

City Council Meeting

Agenda Item

Data Sheet

Meeting Date: October 6, 2025

Topic:

Approve Resolution No. 2025-46, a Resolution of the City Council of the City of Tomball, Texas, Adopting Policies in Connection with the City of Tomball, Texas Participation in the General Land Office Community Development Block Grant – Disaster Recovery Program (CDBG-DR) Contract Number 25-141-001-F190 and Adherence to the Regulations Described Therein.

Background:

Based on contractual requirements with the General Land Office, the City must adopt a Resolution approving the following policies and procedures:

1. Citizen Participation Plan;
2. Section 3 Policy;
3. Excessive Force Policy;
4. Section 504 Policy and Grievance Procedures; and
5. Fair Housing Policy.

The chart below depicts the required policy and/or procedure to be adopted with the corresponding statute.

Required Policies	
Citizen Participation Plan	Section 104(a) Housing and Community Development Act of 1974
Section 3 Policy	12 United States Code (U.S.C.) 1701u
Excessive Force Policy	24 Code of Federal Regulations (C.F.R.) 91.325(b)(6)
Section 504 Policy	24 C.F.R. Section 8 Section 504 of the Rehabilitation Act of 1973 Section 109 of the Housing and Community Development Act of 1974
Fair Housing Policy	Title VII of the Civil Rights Act of 1968

Exhibit A of Resolution No. 2025-46, provides the complete policies requiring adoption for adherence to the General Land Office’s requirements for grant participation.

Origination: Project Management

Recommendation:

Staff recommends approving Resolution No. 2025-46, adopting policies in connection with the City of Tomball, Texas participation in the General Land Office Community Development Block Grant – Disaster Recovery Program, Contract Number 25-141-001-F190.

Party(ies) responsible for placing this item on agenda: Meagan Mageo, Project Manager

FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____ If yes, specify Account Number: # _____

If no, funds will be transferred from account # _____ To account # _____

Signed	<u>Meagan Mageo</u>	Approved by	_____
	Staff Member		City Manager
	Date		Date