

Grant Number: TN0452L4J022300

Period of Performance: 3/1/2025 to 2/28/2026

Recipient Tax ID Number: 62-6000326

Replacement Recipient Tax ID: 93-3381927

Recipient UEI Number: FJEHNN9JALF8

Replacement Recipient UEI Number: FW8QWC5G7781

AMENDMENT TO THE CONTINUUM OF CARE GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and **The City of Knoxville**, (the Recipient), of **400 Main Street SW, Knoxville, TN 37902** and **Knoxville-Knox County Office of Housing Stability** (the Replacement Recipient), of **405 Dante Road, Knoxville, TN 37918**.

RECITALS

1. HUD and the Recipient entered into a Grant Agreement signed by Recipient on _____ and HUD on **6/28/2024**, having Grant No. **TN0452L4J022300** (the Grant Agreement).
2. The Recipient will no longer continue to be the Recipient of the Grant Agreement because the Governing board voted to transfer.
3. The Replacement Recipient has submitted evidence acceptable to HUD that the Replacement Recipient is eligible to be a recipient of a COC program grant *and meets the capacity criteria in the Notice Of Funding Opportunity under which the grant was awarded.*
4. The Replacement Recipient has submitted to HUD all required Application documents and certifications; and all required Technical Submission documents, including certifications, assurances, information, and documentation required to meet any conditions, which HUD has approved.
5. HUD has determined the Replacement Recipient should assume the obligations of Recipient for the remainder of the term of the Grant Agreement.
6. The parties are desirous of amending the Grant Agreement to change the recipient, so that as of the effective date of this Amendment to the Grant Agreement, Replacement Recipient will be bound by the Grant Agreement in place of Recipient.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

1. The Recipient is hereby removed as recipient and replaced with the Replacement Recipient, and Replacement Recipient agrees to be bound by the Grant Agreement in place of Recipient.
2. The definition of the term "Application" is amended to include all certifications and documents submitted by the Replacement Recipient to HUD, on the basis of which HUD approved replacing the Recipient with the Replacement Recipient.
3. Notices to the Replacement Recipient shall be directed to **Knoxville-Knox County Office of Housing Stability, 405 Dante Road, Knoxville, TN 37918.**
4. The Replacement Recipient agrees to complete the project as proposed in the Recipient's application.

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.

The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development**

BY: _____
 (Signature)

(Typed Name and Title)

(Date)

RECIPIENT

 City of Knoxville
 (Name of Organization)

BY: _____
 (Signature of Authorized Official)

(Typed Name and Title of Authorized Official)
 Indya Kincannon, Mayor

Date: _____

APPROVED AS TO FORM:

FUNDS CERTIFIED:

CHARLES W. SWANSON, Law Director

BOYCE H. EVANS, Finance Director

(Date)

REPLACEMENT RECIPIENT

Knoxville-Knox County Office of Housing Stability
(Name of Organization)

BY:

(Signature of Authorized Official)

Erin Read, Executive Director

(Typed Name and Title of Authorized Official)

(Date)