

HOUSING AND HOMELESSNESS DIVISION GRANT AGREEMENT

This Housing and Homelessness Grant Agreement (this “Agreement”) is entered into between **KITSAP COUNTY** (“County”), a political subdivision of the State of Washington, in its capacity as the administrative agent for itself and the Cities of Bainbridge Island, Bremerton, Port Orchard and Poulsbo; and **KITSAP ANIMAL RESCUE & EDUCATION**, a Washington non-profit corporation (the “Recipient”).

ARTICLE I – PURPOSE AND TERM

Section 1.1. Purpose: The purpose of this Agreement is to distribute affordable housing for all surcharge funds awarded pursuant to **RCW 36.22.178** and homeless housing surcharge funds awarded pursuant to **RCW 36.22.179** and **RCW 36.22.1791**.

Section 1.2 Term: This Agreement shall take effect on **January 1, 2025** and terminate on **December 31, 2025**.

ARTICLE II – GRANT AMOUNT, USE AND BUDGET

Section 2.1 Grant Amount: The Recipient is awarded a total of **\$20,000** (the “Grant Award”).

Section 2.2 Use of Grant. The Recipient shall use the Grant Award solely for the purposes and in the manner described in **Exhibit A: Statement of Work and Project Timeline** (the “Project”). Adjustments to Proposed Project Timelines may be requested in writing, and granted or denied at the sole discretion of the County.

Section 2.3 Budget. The Grant Award shall be expended by the Recipient as set forth in **Exhibit B: Budget**. Adjustments to Proposed Project Budgets may be requested in writing, and granted or denied at the sole discretion of the County.

ARTICLE III – DISBURSEMENTS

Section 3.1 Disbursement of Grant Award Funds. Not more frequently than once a month, the Recipient may request disbursement from the Grant Award. Each disbursement request must be made by the Recipient, submitting to the County at the address specified in Section 5.2 a properly completed Kitsap County Reimbursement Request form. The request must identify the work performed and be accompanied by a summary of all allowable costs and expenses incurred for which the Recipient is seeking disbursement; further documentation may be requested by the County. The Recipient will be subject to periodic on-site audits to ensure satisfactory supporting documentation of all allowable costs and expenses. Within 30 days of its receipt of the request and satisfactory supporting documentation, and subject to the other terms and conditions contained in this Agreement, the County shall pay the amount of the invoice to the Recipient at the address specified in Section 5.2.

Section 3.2 Advance Disbursement. The Recipient may request disbursement from the Grant Award in advance of actual expenditure only as follows:

(a) **Capital Construction or Operation:** If the Project is for the purpose of capital construction or operation, the Recipient may request advance disbursement of up to 50 percent of the Grant Award. If the request is granted, the Recipient must reconcile the advance in its last disbursement request at the end of the County’s fiscal year;

(b) Capital Purchase Grant: If the Project is for the purpose of capital purchase, the Recipient may request advance disbursement of up to 100 percent of the Grant Award. If the request is granted, the Recipient must within 60 days of disbursement submit a Kitsap County Reimbursement Request fully documenting the use of the disbursement; or

(c) Rental Assistance: If the Project is for the purpose of providing rental assistance, the Recipient may request advance disbursement of up to 25% of the Grant Award each quarter. If the request is granted, the Recipient must reconcile the advance at the end of the quarter, before submitting the next advance disbursement request. All types of advance disbursement requests must be directed, in writing, to the County and contain sufficient information for the request to be evaluated. Advance disbursements may be granted or denied at the sole discretion of the County.

Section 3.3 Disbursement Limitations. In no event will the County ever be required to disburse funds in excess of the Grant Award. In addition, unless expressly provided otherwise in this Agreement:

(a) no disbursements will be made in advance of costs or expenses being incurred; and

(b) no costs or expenses incurred by the Recipient prior to the effective date of this Agreement, or after its termination, are eligible for reimbursement.

Section 3.4 Disbursement Without Prejudice. Any disbursement made by the County to the Recipient shall be without prejudice to the County's rights later to challenge the propriety of the Recipient's claimed costs or expenses.

Section 3.5 Withholding Disbursements. If the Recipient fails to perform any obligation under this Agreement, and the failure has not been cured within 10 days following oral or written notice from the County, the County may, without penalty and in its sole discretion and upon written notice to the Recipient, withhold all monies otherwise due the Recipient until such failure to perform is cured. This right to withhold disbursements is in addition to all other rights and remedies the County may have available to it under this Agreement or under law.

ARTICLE IV – REPORTS AND RECORDKEEPING

Section 4.1 Reporting Requirements. Except as may otherwise be provided in Exhibit A, at least once a quarter, and at the conclusion of either the grant expenditure or the grant contract period, the Recipient shall provide a report on the progress made to date on the Project, using such forms and meeting such requirements as determined by the County. Such progress reports shall be provided by the Recipient to the County electronically via the County's chosen electronic signature vendor.

Section 4.2 Record Retention; Review. The Recipient shall maintain records sufficient to fully document its compliance with all contractual, grant and legal requirements. Upon reasonable advance notice, the Recipient shall provide the County, or its authorized agents, with full access to all of the Recipient's records relating to this Agreement or the Project. The Recipient agrees to be financially and legally responsible for any audit exceptions or other irregularities in its performance or recordkeeping, including but not limited to impermissible or unauthorized use of Grant Award funds. This section shall survive termination of this Agreement.

ARTICLE V – CONTRACT ADMINISTRATION AND NOTICES

Section 5.1 Personnel. The Recipient will secure at its own expense all labor and materials required to perform any work in connection with the Project. The Recipient shall be responsible for all applicable payroll, labor and industries premiums, and taxes. All employees and subcontractors of the Recipient shall be covered by Industrial Insurance in full compliance

with Title 51 of the Revised Code of Washington ("RCW"). The Recipient shall defend and indemnify the County, and their officials, officers, employees and agents from and against all claims arising from any actual or alleged violation of the Recipient's duties under this section or applicable law. Solely for the purposes of this indemnification provision, the Recipient expressly waives its immunity under Title 51 RCW and acknowledges that this waiver was mutually negotiated by the parties. The Recipient's duty to defend and indemnify shall survive the termination of this Agreement.

Section 5.2 Contract Representatives. The parties' designated representatives shall be responsible for the administration of this Agreement and for receiving notices given in connection with this Agreement. The following are designated as the representatives of the parties.

FOR THE COUNTY:

Carl Borg
Housing and Homelessness Division
Kitsap County Department of Human Services
345 6th Street, Suite 400
Bremerton, WA 98337
(360) 979-6027
CEBorg@Kitsap.gov

FOR THE RECIPIENT:

Dianne Canafax, CPDT-KA; KPA-CTP, Executive Director
Kitsap Animal Rescue & Education
P.O. Box 994
Silverdale, WA 98383
(360) 434-3731
dianne@nwkare.org

A party may change its designated representative or address by providing notice, either written or via email, to the other party.

Section 5.3 Notices. Any notice required or permitted to be made under this Agreement may be given personally, by facsimile, or by first-class, registered or certified mail. A notice personally delivered to the other party is deemed given upon proper delivery. A notice sent by first-class, registered or certified mail is deemed given three days after mailing, if properly addressed and having proper postage. Notices delivered by facsimile shall be deemed to have been given on the date of transmission if received during the recipient's business day or, if not, on the recipient's next business day.

ARTICLE VI – INDEMNIFICATION

Section 6.1 Indemnification. To the fullest extent permitted by law, the Recipient shall indemnify, defend and hold harmless Kitsap County and the officials, officers, employees and agents of each of them, from and against all claims in any way resulting from or arising out of the performance of this Agreement, whether such claims arise from the acts, errors or omissions of the Recipient, its subcontractors, third parties, Kitsap County, or anyone directly or indirectly employed by any of them or anyone for whose acts, errors or omissions any of them may be liable. "Claim" means any loss, claim, suit, action, liability, damage or expense of any kind or nature whatsoever, including but not limited to attorneys' fees and costs, attributable to personal or bodily injury, sickness, disease or death, or to injury to or destruction of property, including the loss of use resulting therefrom. The Recipient's duty to indemnify, defend and hold harmless includes but is not limited to claims by the Recipient's or any

subcontractor's officers, employees or agents. The Recipient's duty, however, does not extend to claims arising from the sole negligence or willful misconduct of Kitsap County, or its officials, officers, employees and agents. Solely for the purposes of this indemnification provision, the Recipient expressly waives its immunity under Title 51 of the Revised Code of Washington and acknowledges that this waiver was mutually negotiated by the parties. This section shall survive the expiration or termination of this Agreement.

ARTICLE VII – INSURANCE

Section 7.1 Professional Legal Liability. The Recipient will maintain professional legal liability or professional errors and omissions coverage appropriate to the Recipient's profession. The coverage will have a limit of not less than \$1 million per occurrence. The coverage will apply to liability for a professional error, act or omission arising out of the Recipient's services under this Agreement. The coverage will not exclude bodily injury or property damage. The coverage will not exclude hazards related to the work rendered as part of this Agreement or within the scope of the Recipient's services under this Agreement, including testing, monitoring, measuring operations or laboratory analysis where such services are rendered under this Agreement.

Section 7.2 Workers' Compensation and Employer Liability. The Recipient will maintain workers' compensation insurance as required by Title 51, Revised Code of Washington, and will provide evidence of coverage to the Kitsap County Risk Management Division. If this Agreement is for over \$50,000, then the Recipient will also maintain employer liability coverage with a limit of not less than \$1 million.

Section 7.3 Commercial General Liability. The Recipient will maintain commercial general liability coverage for bodily injury, personal injury and property damage, subject to a limit of not less than \$1 million per occurrence. The general aggregate limit will apply separately to this Agreement and be no less than \$2 million. The Recipient will provide commercial general liability coverage that does not exclude any activity to be performed in fulfillment of this Agreement. Specialized forms specific to the industry of the Recipient will be deemed equivalent provided coverage is no more restrictive than would be provided under a standard commercial general liability policy, including contractual liability coverage.

Section 7.4 Miscellaneous Insurance Provisions.

- A. The Recipient's liability insurance provisions will be primary with respect to any insurance or self-insurance programs covering the County, its elected and appointed officers, officials, employees and agents.
- B. When such coverage is required, the Recipient's commercial general liability insurance and automobile liability insurance will include the County, its officers, officials, employees and agents as additional insured with respect to performance of services.
- C. When such coverage is required, the Recipient's commercial general liability insurance and automobile liability insurance will contain no special limitations on the scope of protection afforded to the County as an additional insured.
- D. Any failure to comply with reporting provisions of the policies will not affect coverage provided to the County, its officers, officials, employees or agents.
- E. The Recipient's insurance will apply separately to each insured against whom claim is made or suit is brought, subject to the limits of the insurer's liability.
- F. The Recipient will include all subcontractors as insureds under its policies or will furnish separate certificates and endorsements for each subcontractor. All coverage for subcontractors will be subject to all of the requirements stated in these provisions.

- G. The insurance limits mandated for any insurance coverage required by this Agreement are not intended to be an indication of exposure, nor are they limitations on indemnification.
- H. The Recipient will maintain all required policies in force from the time services commence until services are completed. Certificates, policies and endorsements scheduled to expire before completion of services will be renewed before expiration. If the Recipient's liability coverage is written as a claims-made policy, then the Recipient must evidence the purchase of an extended-reporting period or "tail" coverage for a three-year period after completion of the services.

Section 7.5 Verification of Coverage and Acceptability of Insurers.

- A. The Recipient will place insurance with insurers licensed to do business in the State of Washington and having A.M. Best Company ratings of no less than A-VII, with the exception that excess and umbrella coverage used to meet the requirements for limits of liability or gaps in coverage need not be placed with insurers or re-insurers licensed in the State of Washington.
- B. The Recipient will furnish the County with properly executed certificates of insurance or a signed policy endorsement which will clearly evidence all insurance required in this article within 10 days after the effective date of this Agreement. The certificate will, at a minimum, list limits of liability and coverage. The certificate will provide that the underlying insurance contract may not be canceled, or allowed to expire, except on 30-days' prior written notice to the County. Any certificate or endorsement limiting or negating the insurer's obligation to notify the County of cancellation or changes must be amended so as not to negate the intent of this provision.
- C. The Recipient will furnish the County with evidence that the additional-insured provision required above has been met. Acceptable forms of evidence are the endorsement pages of the policy showing the County as an additional insured.
- D. Certificates of insurance will show the certificate holder as Kitsap County and indicate "care of" the appropriate County office or department. The address of the certificate holder will be shown as the current address of the appropriate County office or department.
- E. The Recipient will request that the Washington State Department of Labor and Industries, Workers Compensation Representative, send written verification to Kitsap County that the Recipient is currently paying workers' compensation.
- F. Written notice of cancellation or change will be mailed to the County at the following address:

Carl Borg
Kitsap County Department of Human Services
Housing and Homelessness Division
345 6th Street, Suite 400
Bremerton, WA 98337
CEBorg@Kitsap.gov

Upon receipt, the Human Services Department will ensure submission of all insurance documentation to the Risk Management Division, Kitsap County Department of Administrative Services.

- G. The Recipient or its broker will provide a copy of all insurance policies specified in this Agreement upon request of the Kitsap County Risk Manager.

ARTICLE VIII – NONDISCRIMINATION AND LEGAL COMPLIANCE

Section 8.1 Nondiscrimination. The Recipient shall not discriminate against any employee or applicant for employment, or program participant or program participant applicant on account of race, color, sex, sexual orientation, religion, national origin, creed, marital status, age, Vietnam era or disabled veterans status, or the presence of any sensory, mental or physical handicap with respect to any program participation, employment upgrading, demotion, transfer, recruitment or selection for training, including apprenticeships and volunteers. This prohibition does not apply, however, to a religious corporation, association, educational institution or society with respect to the employment of individuals of a particular religion to perform work connected with the carrying on by such corporation, association, educational institution or society of its activities.

Section 8.2 Compliance with Laws. The Recipient and its officials, officers, employees, agents and subcontractors shall comply with all applicable federal, state and local laws, regulations, rules and policies. The County shall have no obligation to ensure such compliance.

Section 8.3 Religious Activities. If the Recipient is a faith-based or religious organization, it retains its independence and may continue to carry out its mission, including the definition, development, practice, and expression of its religious beliefs. Such a recipient, however, may not use any funding provided under this Agreement to support or engage in any explicitly religious activities, including activities that involve overt religious content such as worship, religious instruction, or proselytization, nor may such a recipient condition the provision of services provided pursuant to this Agreement upon a participant's engaging in any such explicitly religious activities.

ARTICLE IX – TERMINATION

Section 9.1 Termination for Loss of Funding. The County shall have the right to terminate this Agreement upon advance written notice if the funds relied upon for the Grant Award are terminated, suspended or otherwise lost or impaired in whole or in part.

Section 9.2 Termination for Convenience. Either party may terminate this Agreement for convenience upon giving the other party at least 30 days' advance written notice. In that event, the Recipient will be entitled to payment only for those expenses and costs reasonably and actually incurred prior to the effective date of the termination.

Section 9.3 Termination for Default. If either party defaults in its performance under this Agreement, the non-defaulting party may give the defaulting party written notice that it has 30 days in which to cure the default. If the default is not cured within 30 days of notice, the non-defaulting party may terminate this Agreement, unless a Plan of Correction has been entered into pursuant to Section 9.4 below. In the event of such a termination, the non-defaulting party shall have all rights and remedies available to it under law.

Section 9.4 Plan of Correction. In the event the County gives the Recipient written notice to cure pursuant to Section 9.3 above, the parties may enter into a plan of correction for curing the default pursuant to the process established in **Exhibit C: Plan of Correction**, if requested by the County. The County shall have the sole discretion to request and enter into a Plan of Correction. If a Plan of Correction is entered into, the 30 day period in which to cure the default may be stayed pursuant to the terms of the Plan of Correction. Should the Recipient not comply with the terms of the Plan of Correction, this Agreement (the Grant Agreement) may be immediately terminated by the County.

ARTICLE X – MISCELLANEOUS

Section 10.1 Permissible-Use Warranty. The Recipient warrants that its planned and actual uses of the Grant Award constitute permissible uses for affordable housing for all surcharge

funds as established by **RCW 36.22.178** or homeless housing surcharge funds as established by **RCW 36.22.179** and **RCW 36.22.1791**. This section shall survive the expiration or termination of this Agreement.

Section 10.2 Organizational-Status Warranty. The Recipient warrants that it is duly organized, existing and in good standing under the laws of the State of Washington.

Section 10.3 Relationship of Parties. This Agreement, and the parties' and the County's activities under it, shall not be construed as creating any kind of partnership or joint venture, nor shall it be construed as creating any kind of independent contractor, agency or employment relationship between the parties or the County.

Section 10.4 No Third-Party Rights. This Agreement is entered into by the parties solely for their own benefit and it creates or grants no rights of any kind to any other party.

Section 10.5 Assignment. The Recipient shall not assign any of its rights or delegate any of its duties under this Agreement without the prior express written consent of the County, which may be granted or refused in the County's sole discretion.

Section 10.6 Choice of Law; Venue; Jurisdiction. This Agreement shall be governed by the laws of the State of Washington. In the event of a legal proceeding, venue shall be only in the court of competent jurisdiction in Kitsap County. Each party hereby consents to the personal jurisdiction of the courts of the State of Washington, County of Kitsap. This section shall survive the expiration or termination of this Agreement.

Section 10.7 Waiver. No term or condition of this Agreement shall be deemed waived unless such waiver is expressly agreed to in writing by the party granting the waiver. In addition, waiver of any breach of this Agreement shall not be deemed a waiver of any prior or subsequent breach.

Section 10.8 Amendment. This Agreement can only be amended in writing, and only upon execution by both parties.

Section 10.9 Entire Agreement. The parties acknowledge that this Agreement is the complete expression of their agreement regarding the subject matter of this Agreement. Any oral or written representations or understandings not incorporated into this Agreement are specifically excluded.

Section 10.10 Headings. The headings in this Agreement are for convenience only and shall not be deemed to affect the meaning of its provisions.

Section 10.11 Severability. If any provision of this Agreement is held by a court of competent jurisdiction to be invalid, such invalidity shall not affect the validity of the remaining provisions that can be given effect without the invalid provision, provided that the underlying intent of the parties can still be given effect.

Section 10.12 Signature Authority. Each person signing this Agreement on behalf of a party warrants that he or she has full authority to sign this Agreement on that party's behalf.

Section 10.13 Counterparts. This Agreement may be executed in counterparts, each of which shall be deemed an original and all of which together shall be deemed one agreement. Each counterpart may be executed and delivered by facsimile to the other party.

Section 10.14 Exhibits. The following exhibits are incorporated into this Agreement by reference:

- (a) Exhibit A: Statement of Work and Project Timeline
- (b) Exhibit B: Budget
- (c) Exhibit C: Plan of Correction

(d) Exhibit D: Certification Regarding Debarment, Suspension, and Other Responsibility Matters

(e) Exhibit E: Certification Regarding Lobbying

This contract is effective January 1, 2025.

DATED this 22 day December, 2025.

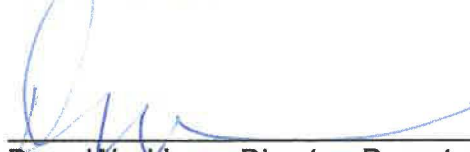
**KITSAP ANIMAL RESCUE &
EDUCATION**



Dianna Canafax, CPDT-KA; KPA-CTP,
Executive Director

DATED this 26 day December, 2025.

KITSAP COUNTY



Doug Washburn, Director, Department of
Human Services

Approved as to form by the Prosecuting Attorney's Office

N/A

Kitsap County Face Sheet

For Sub-recipient Contracts Using Federal Awards

CFR 200.332 Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the information provided below. A pass-through entity must provide the best available information when some of the information below is unavailable. A pass-through entity must provide unavailable information when it is obtained. Required information includes:

(Fill in)

Subrecipient's unique entity identifier:

Federal Award Identification Number (FAIN):

Federal Revenue Award Date:

Subaward Period of Performance Start and End Date:

Check to verify the information is in contract:

- ☐ Subrecipient's name (must match the name associated with its unique entity identifier):
- ☐ Federal award identification:
- ☐ Subaward Budget Period Start and End Date:
- ☐ Amount of Federal Funds Obligated in the subaward:
- ☐ Amount of Federal Funds Obligated to the sub by the pass-through entity, including the current financial obligation:
- ☐ Total Amount of the Federal Award committed to the subrecipient by the pass-through entity:
- ☐ Federal award project description, as required by the Federal Funding Accountability and Transparency Act (FFATA):
- ☐ Name of the Federal agency, pass-through entity, and contact information for awarding official of the pass-through entity:
- ☐ Dollar amount made available under each Federal award and the Assistance Listings Number at the time of disbursement:
- ☐ Indirect cost rate for the Federal award (including if the de minimis rate is used in accordance with § 200.414):

EXHIBIT A: STATEMENT OF WORK AND PROJECT TIMELINE

I. STATEMENT OF WORK

Grant funds to Kitsap Animal Rescue & Education (KARE), for Co-Sheltering Pet Assessment Program for allowable Program Operations costs for the contract period.

Funds are to be used solely for the identified purposes and in the manner described in this contract.

Recipient must comply with the Housing and Homelessness Grant Program Guidelines and all updates to the Guidelines during the grant period.

Recipient must be a Partner Agency with the Housing Solutions Center of Kitsap County (Kitsap's coordinated entry program), and coordinate waiting list and provision of housing and services through the Housing Solutions Center, as appropriate for the housing intervention. Recipient must abide by the Housing Solutions Center Partner Agency Guiding Principles pertaining to standards of services for clients.

Scope of Work

The following comprise the elements of the scope of work, including specific requirements. Co-Sheltering Pet Assessment Program to be operated as an Other Homeless Services program, meeting the following criteria as defined below:

- **Other Homeless Services**
 - Can include other services and assistance to households experiencing homelessness that directly contribute to their attaining and maintaining shelter and/or stable housing

Kitsap Animal Rescue Education's Co-Sheltering Pet Assessment Program at the Pacific Building Shelter's Pet Care Center will provide supportive services for potential Pacific Building shelter guests who have pets and all guests with pets in the facility, including:

- Animal case management/intake review
- Pet assessment for behavioral, medical, and dental needs
- Guest assistance for scheduling pet grooming and vet appointments for vaccinations and medical interventions
- Pet supplies: food, pet ID's, other
- Pet training certificates
- Temporary pet placements (foster or adoption) to assist and support guests when they are admitted for inpatient care in a hospital, mental health center, or rehab facility

The following are additional requirements of the contractor:

- **Coordinated Entry Referrals:** Work with the Coordinated Entry Program to ensure that they have updated information about the program and can make appropriate referrals.
- **Coordination with other Agencies:** Participate in the monthly meetings of the Kitsap Housing and Homelessness Coalition. Actively coordinate additional meetings as needed with other agencies that provide social services to provide the most comprehensive and seamless provision of care for clients as possible.
- **Non-Discrimination:** Ensure equal access for people experiencing homelessness regardless of race, national origin, gender identity, sexual orientation, marital status, age, veteran or military status, disability, or the use of an assistance animal. Projects designed to serve families with children experiencing homelessness must ensure equal access regardless of family composition and regardless of the age of a minor child. Projects that operate gender segregated

facilities must allow the use of facilities consistent with the person's gender identity or expression.

- **Religious Activities:** No funding provided through this grant may be used to support or engage in any explicitly religious activities, including activities that involve overt religious content such as worship, religious instruction, or proselytization, nor may the provision of services provided be conditioned upon a program participant's engaging in any such explicitly religious activities.
- **Complaint Process:** Have a written complaint/grievance policy approved by the agency's Board of Directors, provide information about the complaint/grievance process to clients upon their enrollment in the program, and ensure that complaint forms are readily available to clients in the program. Ensure that the complaint/grievance policy meets all minimum requirements as indicated in the corresponding Grant Guidelines.

Required Program Performance Measures and Targets:

Local Performance Targets are established through a variety of methods, including the associated RFP or NOFA, the Program Application and the Contract Information Sheet.

Local Performance Targets

Performance Measure	Contract Performance Target
Number of Households Served Annually	100
Number of Unsheltered* Households Served Annually	70

**Unsheltered Households: Households entering from place not meant for habitation or fleeing DV*

EXHIBIT B: BUDGET

Contractor: Kitsap Animal Rescue & Education – Co-Sheltering Pet Assessment

Contract Number: KC-299-25

Time Period: January 1, 2025 – December 31, 2025

Cost Category	Fund Source	Previous Budget	Amendment Changes this Contract	Current Budget
Program Operations	Homeless Housing Grant Program (HHGP): 1131	N/A	N/A	\$20,000.00
Budget Total		N/A	N/A	\$20,000.00
CONTRACT TOTAL				\$20,000.00

Line-item changes must be requested in writing and require Kitsap County approval.

Please refer to the KCHHD Grant Guidelines for details on the amendment request deadline and process.

- Reimbursement requests/invoices must be submitted through the Housing and Homelessness Division reimbursement request process.

EXHIBIT C: PLAN OF CORRECTION

Referred to as “HOUSING AND HOMELESSNESS DIVISION COMPLAINT POLICY AND PROCEDURE” in the Grant Guidelines.

The Kitsap County Housing and Homelessness Division (“the County”) regularly monitors contracts with agencies, including periodic site visits, typically resolving administrative contract issues.

Complaints to the County

Sometimes complaints are made directly to the County. Whether or not the County takes action in a given instance will be at the sole discretion of the County and the County has the right, but not the duty or obligation, to take action.

In general, complaints about agencies contracted with the Housing and Homelessness Division that are submitted to Kitsap County or forwarded from a provider will be sent to the Kitsap County Housing and Homelessness Division Manager (hereafter “County Manager”).

Upon receiving a complaint, the County Manager may attempt to get the complaint in writing if it is not already in that form.

The County Manager will forward the complaint or a summary of the complaint to the Agency for their information, redacting personally identifying information if the complainant does not wish to be known to the Agency.

The County Manager will record and track complaints to determine if multiple complaints about an Agency are forming a pattern of concern or if a complaint is of a nature to warrant further action. Further action may include requesting a response to the complaint from the Agency and/or initiating a Plan of Correction.

The County will determine when a Plan of Correction process should be undertaken with the Agency as follows:

Developing Findings

- a. The County Manager will notify the Agency in writing that there is concern about a pattern of complaints, send a brief summary of the complaints, and request a meeting regarding the complaints. The County Manager will request that the Agency designate an Agency representative who is not involved in the complaints to participate in this process.
- b. At the meeting, the County Manager will discuss the complaints with the Agency representative and gather any additional information about the situation.
- c. The County Manager will send a summary of findings to the Agency along with next steps.

Plan of Corrections Process

- d. If the Findings indicate a pattern of concern, then the Plan of Correction process will be initiated.
- e. The County Manager will send a list of Findings, a Plan of Correction template, and deadline for the Agency response to the Agency. If the findings involve the Agency Director, then the information will be sent to the Board Chair. The County Manager will be available to answer Agency questions during this process.
- f. The Agency will be required to submit a Plan of Correction to the County Manager for approval by the deadline provided.

- g. The County Manager has the authority to accept the Plan of Correction or send it back to the Agency for further work.
- h. Once a Plan of Correction has been approved by the County Manager, they will call a meeting of the Agency's representative to review the Agency's proposed Plan.
- i. Monitoring meetings will be held on a regular basis and will include the County Manager and the Agency representative(s) to review progress on the Plan. Coordination of these meetings, assessment of progress, and milestone completion will be the responsibility of the County Manager.
- j. When the County Manager determines that the appropriate milestones have been met and the Plan of Correction is complete, they will inform the Agency's in writing.
- k. If the Agency fails to cooperate with the Plan of Correction process or fails to complete the Plan of Correction in a timely manner, the County will consider taking further action, such as withholding grant funding until the Plan is completed or invoking a contract termination.

EXHIBIT D: CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

Primary Covered Transactions 45 CFR 76

1. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principles:
 - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
 - b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connections with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement, or receiving stolen property;
 - c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph 1.b. of this certification; and
 - d. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
2. Where the prospective primary participants are unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

This Certification is executed by the person(s) signing below who warrant they have authority to execute this Certification.

CONTRACTOR:

Name: Darlene Camp

Title: Co-Founder, Director

Date: 12/22/25

EXHIBIT E: CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and believe, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Kitsap Animal Rescue + Education
Contractor Organization

Dickson Canby

Signature of Certifying Official

12/22/25

Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/25/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Callis & Associates, Inc. 802 East 1st Street, Ste 3 Port Angeles WA 98362		CONTACT NAME: Kayla Furford PHONE (A/C, No, Ext): (360) 452-2314 FAX (A/C, No): (360) 452-1701 E-MAIL ADDRESS: certificate@callisinsurance.com	
INSURED Kitsap Animal Rescue & Education, DBA: KARE PO Box 994 Silverdale WA 98383		INSURER(S) AFFORDING COVERAGE INSURER A: Scottsdale Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2521811772 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CPS8164156	03/04/2025	03/04/2026	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000						
	MED EXP (Any one person) \$ 5,000						
	PERSONAL & ADV INJURY \$ 1,000,000						
	GENERAL AGGREGATE \$ 2,000,000						
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Evidence Only. Certificate holder is an additional insured with respects to the General Liability where required by written contract & provided only by the terms of form ASICGL00280818. Refer to policy(s) for all applicable terms, conditions, endorsements and exclusions.

CERTIFICATE HOLDER

CANCELLATION

Co-Sheiter 4459 SE Mile Hill Dr. Port Orchard WA 98366	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 AM STANDARD TIME)	NAMED INSURED	AGENT NO.
01-C-PK-P20099641-0	02/27/2024	Kitsap Animal Rescue & Education	0000002058

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERICAL GENERAL LIABILITY COVERAGE PART

With respect to this endorsement, **SECTION II—WHO IS AN INSURED** is amended to include as an additional insured any person or organization whom you are required to add as an additional insured on this policy under a written contract, written agreement or written permit which must be:

- a. Currently in effect or becoming effective during the term of the policy; and
- b. Executed prior to the “bodily injury,” “property damage,” or “personal and advertising injury.”

The insurance provided to these additional insureds is limited as follows:

1. That person or organization is an additional insured only with respect to liability for “bodily injury,” “property damage” or “personal and advertising injury” caused, in whole or in part, by:
 - a. Your acts or omissions; or
 - b. The acts or omissions of those acting on your behalf.

A person’s or organization’s status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

2. With respect to the insurance afforded to these additional insureds, the following exclusions are added to item 2. Exclusions of **SECTION I— COVERAGES**:

This insurance does not apply to “bodily injury,” “property damage” or “personal and advertising injury” occurring after:

- a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 - b. That portion of “your work” out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
3. The limits of insurance applicable to the additional insured are those specified in the written contract, written agreement or written permit or in the Declarations for this policy, whichever is less. These limits of insurance are inclusive of, and not in addition to, the Limits of Insurance shown in the Declarations for this policy.
 4. Coverage is not provided for “bodily injury,” “property damage,” or “personal and advertising injury” arising out of the sole negligence of the additional insured.
 5. The insurance provided to the additional insured does not apply to “bodily injury,” “property damage,” or “personal and advertising injury” arising out of an architect’s, engineer’s or surveyor’s rendering of or failure to render any professional services including:
 - a. The preparing, approving or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
 - b. Supervisory, inspection, architectural or engineering activities.

6. Any coverage provided hereunder will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless a written contract specifically requires that this insurance be primary.

When this insurance is excess, we will have no duty under SECTION I—COVERAGES to defend the additional insured against any “suit” if any other insurer has a duty to defend the additional insured against that “suit.” If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insured’s rights against all those other insurers.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

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AUTHORIZED REPRESENTATIVE / DATE

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) KITSAP ANIMAL RESCUE & EDUCATION (KARE)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. PO BOX 994 6 City, state, and ZIP code SILVERDALE, WA 98383 7 List account number(s) here (optional)	Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
			-				-	
or								
Employer identification number								
9	1		-	1	6	3	3	4 5 7

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Cathy Hayes</i>	Sec/TRES	Date <i>3-1-2025</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



Home Search Data Bank Data Services He

Search

All Words ▼

e.g. 1606N020Q02

Filter By

Keyword Search

For more information on how to use our keyword search, visit our [help guide](#)

Simple Search

Search Editor

☐ Any Words *i*

☒ All Words *i*

☐ Exact Phrase *i*

e.g. 1606N020Q02

debarment x

Federal Organizations

Kitsap Animal Rescue & Education x ▲

No results found ^

☒ Active

☐ Inactive

As of 06/02/2025



Safety & Health

Claims

Patient Care

Insurance

Workers' Rights

Licensing & Permits

Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name: Principal: From: To:

WA UBI Number: RCW:

License Number: Penalty Due: Wage Due:

[Download all debarment data](#)

Show <div>25</div> per page	Showing 0 records										First	Previous	Next	Last
Company Name	UBI	License	Principals	Related Business	Status	RCW	Debar Begins	Debar Ends	Penalty Due	Wages Due				
There are no records that match your search criteria.														
Show <div>25</div> per page	Showing 0 records										First	Previous	Next	Last

As of 06/02/2025