

REQUEST FOR BOARD ACTION

HENDERSON COUNTY BOARD OF COMMISSIONERS

MEETING DATE: January 5, 2026

SUBJECT: Hurricane Helene Local Government Capital Grant
Program Award

PRESENTERS: Emily Kanipe, Grant Administrator

ATTACHMENTS: Yes

1. Scope of Work
2. State Grant Certification

SUMMARY OF REQUEST:

Henderson County was notified that it has been awarded \$2,124,348.26 for the Clear Creek Wastewater Project through funding created by SL2025-26 and amended in SL2025-97. Attached for the Board's review and approval is the scope of work and State Grant Certification to be submitted to the Office of State Budget and Management for the Hurricane Helene Local Government Capital Grant Program.

BOARD ACTION REQUESTED:

The Board is requested to approve the attached scope of work and authorize the attached state grant certification. The Board is also requested to provide authorization to the County Manager and Grants Administrator to execute the forthcoming agreement on behalf of the County.

Suggested Motion:

*I move that the Board approve the attached scope of work.
I further move that the Board provide authorization to the
County Manager and Grants Administrator to execute the
forthcoming agreement on behalf of the County.*

Appendix A

Scope of Work, Sub-Grants, and Annual Budget

As part of this grant agreement, you are required to provide a description of how you will spend the grant funds in compliance with the specific purpose as stated in the Appropriations Act ("Scope of Work"). You are also required to submit information related to any potential sub-grants and a budget for the grant funds. **Please attach additional sheets as necessary.**

1. Organization: County of Henderson

2. Grant ID: 203010

3. Scope of Work

Objectives, Results, Performance Measures:

Recipient shall detail below how the organization will spend the grant funds in compliance with the specific purpose(s) as stated in the Appropriations Act. The description should include objectives to be achieved, expected results and performance measures. The description should also include anticipated timing of those objectives, expected results and any services provided.

Objective(s):

How do you plan to spend your grant funds? What project(s) do you want to accomplish?

Henderson County will use directed grant funds to build a centralized wastewater system for Edneyville Elementary replacing the septic system currently in use by the school.

The project will result in a pump station and sewer lines that connect the wastewater system at the school to the Hendersonville Wastewater System.

Expected Results:

What do you hope will be accomplished through the projects supported by these grant funds?

-Fulfill the NC DEQ requirement that Edneyville Elementary be placed on sewer service

-Provide Increased student enrollment capacity at Edneyville Elementary as a result of increased wastewater capacity

Performance Measure(s):

List the steps it will take to accomplish the project(s) supported by these grant funds.

If the project is programmatic, list the estimated measurements for project outcomes.

-Bid for estimates from contractors based on the revised scope

-Hire a team for build and design to be approved by the Board of Commissioners

-Procurement of materials/ obtain any necessary permitting

- Build a wastewater pump station and gravity wastewater line that connects to Hendersonville System

4. Sub-grants:				
a. Does the Recipient anticipate that it will sub-grant or pass down any funds to another organization?		Yes	No	<input checked="checked" type="checkbox"/>
If yes, answer the following:				
b. Name of Sub-recipient	c. Program Name	d. Amount to Sub-recipient		

5. Budget:

Below are general expenditure descriptions that can serve as a *guide* for preparing the organization's budget related to the grant award. Please provide a breakdown of estimated expenses for each category below or as an attachment.

The following budget is for the time period beginning (01/01/2026) and ending (06/01/2030).

EXPENDITURE DESCRIPTION	AMOUNT
Employee Expenses (ex. Salaries, hourly wages for grant project management /program related staffing).	
Administration Expenses (ex. utilities, telephone, data, lease related expenses)	
Goods Expenses (ex. supplies and equipment)	
Contract and Services Expenses (ex. Designers, Architects, Builders, Programmatic Service Providers)	\$2,124,348.26
Other Expenses (ex. related charges not assigned above and described by recipient in breakdown below)	
Total Balance of the Project Fund (Grant total amount)	\$2,124,348.26

Provide a breakdown of estimated expenses for each category below or as an attachment.

\$2,124,348.26 - Advertisement and design fees for selected contractor

This grant is only a portion of the funds needed to complete this project. This money will be used to fund the contractor's fees as the project begins.

Please note, you will sign off on this appendix as part of executing the Grant Agreement (Contract).

Printed Name

Title

Signature

Date

HENDERSON COUNTY BOARD OF COMMISSIONERS

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WILLIAM G. LAPSLEY
Chairman
J. MICHAEL EDNEY
Vice-Chairman

REBECCA McCALL
JAY EGOLF
SHEILA FRANKLIN

Appendix C: State Grant Certification – No Overdue Tax Debts

January 5, 2026

To: Office of State Budget and Management, Director and Chief Fiscal Officer

Certification:

We certify that the County of Henderson does not have any overdue tax debts, as defined by N.C.G.S. 105-243.1, at the federal, State, or local level.

Sworn Statement:

Chairman William G Lapsley and Randall Cox being duly sworn, say that we are the Chair of the Board of Commissioners and Director of Finance, respectively, of the County of Henderson in the State of North Carolina and that the foregoing certification is true, accurate and complete to the best of our knowledge and was made and subscribed by us. We also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.

William G. Lapsley, Chairman, Henderson County Board of Commissioners

Randall Cox, Director of Finance, Henderson County

Sworn to and subscribed before me on the day of the date of said certification. __Denisa Lauffer__

My Commission Expires: _____ (Notary Signature and Seal)_____