

MADISON COUNTY BOARD OF SUPERVISORS

125 West North Street • Post Office Box 608 Canton, Mississippi 39046 601-855-5500 • Facsimile 601-855-5759 www.madison-co.com

March 9, 2020

Ms Jackie Cobbins Housing Rehabilitation Officer Mississippi Home Corporation 735 Riverside Drive Jackson, Mississippi 39202

Dear Ms Cobbins:

This letter is to request approval to reduce Bertha Luckett Matlock's project set-up amount from \$188,850.00 to \$130,000.00 for the reconstruction of a three (3) bedroom home. The construction contract for Ms Matlock's home is \$120,000.00.

The \$58,850.00 reduction in Ms Matlock project set-up will be distributed between Ms Mary Austin for the reconstruction of a three (3) bedroom home and Ms Willie Mae Johnson home for substantial rehabilitation.

Thank you for your assistance in this matter.

Sincerely,

Gerald Steen, President

Mississippi Home Corporation Request for Cash

Program: HOME Homeowner Rehabilatation Program Section A: General Information Section B: Project Information Project No. Grant No. Madison County Board Of Supervisors Recipient 1228-M16-SG-280-045 Mailing Address Post Office Box 608 Request No. 125 West North Street Street Address Services Rendered 8 City, State Zip Canton, MS 39046 MHC Staff Initials 601-855-5500 Telephone No. Thru 10-Feb-20 6-Mar-20 Section C: Request Per Activity Activity Description **Budget Amount** Total Received to Date This Request Remaining Balance **Activity Numbers** Application Fee \$5,000.00 \$5,000.00 \$0.00 \$0.00 Bertha Luckett Matlock \$188,850.00 \$3,750.00 \$0.00 \$185,100.00 3 Mary Black \$44,450.00 \$21,425.00 \$0.00 \$4,725.00 \$2,250.00 \$18,475.00 \$42,200.00 Mary M. Austin \$44,450.00 Rose Zettera Williams 5 \$44,450.00 \$20,737.50 \$0.00 \$23,912.50 6 Willie Ann Johnson \$44,450.00 \$2,250.00 \$0.00 \$42,200.00 Paulette Wales \$44,450,00 \$24.050.00 \$0.00 \$20,400.00 8 Margie Brooks \$44,450.00 \$2,950.00 \$0.00 \$41,500.00 9 Wallace Ross \$44,450.00 \$1,450.00 \$43,000.00 10 \$0.00 \$0.00 \$0.00 \$0.00 \$505,000.00 Total: \$83,862,50 \$18,475.00 \$403,037.50 Required Accomplishement Narrative: (Please provide a brief update on this project. 100 % complete Mary Black I Hereby Certify That (a) the services covered by this request have not been received from the Federal Government/State Government or expended for such services under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under the terms of the contract agreement or grant; (c) the amount requested herein does not exceed the total funds obligated by contract; and (d) the funds are requested for only immediate disbursements. I Hereby Certify That the goods sold and/or services rendered have been delivered and/or performed in good order within the time listed above and are in compliance with all statutory requirements and regulations. I certify that this request does not include any advances or funds for future obligations. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Is this your final request for cash on this contract? YES NO 3/9/2020 James Curtis Smith Signature of Authorized Official Date Signed Prepared By **Date Prepared** Gerald Steen, President 601-214-5966 Typed Name and Title of Authorized Official Preparer's Telephone No. To be completed by MHC Authorized Official APPROVED BY: __ DATE: Signature, Authorized MHC Representative AUTHORIZED BY: ___ DATE: __ Signature, Authorized MHC Representative IDIS APPROVED BY: _ Signature, Authorized MHC Representative IDIS Voucher Number Vendor Number Issue/Series Fund/Sub-Fund

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Mississippi Home Corporation Consolidated Support Sheet

Program:

Homeowner Rehabilitation

Recipient dison County Board Of Supervisors

Request for Cash Number:

8

Contract Number:

1228-M16-SG-280-045

Total Amount Requested:

\$18,475.00

IDIO #		22. 2	100 100 100		Amount of This	9245 N 9		ACT 007861 1/45 51 761		
IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Request	Match	Amount Budgeted	Total Received to Date	Balance	
	Application Fee	Sunbelt R&D	HOME 1601				\$5,000.00	\$5,000.00	\$0.00	
	Total Administration			\$0.00	\$0.00	\$0.00	\$5,000.00	\$5,000.00	\$0.00	
Home #1	Bertha Luckett Matlock						\$188,850.00	\$3,750.00	\$185,100.00	
		Sunbelt R&D								
									\$0.00	
									\$0.00	
Home #1				\$0.00	\$0.00	\$0.00	\$188,850.00	\$3,750.00	\$185,100.00	
Home #2	Mary Black						\$44,450.00	\$21,250.00	\$23,200.00	
		Sunbelt R&D	1605	\$2,250.00	\$2,250.00				\$2,250.0	
		Sunbelt R&D								
		Skyline Innovations LLC	2	\$16,225.00	\$16,225.00					
									\$0.00	
Home #2				\$18,475.00	\$18,475.00	\$0.00	\$44,450.00	\$39,725.00	\$4,725.00	
Home #3	Mary M. Austin						\$44,450.00	\$2,250.00	\$42,200.00	
									\$0.00	
									\$0.00	
Home #3				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00	
Home #4	Rose Zettera Williams						\$44,450.00	\$20,537.50	\$23,912.50	
		Sunbelt R&D								
		Sunbelt R&D								
		Skyline Innovations								
Home #4				20.00	20.00				\$0.00	
COLUMN TO SERVICE AND ADDRESS OF THE PARTY O	Large A			\$0.00	\$0.00	\$0.00	\$44,450.00	\$20,537.50	\$23,912.50	
Home #5	Willie Ann Johnson						\$44,450.00	\$2,250.00	\$42,200.00	
									\$0.00	
									\$0.00	
Home #5				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00	
								\$55,037.50		

I Hereby Certify That (a) the services covered by this request have not been received from the feeterms of the contract agreement or grant; (c) the amount requested herein does not exceed the	Federal / State Government or expended for e total funds obligated by contract; and (d)	or such services under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs of the funds are requested for only immediate disbursements.	expenditures unde
I Hereby Certify That the goods sold and/or services rendered have been delivered and/or perfouture obligations.	rmed in good order within the time listed a	bove and are in compliance with all statutory requirements and regulations. I certify that this request does not include any adv	ances or funds for
Signature of Authorized Official	Date Signed	James Curtis Smith Prepared By	

Gerald Steen, President

Typed Name and Title of Authorized Official

601-214-5966

Preparer's Telephone No.

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Mississippi Home Corporation Consolidated Support Sheet

Program:

Homeowner Rebabilitation

Recipient

dison County Board Of Supervisors

Request for Cash Number:

8

Contract Number:

1228-M16-SG-280-045

Total Amount Requested:

\$18,475.00

IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Amount of This Request	Match	Amount Budgeted	Total Received to Date	Balance
Home #6	Paulette Wales						\$44,450.00	\$24,050.00	\$20,400.00
		Sunbelt R&D							
		Skyline Inovations			- 8				***
Home #6				\$0.00	\$0.00	\$0.00	644.450.00	\$24.050.00	\$0.00
Home #7	Margie Brooks			\$0.00	\$0.00	\$0.00	\$44,450.00	\$24,050.00	
nome #/	Iwargie Brooks	Sunbelt R&D					\$44,450.00	\$2,950.00	\$41,500.00
		Suilbeit R&D							\$0.00
			1		100				\$0.00
Home #7				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,950.00	\$41,500.00
Home #8	Wallace Ross			φυ.υυ	φ0.00	ψ0.00	\$44,450.00	DESCRIPTION OF THE PERSON OF T	\$43,000.00
	77411400 71000						φ44,400.00	\$1,400.00	Ψ40,000.00
									\$0.00
									\$0.00
Home #8				\$0.00	\$0.00	\$0.00	\$44,450.00	\$1,450.00	\$43,000.00
Home #9									\$0.00
									\$0.00
									\$0.00
									\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
							TOT REQ TO DTE	\$83,487.50	
		GRAND TOTAL		\$18,475.00	\$19.475.00	00.00	¢505 000 00	6404.062.50	\$403,037.50
	Services Rendered - Be			\$18,475.00	\$18,475.00 Thru Ma	\$0.00 arch 9, 2020	\$505,000.00	\$101,962.50	\$403,037.50
			7 Di (1)			945 W. S. W. S.	\$404.062.50		
	Cumulative:	\$101,962.50 Program Expenditures	Plus (+)	Matahina Fu	\$0.00	Equals (=)	\$101,962.50	J	
	Cumulative.	Program Expenditures		Matching Ex	penditures		Total Expenditures		
I Hereby Cert	tify That (a) the services covere	d by this request have not been received the amount requested herein does not exce	from the Federal /	State Government or expending and the contract:	ended for such services und	der any other contract agreemer	at or grant; (b) the amount reques	sted will be expended for allowable co	osts / expenditures under the
tornio or the co	struct agreement or grant, (c) to	ie amount requested herein does not exce	sed the total fullus	obligated by contract, and	(u) the funds are requested	a for only infinediate dispulseme	ants.		
I Hereby Cert obligations.	tify That the goods sold and/or s	services rendered have been delivered an	d/or performed in g	ood order within the time	listed above and are in com	pliance with all statutory require	ments and regulations. I certify	that this request does not include an	y advances or funds for future
					J:	ames Curtis Smith			
	Signature	of Authorized Official		Date Signed		Prepai	red By	=	
	Gerald Steen, President	_		60	1-214-5966				
	Typed Name and Title of	f Authorized Official				Preparer's Te	lephone No.		

TOTAL DUE

Sunbelt Research and Development Consortium, Inc.

717 Thomas Lane Madison, MS 39110 601-214-5966 Fax: 601-898-3761

SERVICE FOR:

Project Administration

Submitted BY:

BILL TO:

Madison County Board of Supervisors

Post Office Box 608 Canton, MS 39046 **INVOICE NUMBER** HOME 1605

Source 1228-M16-SG-280-045

TAX NUMBER 64-0660259

JOB DESCRIPTION Project Administration.]

DATE [03/9/2020]

DATE	SERVICE DESCRIPTION	Amount	Rate	AMOUNT
01/27/2020	HOME Project Notice To Proceed Bertha Luckett Matlock Mary Black Mary M. Austin Rose Zettera Williams Willie Ann Johnson Paulette Wales Margie Brooks Wallace Ross Construction Mary Black 100% Complete Rose Zettera Williams 50% Complete Paulette Wales 50% Complete	2250	1.00	2250.00
				\$2,250.00

MAKE CHECKS PAYABLE TO:

Sunbelt Research and Development Consortium,

Inc.

APPLICATION AND CERTIFI TO OWNER: Mary Black	CATION FOR PAYMENT PROJECT:	AIA DOCUMENT G702 PAGE ONE OF 2 PAGES APPLICATION NO: 2 Distribution to:
4255 Highway 43 North Canton, MS 39046 FROM CONTRACTOR:	VIA ARCHITECT:	PERIOD TO: 3/6/2020 ARCHITECT CONTRACTOR
Skyline Innovations 115 Riley Drive Jackson, MS 39209		PROJECT NOS:
CONTRACT FOR:		CONTRACT DATE:
CONTRACTOR'S APPLICAT Application is made for payment, as shown below, i Continuation Sheet, AIA Document G703, is attach	n connection with the Contract.	The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.
1. ORIGINAL CONTRACT SUM 2. Net change by Change Orders 3. CONTRACT SUM TO DATE (Line 1 ± 2) 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) 5. RETAINAGE: a % of Completed Work	\$ 32,450.00 \$ 32,450.00 \$ 32,450.00 \$ 0.00 \$ 32,450.00 \$ 16,225.00 \$ 16,225.00 \$ 0.00	State of: Subscribed and sworn to before me this Notary Public: ARCHITECT'S CERTIFICATE FOR PAYMENT Commission expires: ARCHITECT'S CERTIFICATE FOR PAYMENT Commission expires: Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED. AMOUNT CERTIFIED
CHANGE ORDER SUMMARY Total changes approved	ADDITIONS DEDUCTIONS	(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and onthe Continuation Sheet that are changed to conform with the amount certified.)
in previous months by Owner		By John Commission 3/9/2020
Total approved this Month TOTALS	\$0.00	This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the
TOTALS		Contractor named herein. Issuance, payment and acceptance of payment are without
NET CHANGES by Change Order	\$0.00	prejudice to any rights of the Owner or Contractor under this Contract.

THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 NEW YORK AVE., N.W., WASHINGTON, DC 20006-5292

Users may obtain validation of this document by requesting a completed AIA Document D401 - Certification of Document's Authenticity from the Licensee.

CONTINUATION SHEET

AIA DOCUMENT G703

2 PAGE OF PAGES

APPLICATION NO:

APPLICATION DATE:

2-Final

2

3/7/2020

PERIOD TO: 3/7/2020 PROJECT: 4255 Highway 43

N. Canton, MS 39046

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Α	В	С	D	E	F	G	н	i	J
ITEM	DESCRIPTION OF WORK	SCHEDULED	SCHEDULED WORK COMPLET		MATERIALS	TOTAL	%	BALANCE	RETAINAGE
NO.		VALUE	FROM PREVIOUS	THIS PERIOD	PRESENTLY	COMPLETED	(G + C)	TO FINISH	(IF VARIABLE
			APPLICATION		STORED	AND STORED		(C -G)	RATE)
			(D + E)		(NOT IN	TO DATE			
					D OR E)	(D+E+F)			
1	Replace electrical receptacles outlets	\$1,500.00	\$750.00			\$1,500.00	100%	\$0.00	
2	Break Panel	\$2,250.00	\$1,125.00	\$1,125.00		\$2,250.00	100%	\$0.00	
3	Bathroom receptacles	\$1,200.00	\$600.00	\$600.00		\$1,200.00	100%	\$0.00	
4	Kitchen receptacles	\$700.00	\$ 350.00	\$ 350.00		\$700.00	100%	\$0.00	
5	Installation of smoke detectors	\$1,750.00	\$875.00	\$875.00		\$1,750.00	100%	\$0,00	
6	Replacement of defected light fixtures	\$3,800.00	\$1,900.00	\$1,900.00		\$3,800.00	100%	\$0.00	
7	Heating	\$3,300.00	\$1,650.00	\$1,650.00		\$3,300.00	100%	\$0.00	
8	Reinstall hot water heater	\$450.00	\$225.00	\$225.00		\$450,00	100%	\$0.00	
9	Roofing	\$8,000.00	\$4,000.00	\$4,000.00		\$8,000.00	100%	\$0.00	
10	Connect heating unit to cental service	\$750.00	\$ 375.00	\$375.00		\$750.00	100%	\$0.00	
	Install handicapped bars	\$1,800.00	\$900.00	\$900.00		\$1,800.00	100%	\$0.00	
12	Bedroom 2	\$250.00	\$125.00	\$125.00		\$250.00	100%	\$0.00	
13	Master bedroom and bathroom	\$2,200.00	\$1,100.00	\$1,100.00		\$2,200.00	100%	\$0.00	
14	Kitchen countertops only	\$4,500.00	\$2,250.00	\$2,250.00		\$4,500.00	100%	\$0.00	
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	GRAND TOTALS	\$32,450.00	\$16,225.00	\$16,225.00	\$0.00	\$32,450.00	100%	\$0.00	

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