


**NOTICE OF FEDERAL INTEREST
IN REAL PROPERTY**

On **September 1, 2021**, the U.S. Department of Health and Human Services Health Resources Services Administration (HRSA) awarded **Grant No. C8ECS44535** to the **Pinellas County Board of County Commissioners (Board)**. The grant provides Federal funds for **the construction expansion of the health clinic with the building address of 14808 49th St N Clearwater**, which is located on the property below in Pinellas County, State of Florida.

PINELLAS GROVES NE 1/4, S 491.89FT OF LOT 4 LESS RD R/W ON E TOGETHER WITH S 656.55FT OF LOT 5

The Notice of Award for this grant include conditions on use of the aforementioned property and provides for a continuing Federal interest in the property. Specifically, the property may not be (1) used for any purpose inconsistent with the statute and any program regulations governing the award under which the property was acquired; (2) mortgaged or otherwise used as collateral without the written permission of the Associate Administrator, Office of Federal Assistance Management (OFAM), Health Resources and Services Administration (HRSA), or designee; or (3) sold or transferred to another property without the written permission of Associate Administrator, Office of Federal Assistance Management (OFAM), Health Resources Administration (HRSA), or designee. These conditions are in accordance with the statutory provisions set forth in Title II of the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019. Additional Supplemental Appropriations for Disaster Relief Act, 2019 (PL 11620) Title XVIII, and section 330 of the Public Health Service Act, as amended (42 U.S.C. 254b), the HHS Grants Policy Statement, and other terms and conditions of award.

These grant conditions and requirements cannot be nullified or voided through a transfer of ownership. Therefore, advanced notice of any proposed change in usage or ownership must be provided to the Health Resources and Services Administration (HRSA), Office of Federal Assistance Management (OFAM).

Signature: 
Printed Name: Barry A. Burton
Title: County Administrator
Date: January 4, 2022

APPROVED AS TO FORM
By: Matthew Tolnay
Office of the County Attorney

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this ____ day of _____, 2021, by Barry Burton.

Signature of Notary Public