NGA to contact your state coastal zone agency for a Section 307 Federal Coastal Zone Consistency Determination.

G.10. Will the action adversely affect a specifically designated Wildlife Refuge or Wilderness Area? For assistance contact your State Fish and Wildlife Agency or the regional office of the U.S. Fish and Wildlife Service, .Bureau of Land Management, U.S. Forest Service, or National Park Service.
 Yes No

G.11. Will the action adversely affect a wild, scenic, or recreational river area or create conditions inconsistent with the character of the river? (A consideration for activities that are in or near any wild and scenic waterway including construction of stream/river crossings, intake structures, outfalls, etc.)
 Yes No

G.12. Will the action adversely impact an EPA designated sole source aquifer? (Designation of sole source aquifer puts restrictions and conditions on Federal expenditures, projects, and grants.)
 Yes No

H. Pollutants

This set of questions is concerned with the presence of hazardous, toxic, or petroleum substances at levels which exceed Federal, state, or local regulations or standards requiring action or attention.

H.1. Will the action include renovation of an existing building or ground disturbing activities?
 Yes No

If yes, has a Phase I Environmental Site Assessment been prepared for the property within the last 3 years?

H.2. Will the action take place on a site where past land uses may have led to contamination of soil, surface water, or groundwater?

Yes No

I. Health and Safety

This set of questions is concerned with the potential for adverse impacts to human health and safety from the proposed action.

I.1. Will the action introduce major new sources of unshielded radiation?

Yes No

I.2. Will the action require storage of waste pending technology for safe disposal?

Yes No

I.3. Will the action adversely affect access to transportation, health, education, and/or welfare service?

Yes No

I.4. Will the action result in changes in genetic engineering directed at the human population?

Yes No

I.5. Will the action cause a new, large volume of production of non-recycled items?

Yes No

I.6. Could the action disrupt existing health services' response in case of a disaster?

Yes No

I.7. Will the action decrease accessibility to routine health services by altering point-of-service delivery?

Yes No

I.8. Will the action increase by more than 5% the patient load of the area's routine care services?

Yes No

If yes explain: While the proposed clinic will increase patient load by 20%, this service is for students already on-site (in school). These are not additional patients coming on-site.

J. Environmental Justice (Executive Order 12898)

This set of questions is concerned with consistency with Executive Order 12898, Environmental Justice in Minority Populations and Low-Income Populations

J.1. Are there low-income or minority populations in the vicinity of the proposed action?

Yes No

If yes explain: Cloonan Middle School has in its enrollment 29% Hispanic, 18% Black and 6% Asian/Pacific Islander. Additionally, the school documents that nearly 40% of its families qualify for the free or reduced school lunch program (up to 180% above the federal poverty level) reflecting a high incidence of low income families.

J.2. Will the action have disproportionately high and adverse human health or environmental effects on minority populations and low-income populations?

Yes No

J.3. Will the proposed action displace or relocate low-income or minority populations?

Yes No

K. Other Federal, State, Local, or Tribal Laws

This set of questions is concerned with consistency with other federal, state, local or tribal laws or requirement imposed for the protection of the environment.

K.1. Will the action convert significant agricultural lands to non-agricultural uses or impact Prime Farmland Soils or Solis of Statewide Importance?

Yes No

K.2. Will the action change traditional use of the land parcel (by rezoning, etc.)?

Yes No

If yes, has zoning change been requested and/or received? Explain

If yes, complete the following:

Present Zoning: _____

Present Use of Site: _____

Proposed Zoning: _____

K.3. Will the action have significant adverse direct or indirect effects on park land, other public lands, or areas of recognized scenic or recreational value? (For example, consider how the activity will affect the view?)

Yes No

K.4. Will the action block access to known mineral deposits? (Sand, gravel, clay, stone, or other common building materials are not considered mineral deposits.)

Yes No

L. Cumulative Impacts

Potential for significant cumulative impact when the proposed action is combined with other past, present and reasonably foreseeable future actions, even though the impacts of the proposed action may not be significant by themselves.

L.1. Has the area around the project undergone major changes in land use/development?

Yes No

L.2. Are major changes in land use/development planned for the area around the project?

Yes No

L.3. Will the action alter the use of other land by related development of stores, roads, or site changes?
 Yes No

M. Mitigative Measures

Please discuss any mitigative measures undertaken to minimize any environmental impacts. For example, utilizing the EPA's Energy Performance Environmental Assessment Tool (EPEAT) or EnergyStar guidance as part of IT selection and purchase criteria, using EPA's Environmentally Preferred Purchasing Guidance for 'green' products and services, or incorporating Sustainable Design or Leadership in Energy and Environmental Design (LEED) standards into alteration/renovation or new construction project.

Describe mitigative measures that will be incorporated into the action:

Included in the procurement process will be inquiries into how a construction company will manage the stream of waste generated from the project. Firms will be asked to explain their policy on waste reduction, reuse, recycling and minimizing landfill material.

ENVIRONMENTAL INFORMATION AND DOCUMENTATION CERTIFICATION

I certify that to the best of my knowledge and ability the information presented herein is true and correct (enter appropriate information in the shaded blanks):

Signature (Type Full Name):

Dennis Torres



(Grantee or responsible, knowledgeable person who completed this document)

Title or Position:
Chief Health Officer

Phone Number:
203-977-5108

Date:
5/20/2023

Signature (Type Full Name):

Dennis Torres



(Grantee Authorized Representative)

Title or Position:
Chief Health Officer

Phone Number:
203-977-5108

Date:
5/20/2023

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0915-0324. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

National Flood Hazard Layer FIRMette

73°32'54"W 41°06'16"N



Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS



Without Base Flood Elevation (BFE)
Zone A, V, A99
With BFE or Depth *Zone AE, AO, AH, VE, AR*
Regulatory Floodway

0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile *Zone X*
Future Conditions 1% Annual Chance Flood Hazard *Zone X*
Area with Reduced Flood Risk due to Levee. See Notes. *Zone X*
Area with Flood Risk due to Levee *Zone D*

OTHER AREAS OF FLOOD HAZARD

NO SCREEN *Zone X*
Effective LOMRs *Zone D*
Area of Undetermined Flood Hazard *Zone D*

OTHER AREAS

GENERAL STRUCTURES
Channel, Culvert, or Storm Sewer
Levee, Dike, or Floodwall

Cross Sections with 1% Annual Chance Water Surface Elevation
Coastal Transect
Base Flood Elevation Line (BFE)
Limit of Study
Jurisdiction Boundary

OTHER FEATURES
Coastal Transect Baseline
Profile Baseline
Hydrographic Feature

Digital Data Available
No Digital Data Available
Unmapped

MAP PANELS



The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/26/2023 at 2:26 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



0 250 500 1,000 1,500 2,000 Feet 1:6,000
Basemap: USGS National Map; Orthoimagery: Data refreshed October, 2020

<p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p> <p>HEALTH RESOURCES AND SERVICES ADMINISTRATION</p> <p>ENVIRONMENTAL INFORMATION AND DOCUMENTATION (EID)</p>	FOR HRSA USE ONLY			
	Award Recipient Name	Family Centers Inc.		
	Award Number	N/A	Application Tracking #	215042
	Project #	Grant 13838577	Project Type	Alteration/Renovation
	Project Title	Stamford High School SBHC Upgrade		

This Environmental Information and Documentation (EID) checklist consists of information that the agency is required to obtain to comply with the National Environmental Policy Act of 1969 (NEPA). NEPA establishes the Federal government's national policy for protection of the environment. HRSA has developed the EID for applicants of funding that would potentially impact the environment and to ensure that their decision-making processes are consistent with NEPA. Applicants must provide information and requested on the EID checklist so that HRSA may ensure compliance with NEPA.

HRSA will provide applicants with the results of the agency's environmental review through the NGA. If HRSA determines that additional environmental compliance is necessary, HRSA will notify applicable grantees of specific requirements.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB control number for this project is 0915-0324 and is valid until xx/xx/202x. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857.

Grantee Authorized Official: Dennis Torres, JD, LCSW
Phone: 203-977-5108
Email: dtorres@familycenters.org

Grantee EID Preparer: Dennis Torres, JD, LCSW
Phone: 203-977-5108
Email: dtorres@familycenters.org
Address: 888 Washington Blvd, 8th floor, Stamford CT 06901

Project Location/Address (Please note - separate EID forms are required for each project location)
 Please provide the address where the action will occur (e.g. where equipment will be located or where renovations/new construction will occur)

55 Strawberry Hill Ave., Stamford CT 06902

Scope of work

Describe all actions that are part of the proposed action (Please include a description of the entire project, including elements that will use non-federal funding)

The proposed action At Stamford High School is to upgrade and make more efficient the existing SBHC there to better manage the productivity and flow of patients seeking medical and mental health treatment. The project is limited to upgrading existing fixtures and cabinetry. There is no change to the layout and there all work is interior. Work includes:

- Carpentry and millwork to replace existing, locking cabinets and countertops.
- Thermal and moisture to better seal windows in the clinic.
- Replace doors and windows with more secure, better-quality hardware.
- Finishes including fixing tiling in bathroom, drop ceiling, painting, and upgrading flooring tile.
- Specialty work include fire extinguisher and AED cabinets.
- Sharps containers stations.
- Mechanical including HVAC, plumbing and electrical upgrades.

Site Description - required for all building renovations (e.g. interior renovations, new windows, roofs, etc.) and new construction (including building additions, temporary facilities, and trailers)

Site acreage: 15 acres

Land use on site: 902c Exempt Commercial (school)

Land use surrounding site (current use, zoning and proposed changes if applicable): Residential

Buildings currently on site (stories, height, age, total sq. footage): There are two main buildings connected by walkway, with six stories. The original building was built in 1928, renovated in 1973, and again in 2006. There is 367,000 total square footage.

Vegetation on site (e.g. grasses, shrub, heavily wooded, none because it's paved, etc.): Grasses, shrubs, some trees, sporting fields (baseball, football and soccer), and paved driveways and parking lots.

Streams/wetlands on site or adjacent to the site: No

Proposed ground disturbance (sq. footage): None

A. Scope of Proposed Action

This set of questions is concerned with size and scope of the proposed action

A.1. Will the action involve the purchase, construction or lease of new facilities (including temporary facilities and trailers), or substantially increase the capacity of an existing health care facility?

Yes No

A.2. Is the action significantly greater in scope than other development taking place in the area, or will it have significant unusual characteristics?

Yes No

B. Potential for Public Controversy

This set of questions is concerned with whether or not the proposed action has or could generate public controversy.

B.1. Are there any public concerns or controversy with respect to effects of the action on environmental or cultural resources based on reasonable and substantial issues?

Yes No

B.2. Have comments on the action's impacts to environmental or cultural resources been received from the public or from local, State, or Federal agencies?

Yes No

C. Degradation of Environmental Conditions

This set of questions concerns the potential for actions to degrade, even slightly, already existing poor environmental conditions.

C.1. Will the action increase identifiable ambient air pollution levels from a new emission source or from existing sources (e.g., lab fume hoods, HVAC systems, etc.)?

Yes No

C.2. Will the action increase identifiable ambient air pollution levels through a major increase in the number of or use of automobiles, trucks (e.g., will there be a large number of new employees or patients traveling to the site, or a large number of deliveries to the site)?

Yes No

C.3. Will the action exceed city or State health or Federal air quality standards with exhausts from fume hoods

Yes No

C.4. Will the action cause or increase soil erosion?

Yes No

C.5. Will the action discharge stormwater or pollutants into a stream, river, lake, etc.?

Yes No

C.6. Will the action overload existing waste treatment plants due to new loads (water volume, chemicals, toxicity, etc.)?

Yes No

C.7. Will the action allow seepage of contaminants into the water table?

Yes No

D. New or Unproven Technology

This set of questions is concerned with the deployment of new or unproven technology with the potential adverse effects or actions involving unique or unknown environmental risks

D.1. Will the action involve the purchase or use of new or unproven technology?

Yes No

D.2. Will the action involve the purchase or use of technology for which the environmental impacts are unknown?

Yes No

E. Presence of cultural, archaeological, historical or other protected resources

This set of questions is concerned with potential impacts to cultural resources including, but not limited to, buildings; archaeological sites; National Historic Landmarks; objects of significance to a Native American Tribe including graves, funerary objects, and traditional cultural properties; or other protected resources. HRSA will provide applicants with the results of the agency's historic preservation assessment through the Notice of Grant Award (NGA). If HRSA determines that additional review by the State Historic Preservation Office (SHPO) is necessary, HRSA will instruct applicable grantees on how to initiate consultation with the SHPO.

E.1. Will the action involve the purchase, construction, alteration, renovation, or lease of real property or portion of real property?

Yes No

If yes, when was the building constructed?

1963

E.2. Will the proposed action occur in or near a building listed on or eligible for listing on the National Register of Historic Places?

Yes No

E.3. Will the proposed action adversely affect properties listed on or eligible for listing on the National Register of Historic Places?

Yes No

E.4. Will the action encroach upon, change views to, or change noise levels around any historical, architectural, or archeological cultural property?

Yes No

F. Protected Species

This set of questions is concerned with protected plant and animals, including endangered or threatened species or their critical habitat.

F.1. Will the action be likely to adversely affect a plant or animal species listed on the Federal or applicable State list of endangered or threatened species or a specific critical habitat of an endangered or threatened species?

For assistance, contact the appropriate State Fish and Wildlife Agency or the regional office of the U.S. Fish and Wildlife Service.

Yes No

F.2. Will the action adversely affect nesting Bald Eagles or migratory birds?

Yes No

G. Special Status Areas and Critical Resources

These questions are concerned with actions with the potential to adversely affect special status areas or other critical resources such as wetlands, floodplains, coastal zones, wildlife refuge and wilderness areas, wild and scenic rivers, or sole or principal drinking water aquifers.

G.1. Are there wetlands or waters of the U.S. on or adjacent to the site?

Yes No

G.2. Will the action include discharge to or the filling or dredging of wetlands?

Yes No

G.3. Will the action require a section 404 (Clean Water Act) permit for actions in a wetland and/or section 10 (Rivers and Harbors Act) permit for actions in a stream or river? (Activities in or near a wetland or river may require a permit from the U.S. Army Corps of Engineers or U.S. Coast Guard. Includes: construction in or near any wet or dry waterway, stream crossings, intake structures, outfalls, etc.)

Yes No

G.4. Is the project site located in either a 100-year or a 500-year floodplain?

Yes No

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G.5. Will the proposed action include new construction or new site features (e.g., new buildings, additions, fences, parking lots, signage, etc.) in the floodplain?

Yes No

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Yes No

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Yes No

G.8. Will the proposed action discharge stormwater to the floodplain?

Yes No

G.9. Is the project located in a state that borders the Atlantic Ocean, Pacific Ocean, Great Lake, Chesapeake Bay, or Gulf of Mexico?

Yes No N/A

If yes, is your project located in the state's coastal zone?

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H.1. Will the action include renovation of an existing building or ground disturbing activities?

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If yes, has a Phase I Environmental Site Assessment been prepared for the property within the last 3 years?

H.2. Will the action take place on a site where past land uses may have led to contamination of soil, surface water, or groundwater?

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I.6. Could the action disrupt existing health services' response in case of a disaster?

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I.8. Will the action increase by more than 5% the patient load of the area's routine care services?

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J.3. Will the proposed action displace or relocate low-income or minority populations?
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This set of questions is concerned with consistency with other federal, state, local or tribal laws or requirement imposed for the protection of the environment.

K.1. Will the action convert significant agricultural lands to non-agricultural uses or impact Prime Farmland Soils or Solis of Statewide Importance?
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K.2. Will the action change traditional use of the land parcel (by rezoning, etc.)?
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If yes, has zoning change been requested and/or received? Explain

If yes, complete the following:

Present Zoning: _____

Present Use of Site: _____

Proposed Zoning: _____

K.3. Will the action have significant adverse direct or indirect effects on park land, other public lands, or areas of recognized scenic or recreational value? (For example, consider how the activity will affect the view?)

Yes No

K.4. Will the action block access to known mineral deposits? (Sand, gravel, clay, stone, or other common building materials are not considered mineral deposits.)

Yes No

L. Cumulative Impacts

Potential for significant cumulative impact when the proposed action is combined with other past, present and reasonably foreseeable future actions, even though the impacts of the proposed action may not be significant by themselves.

L.1. Has the area around the project undergone major changes in land use/development?

Yes No

L.2. Are major changes in land use/development planned for the area around the project?

Yes No

L.3. Will the action alter the use of other land by related development of stores, roads, or site changes?

Yes No

M. Mitigative Measures

Please discuss any mitigative measures undertaken to minimize any environmental impacts. For example, utilizing the EPA's Energy Performance Environmental Assessment Tool (EPEAT) or EnergyStar guidance as part of IT selection and purchase criteria, using EPA's Environmentally Preferred Purchasing Guidance for 'green' products and services, or incorporating Sustainable Design or Leadership in Energy and Environmental Design (LEED) standards into alteration/renovation or new construction project.


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ENVIRONMENTAL INFORMATION AND DOCUMENTATION CERTIFICATION

[x] I certify that to the best of my knowledge and ability the information presented herein is true and correct (enter appropriate information in the shaded blanks):

Signature (Type Full Name): Dennis Torres 	Title or Position: Chief Health Officer	Phone Number: 203-977-5108	Date: 5/20/2023
--	---	--------------------------------------	---------------------------

(Grantee or responsible, knowledgeable person who completed this document)

Signature (Type Full Name): Dennis Torres 	Title or Position: Chief Health Officer	Phone Number: 203-977-5108	Date: 5/20/2023
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(Grantee Authorized Representative)

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National Flood Hazard Layer FIRMette

73°32'17"W 41°3'57"N



Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS

- Without Base Flood Elevation (BFE)
Zone A, V, A99
- With BFE or Depth
Zone AE, AO, AH, VE, AR
- Regulatory Floodway

0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile
Zone X

OTHER AREAS OF FLOOD HAZARD

- Future Conditions 1% Annual Chance Flood Hazard
Zone X
- Area with Reduced Flood Risk due to Levee. See Notes.
Zone X
- Area with Flood Risk due to Levee
Zone D

OTHER AREAS

- Area of Minimal Flood Hazard
Zone X
- Effective LOMR
- Area of Undetermined Flood Hazard
Zone D

GENERAL STRUCTURES

- Channel, Culvert, or Storm Sewer
- Levee, Dike, or Floodwall

Cross Sections with 1% Annual Chance Water Surface Elevation

- Coastal Transect
- Base Flood Elevation Line (BFE)
- Limit of Study
- Jurisdiction Boundary

OTHER FEATURES

- Coastal Transect Baseline
- Profile Baseline
- Hydrographic Feature

MAP PANELS

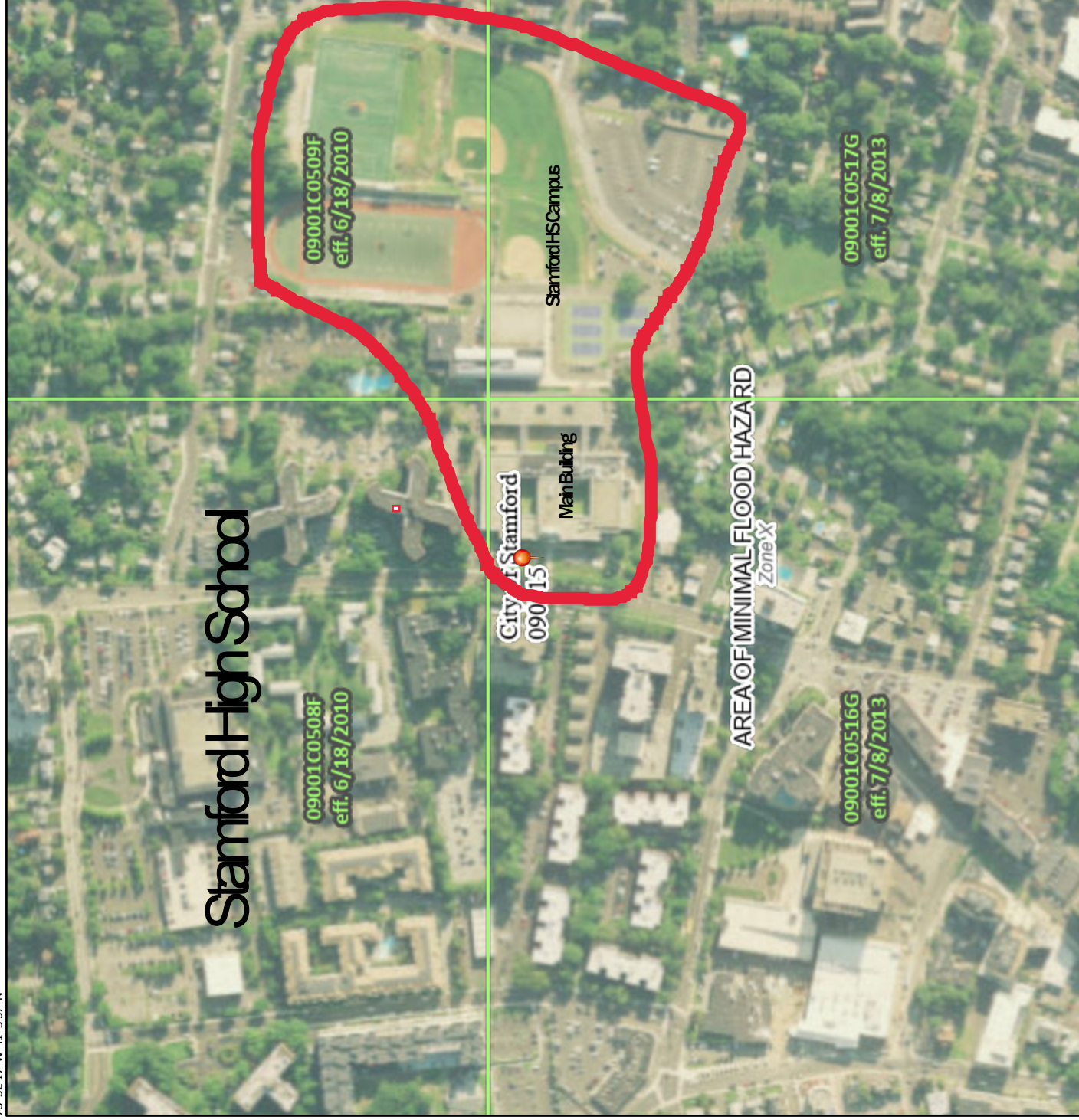
- Digital Data Available
- No Digital Data Available
- Unmapped

The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/26/2023 at 2:28 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



0 250 500 1,000 1,500 2,000 Feet 1:6,000
 Basemap: USGS National Map; Orthoimagery: Data refreshed October, 2020
 73°31'39\"/>