Entire Application

Overview

*Did you attend one of the workshops conducted by DHS's regional fire program specialist?

No, I have not attended workshop

*Was a workshop within 2 hours drive?

Do Not Know

*Are you a member, or are you currently involved in the management, of the fire department or non-affiliated EMS organization applying for this grant with this application?

No, I am a grant writer or otherwise not affiliated with this applicant

If you answered No, please **complete** the information below. If you answered Yes, please skip the Preparer Information section.
Fields marked with an * are required.

Preparer Information

* Preparer's Name	
* Address 1	(b)(6)
Address 2	
* City	
* State	
* Zip	Need help for ZIP+4?

In the space below please list the person your organization has selected to be the primary point of contact for this grant. This should be a Chief Officer or long time member of the organization who will see this grant through completion. Reminder: if this person changes at anytime during the period of performance please update this information. Please list only phone numbers where we can get in direct contact with you.

Primary Point of Contact

* Title	Fire Chief
Prefix (check one)	N/A
* First Name	Terry
Middle Initial	A.
* Last Name	McCarthy
* Business Phone (e.g. 123-456-7890)	904-964-2673 Ext.
* Home Phone (e.g. 123-456-7890)	(b)(6) Ext.
Mobile Phone/Pager (e.g. 123-456-7890)	
Fax (e.g. 123-456-7890)	904-964-2647
* Email (e.g. user@xyz.org)	(b)(6) @bradfordcountyfl.gov

Contact Information

Alternate Contact Information Number 1

* Title	Manager
Prefix	N/A
* First Name	Anthony
Middle Initial	J
* Last Name	Apatafore
* Business Phone	904-964-2673 Ext.
*Home Phone	(b)(6) Ext.
Mobile Phone/Pager	
Fax	904-964-2673
*Email	(b)(6) @embarqmail.com

Alternate Contact Information Number 2

* Title	Chief
Prefix	N/A
* First Name	Buddy
Middle Initial	J
* Last Name	Dugger
* Business Phone	904-259-3331 Ext.
*Home Phone	(b)(6) Ext.
Mobile Phone/Pager	
Fax	904-259-8421
*Email	(b)(6) @cityofmacclenny.com

Applicant Information

EMW-2011-FV-04462
Originally submitted on 09/23/2011 by (b)(6) (Userid: (b)(6)

Contact Information:

Address: 21412 NW SR 16
City: Starke
State: Florida
Zip: 32901
Day Phone: 904
Evening Ph (b)(6)
Cell P (b)(6)
Email: (b)(6) @bradfordcountyfl.gov

* Organization Name	Heilbronn Springs Voluneer Fire Department
* Type of Applicant	Fire Department/Fire District
* Type of Jurisdiction Served	County
If other, please enter the type of Jurisdiction	Bradford
* Employer Identification Number	XX-XXXXXXX
* What is your organization's DUNS Number?	154191511 (call 1-866-705-5711 to get a DUNS number)
Headquarters or Main Station Physical Address	
* Physical Address 1	21412 NW State Road 16
Physical Address 2	
* City	Starke
* State	Florida
* Zip	32091 - 2110 Need help for ZIP+4?
Mailing Address	
* Mailing Address 1	21412 NW State Road 16
Mailing Address 2	
* City	Starke
* State	Florida
* Zip	32091 - 2110 Need help for ZIP+4?
* Please describe all grants that you have received from DHS including any AFG grant received from DHS or FEMA, for example, 2002 AFG grant for vehicle or 2003 ODP grant for exercises. (Enter "N/A" if Not Applicable)	N/A
Account Information	
* Type of bank account	Checking
* Bank routing number - 9 digit number on the bottom left hand corner of your check	XXXXXXXXX
*Your account number	XXXXXXX
Additional Information	
* For this fiscal year (Federal) is your	

organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request?	No
* If awarded the AFG grant, will your organization expend more than $500,000 in Federal funds during your organization's fiscal year in which this AFG grant was awarded?	No
* Is the applicant delinquent on any Federal debt?	No
If you answered yes to any of the additional questions above, please provide an explanation in the space provided below:	

Department Characteristics (Part I)

* Are you a member of a Federal Fire Department or contracted by the Federal government and solely responsible for suppression of fires on Federal property?	No
* What kind of organization do you represent?	All volunteer
If you answered combination, above, what is the percentage of career members in your organization?	%
If you answered volunteer or combination or paid on-call, how many of your volunteer Firefighters are paid members from another career department?	2
* What type of community does your organization serve?	Rural
* What is the square mileage of your first-due response area?	75
* What percentage of your response area is protected by hydrants?	2 %
* In what county/parish is your organization physically located? If you have more than one station, in what county/parish is your main station located?	Bradford
* Does your organization protect critical infrastructure of the state?	Yes
* How much of your jurisdiction's land use is for agriculture, wild land, open space, or undeveloped properties?	45 %
* What percentage of your jurisdiction's land use is for commercial, industrial, or institutional purposes?	20 %
* What percentage of your jurisdiction's land is used for residential purposes?	35 %
* How many occupied structures (commercial, industrial, residential, or institutional) in your jurisdiction are more than three stories tall?	0
* What is the permanent resident population of your Primary/First-Due Response Area or jurisdiction served?	28520
* Do you have a seasonal increase in population?	No
* How many active firefighters does your department have who perform firefighting duties?	20
* How many ALS level trained members do you have in your department/organization?	2
* How many stations are operated by your organization?	1
* Is your department compliant to your local Emergency Management standard for the National Incident Management System (NIMS)?	Yes
* Do you currently report to the National Fire Incident Reporting System (NFIRS)?	Yes
If you answered yes above, please enter your	

FDIN/FDID	45051
* What percent of your active firefighters are trained to the level of Firefighter I?	100 %
* What percent of your active firefighters are trained to the level of Firefighter II?	100 %
If you answered less than 100% to either question above, are you requesting for training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001?	No
If you indicated that less than 100% of your firefighters are trained to the Firefighter II level and you are not asking for training funds in this application, please describe in the text box to the right your training program and your plans to bring your membership up to Firefighter II.	
* What services does your organization provide?	
* Please describe your organization and/or community that you serve. We recommend typing your response in a Word Document outside of this application, then copying and pasting it into the written field. There is a 4000 character limit.	Heilbronn Springs Volunteer Fire Department is located in Bradford County, Florida. Response area is all of Bradford County along with Three Florida State Prisons with over 3,500 inmates within 3 miles of the Fire Station. Much of Bradford County is rural farm, timber lands, residential and some businesses. Over 50% of the county is dirt roads and wildland. Bradford County has been declared a financial distress county within Florida by the Governor. Response area includes several major highways crossing Bradford County (US-301, SR-16 and SR-100) these major roadway have heavy commercial traffic and hazardous materials carried down them 24 hours per day. HSVFD is staffed by all volunteers who meet the training requirements of The Fire State Fire Marshal. HSVFD operates off a total budget of $68,000.00 per year with 70% funded from Bradford County Government and 30% from fund drive.

Fire Department Characteristics (Part II)

	2010	2009	2008
* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three years?	0	0	0
* What is the total number of fire-related civilian injuries in your jurisdiction over the last three years?	0	0	0
* What is the total number of line of duty member fatalities in your jurisdiction over the last three years?	0	0	0
* What is the total number of line of duty member injuries in your jurisdiction over the last three years?	0	0	0
* Over the last three years, what was your organization's average operating budget?		68500	
* What percentage of your TOTAL budget is dedicated to personnel costs (salary, overtime and fringe benefits)?		0 %	

* What percentage of your annual operating budget is derived from:
Enter numbers only, percentages must sum up to 100%

Taxes?	70 %
EMS Billing?	0 %
Grants?	0 %
Donations?	30 %
Fund drives?	0 %
Fee for Service?	0 %
Other?	0 %

If you entered a value into Other field (other than 0), please explain

* Please describe your organization's need for Federal financial assistance. We recommend typing your response in a Word Document outside of this application, then copying and pasting it into the written field. There is a 4000 character limit.

The Heilbronn Springs Volunteer Fire Department is 70% funded by Bradford County Government, with HSVFD doing fund drives for the remainder of budget. The total budget for HSVFD is $68,000.00; this includes insurance, fuel, maintenance of station, equipment, vehicles, electrical power, communications, fuel and total operation of the department. Bradford County has been declared a Financial Distressed County by the Governor of the State of Florida. Unemployment within the State is at 11% and the county does not have funds for the purchase of fire apparatus. The engine requires costly repairs to keep the unit in service, requiring the HSVFD to use funds for day to day operations and PPV for firefighters to maintain the truck in working ordered. Several times during the years the truck has been out of service, requiring firefighters to fight structure fires with a brush truck and tanker only. Branford County and HSVFD does have the funds to meet the Local Share of the grant but not the total cost for purchase of the truck. Without this grant we would not be able to be purchased a truck and it would

leave the department with a truck not in NFPA compliance of 1901 or 1500, or a truck reliable to respond without mechanical problems and safety concerns.

* How many vehicles does your organization have in each of the types or class of vehicle listed below? **You must include vehicles that are leased or on long-term loan as well as any vehicles that have been ordered or otherwise currently under contract for purchase or lease by your organization but not yet in your possession.** (Enter numbers only and enter 0 if you do not have any of the vehicles below.)

Type or Class of Vehicle	Total Number of Front line Apparatus	Total Number of Reserve Apparatus	Total Number of Seated Riding Positions
Engines or Pumpers (pumping capacity of 750 gpm or greater and water capacity of 300 gallons or more): Pumper, Pumper/Tanker, Rescue/Pumper, Foam Pumper, CAFS Pumper, Quint (Aerial device of less than 76 feet), Type I or Type II Engine Urban Interface	1	0	5
Ambulances for transport and/or emergency response	0	0	0
Tankers or Tenders (pumping capacity of less than 750 gallons per minute (gpm) and water capacity of 1,000 gallons or more):	1	0	2
Aerial Apparatus: Aerial Ladder Truck, Telescoping, Articulating, Ladder Towers, Platform, Tiller Ladder Truck, Quint (Aerial device of 76 feet or greater)	0	0	0
Brush/Quick attack (pumping capacity of less than 750 gpm and water carrying capacity of at least 300 gallons): Brush Truck, Patrol Unit (Pick up w/ Skid Unit), Quick Attack Unit, Mini-Pumper, Type III Engine, Type IV Engine, Type V Engine, Type VI Engine, Type VII Engine	1	0	2
Rescue Vehicles: Rescue Squad, Rescue (Light, Medium, Heavy), Technical Rescue Vehicle, Hazardous Materials Unit	1	0	2
Other: EMS Chase Vehicle, Air/Light Unit, Rehab Units, Bomb Unit, Technical Support (Command, Operational Support/Supply), Salvage Truck, ARFF (Aircraft Rescue Firefighting), Command/Mobile Communications Vehicle, Other Vehicle	0	0	0

Department Call Volume

	2010	2009	2008
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, enter 0)			
Working Structural Fires	48	44	62
False Alarms/Good Intent Calls	22	26	27
Vehicle Fires	8	4	12
Vegetation Fires	67	60	60
EMS-BLS Response Calls	501	462	302
EMS-ALS Response Calls	0	0	0
EMS-BLS Scheduled Transports	0	0	0
EMS-ALS Scheduled Transports	0	0	0
Vehicle Accidents w/o Extrication	63	68	47
Vehicle Extrications	8	4	10
Other Rescue	0	0	0
Hazardous Condition/Materials Calls	3	6	0
Service Calls	77	113	73
Other Calls and Incidents	8	6	73
Total	805	793	666
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, enter 0)			
What is the total acreage of all vegetation fires?	1000	220	250
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, enter 0)			
In a particular year, how many times does your organization receive mutual/automatic aid?	48	40	46
In a particular year, how many times does your organization provide mutual/automatic aid? (Please indicate the number of times your department provides or receives mutual aid. Do not include first-due responses claimed above.)	221	123	64
Out of the mutual/automatic aid responses, how many were structure fires?	39	36	53

Request Information

1. Select a program for which you are applying. If you are interested in applying under both Vehicle Acquisition and Operations and Safety, and/or regional application **you will need to submit separate applications.**

Program Name

Vehicle Acquisition

2. Will this grant benefit more than one organization?

No

If you answered Yes to Question 2 above, please explain.

3. Enter Grant-writing fee associated with the preparation of this request. Enter 0 if there is no fee.

$0

Request Details

The activities for program **Vehicle Acquisition** are listed in the table below.

Activity	Number of Entries	Total Cost	Additional Funding
Vehicle Acquisition	1	$ 359,000	$ 0

* Total Funding for all EMS requested in this application	$0 View Details
Grant-writing fee associated with the preparation of this request.	$0

Vehicle Details

*1. What type or class of vehicle will you use the grant funds to purchase?	Pumper/Engine (750 gpm or more and holds a minimum of 300 gallons or more)
Please provide further description of the item selected above or if you selected Other above, please specify.	Complaince NFPA 1901 & 1500 4 door pumper equuipped, 4 door cab, 1250 pump, 750+ tanks
*2. Cost: (whole dollar amounts only)	$ 359000
*3. Is the vehicle you propose to buy a refurbished, used or new response vehicle to meet current standards?	New (never owned before)
*4. What is the age of the vehicle being replaced?	22-25 years
*5. What is the newest (age) vehicle you currently own in the class you are purchasing?	15+ years
*6. How old is the oldest (age) vehicle you own in the class you are purchasing?	23 years
*7. What is the average age of all vehicles in your fleet?	18 years
*8. Do you have a formal driver-training program?	Yes
If not, will you be requesting funding under this application for driver training or will you obtain the appropriate training through other sources?	
If you answered NO will you develop one prior to receipt of the vehicle per the program guidance?	

*9. Is the vehicle you propose to buy:	Replacement of an existing apparatus
*10. Is the vehicle you are replacing a converted vehicle not originally designed for its current use?	Yes
*11. If awarded, will you permanently remove this substandard vehicle from service?	Yes
If you are removing a vehicle from service, describe the vehicle you plan to remove in the space provided. Please enter the type, year model & VIN number.	1988 Pierce Arrow out cab pumper converted from Navy foam engine to structural engine.
*12. How long have you owned the vehicle you are replacing?	12 Years (whole number only)
*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2010 (documented through vehicle or dispatch logs)?	800 (whole number only)
*14. If you are removing a vehicle from service, what is the mileage on the vehicle you plan to replace? (select one)	
*15. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations.	Yes
*16. Will this vehicle be used for automatic and/or mutual aid?	Both
*17. What percentage of your annual budget goes to vehicle replacement?	0 (0-100%)

Vehicle Inventory

* If your have 15 emergency response vehicles or less, list all vehicles providing the type, the age, and if the vehicle is used for patient transportation.

	Vehicle Type (possible terms: Ambulance or Other)	Age		Is the vehicle used for Transport?
1	Engine (or Pumper)	23	1000	750
2	Tanker	22	2500	500
3	Brush/Quick attack	12	200	300
4	Rescue Vehicles	5	150	200
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Firefighting Vehicle - Narrative

* Section # 1 Project Description: In the space provided below include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for including budget descriptions of the major budget items, i.e.,

personnel, equipment, contracts, etc.? *3000 characters

The Heilbronn Springs Volunteer Fire Department is located in Bradford County, Florida and protects all of Bradford County as a first or second out response fire department. Bradford County is a rural county located in rural Northeast Florida and has been declared a financial distress county by the Governor of our State with an unemployment rate of 11% for the State of Florida. Bradford County and HSVFD has several major roadways crossing our coverage area; US-301, SR-16, and SR-100. Our closest out of county mutual aid is over 45 to 60 minutes to the North from Duval or Baker County or South from the City of Gainesville Fire Department. We operate only one engine company purchased used as a foam pumper from Navy surplus equipment over 12 years ago. This engine a 1998 Pierce Arrow with open rear jump seats does not meet NPFA 1901 or 1500 standards for structural fire apparatus or firefighter safety. The department is attempting to replace this engine with a new engine meeting full NFPA 1901 & 1500 and ISO compliance. During the last few years the unit has been out of service from mechanical problems, causing firefighters to respond to structure fires with a wildland rig and tanker, increasing the danger to firefighters and public from a lack of proper fire flows, carried equipment and delayed response.
The department responses to over 800 emergency alarms yearly, with 48 being working structure fires, plus an additional 22 false fire alarms. Along with response to the rural areas of Bradford County the department is also the first response agency to Florida State Prison System located 3 miles west of our station.
We are requesting a grant to purchase a new Engine, 4 door cab, 1250 PGM fire pump, 750+ water tank, built and equipped to meet NFPA 1901, 1500 and ISO standards for a structural Class A engine. If awarded the grant the unit would be bid out per policies of the Bradford County Board of Commissioners and the State of Florida.
We have received price quotes from two Apparatus dealers Emergency One and Pierce at a cost of $359,000.00 for the equipped unit. If awarded State Law and County Ordinance would require the engine to go out for seal bids to be open and awarded by Bradford County Commission.
Budget: $359.000 Fire Act Grants with 5% funded by the Board of County Commission. There would be no additional requested funds or charges, no costs for grant writing. The Fire Department operates off a $68,000.00 per year budget with 70% funded by the county and the other 30% raised from fund drives yearly, this new truck would free up department funds for firefighter PPE from reducing the cost of vehicle repairs.

* Section # 2 Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the cost incurred? Are the costs reasonable? Provide justification for the budget items relating to the cost of the requested items. *3000 characters

The cost of this project would be $359,000.00 with 5% coming from the Bradford County Board of Commissioners. The fire department operates on a yearly budget of $68,000.00 with 70% from Bradford County and 30% raised by fire department fun drives; this budget must run the total operation of the department, including vehicle repairs, equipment maintenance, fuel, electrical power, insurance and operating supplies.. The county, community and fire department would see an increase in the response of the department, the present condition of the engine to be replaced is questionable if it will start or not for response. This unit is the only structural fire engine within 75 sq miles on the Southwest end of Bradford County. Along with farm lands, wild lands, dwelling, and businesses, this truck is the first response unit to the Florida State Prison System located several miles west from our station. Several times over the last few years this engine has been out of service requiring firefighters to respond to structural alarms with only a brush truck and tanker, while waiting over 20 to 30 minutes for another engine to respond from the north end of county during working hours of the week.
The new truck would be greatly increase safety for firefighters, allowing for them to ride within a closed 4 door cab, with seat and safety belts, air packs and other equipment safety belted in place and not loose within the cab and jump seat areas, a fire pump and truck meeting all NFPA 1901 & 1500 standards. The new truck would free up funds used for vehicle maintenance, each year the department has not be able to replace damaged equipment, nozzles, PPE, hose, or station repairs, due to saving funds for repairs we know will be required to keep this truck on the road.
If awarded this grant no additional funds would be requested for this project and the Bradford County Board of Commissions will fund the 5% required match. Bradford County has no means of increasing their budget to allow for the purchase of a new fire truck. It has been declared a financial distress county within the State of Florida. Bradford County like many other rural counties is protected by volunteer fire departments and does not have any reserve fire apparatus to place in service once one goes down, greatly endangering firefighters and public from a lack of equipment, needed fire flows and increased response times.

* Section # 3 Statement of Effect: How would this award affect the daily operations of your department (i.e., describe how frequently the equipment will be used or what the benefits will provide the personnel in your department)? How would this award affect your department's ability to protect lives and property in your community? *3000 characters

If awarded grant new engine would be used on all alarms received, it would be the only engine within department. New truck would reduce money being spent on repairs freeing it up for needed PPE and other equipment. It will make for safer working conditions for firefighter from a fully compliant NFPA 1901 & 1500 engine. New engine would decrease response times enable all firefighters on board to ride within a full cab behind closed doors and within seats with seat belts. Reduces the chance of no response from engine from mechanical problems.

* Section # 4 In the space provided below include details regarding your organization's request not covered in any other section. *3000 characters

It cannot be over stated, the present engine is the only engine our department owns and there are no funds within the department or County of Bradford for the purchase of a new engine. Our present engine was purchased used from the Department of Navy and was a foam pumper, we made into a structural engine, while serving us for almost 12 years, the truck is unsafe, and can no longer be counted on to respond to alarms. Several times within the past year we have had to count on our brush truck and tanker for structure response with a very limited fire flow from the brush truck acting as an attack structure engine company. This grant will not only assist our department but the County of Bradford as a hole in professional timely response if fire fighting forces safety equipped..

Budget

Budget Object Class	
a. Personnel	$ 0
b. Fringe Benefits	$ 0
c. Travel	$ 0
d. Equipment	$ 359,000
e. Supplies	$ 0
f. Contractual	$ 0
g. Construction	$ 0
h. Other	$ 0
i. Indirect Charges	$ 0
j. State Taxes	$ 0
Federal and Applicant Share	
Federal Share	$ 323,100
Applicant Share	$ 35,900
Federal Rate Sharing (%)	90/10 (Administratively changed)
* Non-Federal Resources *(The combined Non-Federal Resources must equal the Applicant Share of $ 35,900)*	
a. Applicant	$ 35,900
b. State	$ 0
c. Local	$ 0
d. Other Sources	$ 0

If you entered a value in Other Sources other than zero (0), include your explanation below. You can use this space to provide information on the project, cost share match, or if you have an indirect cost agreement with a federal agency.

Total Budget	**$ 359,000**

Narrative Statement

For 2011, the Narrative section of the AFG application has been modified. You will enter individual narratives for the Project Description, Cost-Benefit, Statement of Effect, and Additional Information in the Request Details section for each Activity for which you are requesting funds. Please return to the Request Details section for further instructions. You will address the Financial Need in Applicant Characteristics II section of the application. We recommend that you type each response in a Word Document outside of the grant application and then copy and paste it into the spaces provided within the application.

Assurances and Certifications

FEMA Form SF 424B

You must read and sign these assurances. These documents contain the Federal requirements attached to all Federal grants including the right of the Federal government to review the grant activity. You should read over the documents to become aware of the requirements. The Assurances and Certifications must be read, signed, and submitted as a part of the application.

Note: Fields marked with an * are required.

O.M.B Control Number 4040-0007

Assurances Non-Construction Programs

Note: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

Signed by **Terry McCarthy** on **09/23/2011**

Form 20-16C

You must read and sign these assurances.

Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters and Drug-Free Workplace Requirements.
Note: Fields marked with an * are required.

O.M.B Control Number 1660-0025

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 44 CFR Part 17, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Homeland Security (DHS) determines to award the covered transaction, grant, or cooperative agreement.

1. Lobbying

A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons (entering) into a grant or cooperative agreement over $100,000, as defined at 44CFR Part 18, the applicant certifies that:

(a) 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 any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal amendment or modification of any Federal grant or cooperative agreement.

(b) If any other funds 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 grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions.

(c) The undersigned shall require that the language of this certification be included in the award documents for all the sub awards at all tiers (including sub grants, contracts under grants and cooperative agreements and sub contract(s)) and that all sub recipients shall certify and disclose accordingly.

2. Debarment, Suspension and Other Responsibility Matters (Direct Recipient)

A. As required by Executive Order 12549, Debarment and Suspension, and implemented at 44CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A, the applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency.

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or perform 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 statements, or receiving stolen property.

(c) Are not presently indicted for or otherwise criminally or civilly charged by a government 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 had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. Drug-Free Workplace (Grantees other than individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17.615 and 17.620:

(A) The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
(b) Establishing an on-going drug free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace;
(2) The grantees policy of maintaining a drug-free workplace;
(3) Any available drug counseling, rehabilitation and employee assistance programs; and
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);
(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement and
(2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

(e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable DHS awarding office, i.e. regional office or DHS office.
(f) Taking one of the following actions, against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance

City	State	Zip	Action

If your place of performance is different from the physical address provided by you in the Applicant Information, press *Add Place of Performance* button above to ensure that the correct place of performance has been specified. You can add multiple addresses by repeating this process multiple times.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for DHS funding. States and State agencies may elect to use a Statewide certification.

Signed by **Terry McCarthy** on **09/23/2011**

FEMA Standard Form LLL

Only complete if applying for a grant for more than $100,000 and have lobbying activities. See Form 20-16C for lobbying activities definition.