MEMORANDUM OF UNDERSTADNING (MOU)

This MOU is between The Salvation Army, a GA Corp., for The Salvation Army Sarasota Area Command (TSA), and The City of North Port, Florida, for the Low-Income Home Energy Assistance Program (LIHEAP)

Purpose and Goals: This MOU sets forth the terms between The Salvation Army, a GA Corp., for The Salvation Army Sarasota Area Command (TSA) and the City of North Port, Florida, the PARTIES, for collaboration in providing services related to the **Low-Income Home Energy Assistance Program (LIHEAP).** The undersigned providers of energy assistance programs agree to coordinate services for households applying for LIHEAP funds.

The City of North Port, Florida, Social Services Division staff will complete the appropriate intake, application and qualifying information and scan into the Homeless Management Information System (HMIS). The City of North Port Social Services Division staff will notify The Salvation Army Sarasota Area Command (TSA) via email no later than 2:00 p.m. each business day for approval and a commitment to the respective energy company. The City of North Port, Florida, Social Services Division staff will maintain a list of clients they have assisted and a client chart for each application whether approved or denied.

TSA staff will utilize their professional staff and facilities to review the transferred documents to ensure each qualifies within TSA and LIHEAP qualifications and guidelines. If funds are available, TSA will use their administrative services and staff to process and mail the payment(s). The permanent record(s) will be maintained at The Salvation Army Sarasota Area Command located at 1400 10th St., Sarasota, FL 34236.

Coordination between agencies will prevent duplicate assistance payments during the same funding period. To the extent allowable by law, client records will be maintained in confidentiality by both agencies which will include the type of assistance requested, the date requested, the disposition of the application and if approved, the amount of the payment to the client. Both providers will work to increase the quality of services provided to all participants.

Privacy: Both providers agree to abide by the Health Insurance Portability and Accountability Act Final Privacy Rule, 45 CFR Parts 164.306(a)(4) and 164.308(a), Health Information Technology for Economic and Clinical Health Act, any applicable federal or state laws pertaining to confidentiality of client records.

Duration: This MOU is at-will and may be terminated at any time by either PARTY with a 30-day written notice. Otherwise, this MOU agreement period shall be in effect from April 1, 2018 to March 31, 2019.

City of North Port, Florida

The Salvation Army Sarasota Area Command

Authorized Representative

Peter D. Lear, CPA, CGMA City Manager

Date: _____

Approved as to form and correctness:

BY:_____ Amber L. Slayton, City Attorney Authorized Representative

Printed Name:

Date:

ATTEST:

BY:_____ Patsy C. Adkins, MMC, City Clerk