



**NYE COUNTY BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM REQUEST FORM**

Department: Finance	Meeting Date:	
Category: Timed Agenda Item - 10:00 a.m.	April 2, 2024	
Prepared by: Jessica McCutcheon, Grants Administrator	Phone: (775) 751-7091	
Presented by: Nancy Guin, Tails of Nye County	Phone: (702) 505-5679	
Action requested: (Include what, with whom, when, where, why, and terms) Presentation by Nancy Guin with Tails of Nye County regarding program status, outcome results, a budget status report and future goals pursuant to the Nye County ARPA Recovery Plan and Policy: Public Health Assistance- Mental Health Grant.		
Complete description of requested action: (Include, if applicable, background, impact, long-term commitment, existing county policy, future goals, obtained by competitive bid, accountability measures) Pursuant to the Nye County ARPA Recovery Plan and Policy each sub-grantee with approved programs shall come before the Board of Nye County Commissioners (BoCC) to present program status, outcome results, a budget status report and future goals. On February 22, 2023 the BoCC approved Tails of Nye County's request for \$87,000.00 to support a spay and neuter program.		
Recommendation:		
Financial Impact		
Cost:	Fund Name:	Fund #:
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	FY:	<input type="checkbox"/> One-Time <input type="checkbox"/> Recurring
Comments:		
Review & Approval		
Legal Review Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Legal Approval Received: <input type="checkbox"/>	Date:
Financial Review Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Submitted to Finance: <input type="checkbox"/>	Date:
Administrative Manager Review: <input checked="" type="checkbox"/>	Place on Agenda: <input checked="" type="checkbox"/>	Initials: ST

Item # 9

NYE County ARPA Recovery Plan Public Assistance Programmatic Report

**Nye County Grants
2101 E. Calvada Blvd. #200
Pahrump, NV 89048
775-751-6390; Ext 3**

Grant Period:	March 2, 2023 - March 1, 2024
Program Name:	Public Health Assistance- Mental Health
Grant Applicant #:	NYEARP-PAAO-0006
Organization Name:	Tails of Nye County
Address:	PO Box 9045 520 East Street Pahrump NV 89601

NANCY GUIN VOLUNTEER
(Presenter name and title)

3-19-24
Date

Nancy Yuen Volunteer
(Authorized Signer and title)

3-19-24
Date

1.) What measurable outcomes did you establish for this project and what indicators did you use to measure performance? To what extent did your project achieve these outcomes?

Our goal for 2023 was to spay/neuter 1500 dogs and cats. We were able to fix 1241 animals, 1107 cats and 134 dogs. We have fixed 178, spay/neuters in January and February 2024; 155 cats and 23 dogs.

2.) What, if any, challenges did you face during the project and what actions did you take to address these challenges?

We had a huge challenge getting enough low cost spay and neuter appointments for both dogs and cats. Our dog low cost spay and neuter veterinarian is no longer able to provide these services for us. We are continuing to search for a veterinarian to work at the shelter's spay and neuter clinic.

3.) What impact do you think this project has had to date? What are the lessons you learned from undertaking this project?

This project has a huge impact on the community. This project allowed us to spay/neuter pets for people that could not afford these services. Unwanted pets were eliminated. Also, we reduced the number of feral cat babies. We must reduce pet overpopulation.

4.) What will happen to the project after this grant has ended? Will project activities be sustained? Will project activities be replicated? If the project will be sustained or replicated, what other funding sources will allow this to occur? Please note your significant partners in this project and if/how you will continue to work on this activity?

If we are unable to generate substantial additional income, our TNR services are the most at risk of being reduced or eliminated. Since we are no longer able to provide low cost dog spay/neuters in Pahrump, the shelter will need to start providing these services. We will continue with grant requests and events to fund services.

5.) Over the entire project period, what were the key publications and communications activities? How were they disseminated or communicated? Products and communications activities may include articles, issue briefs, fact sheets, newsletters, survey instruments, sponsored conferences and workshops, websites, audiovisuals, and other informational resources?

Newspaper articles have been written in the local paper. We place program updates and events on Facebook and Websites. We distribute various flyers and handouts at our office and yard sales



**NYE COUNTY BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM REQUEST FORM**

Department: Planning/Code Compliance	Meeting Date:	
Category: Timed Agenda Item - 10:00 a.m.		
Prepared by: Steve Osborne		
Presented by: Brett Waggoner		
Action requested: (Include what, with whom, when, where, why, and terms)		
Hearing to show cause, discussion and deliberation to determine if there is sufficient cause to revoke Special Use Permits SU-2021-000072 and ETSU-21-82, and Cannabis Licenses CBL-23-24, CBL-23-25, CBL-23-26, and CBL-23-27; located at 2215 E. Anvil Road, Amargosa Valley, NV. Assessor's Parcel Number 019-181-02. Farm Road, LLC – Property Owner. MJ Distributing, LLC – Licensee.		
Complete description of requested action: (Include, if applicable, background, impact, long-term commitment, existing county policy, future goals, obtained by competitive bid, accountability measures)		
MJ Distributing failed to submit monthly sales payments to Nye County for October 2023, November 2023, and December 2023, as required by Nye County Code 5.32.050 and 5.32.055, and have not submitted sales documentation for January 2024.		
This Show Cause Hearing is to determine if there is sufficient cause to revoke the Special Use Permits and Cannabis Licenses (Adult Use Cultivation, Adult Use Production, Medical Cultivation and Medical Production licenses) issued to MJ Distributing.		
Recommendation:		
Financial Impact		
Cost:	Fund Name:	Fund #:
Budgeted: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	FY:	<input type="checkbox"/> One-Time <input type="checkbox"/> Recurring
Comments:		
Review & Approval		
Legal Review Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Legal Approval Received: <input type="checkbox"/>	Date:
Financial Review Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Submitted to Finance: <input type="checkbox"/>	Date:
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