

File No. 100271

Committee Item No. 4

Board Item No. \_\_\_\_\_

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee BUDGET AND FINANCE

Date 3/24/10

Board of Supervisors Meeting

Date \_\_\_\_\_

#### Cmte Board

- |                                     |                          |  |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/>            | <input type="checkbox"/> | Motion                                       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Ordinance                                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Budget Analyst Report                        |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Analyst Report                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Introduction Form (for hearings)             |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/>            | <input type="checkbox"/> | MOU  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Information Form                       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Budget                                 |
| <input type="checkbox"/>            | <input type="checkbox"/> | Subcontract Budget                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Contract/Agreement                           |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Award Letter                                 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application                                  |
| <input type="checkbox"/>            | <input type="checkbox"/> | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Gail Johnson

Date 3/19/10

Completed by: \_\_\_\_\_

Date \_\_\_\_\_

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.



1 [Accept and Expend Grant - U.S. Department of Justice 2009 COPS Technology  
2 Initiative for the Expansion of a Gunshot Location System Project - \$1,000,000]

3 **Resolution authorizing the Chief of Police for the City and County of San**  
4 **Francisco to retroactively accept and expend a grant in the amount of**  
5 **\$1,000,000 from the U.S. Department of Justice Office of Community**  
6 **Oriented Policing Services for expansion of a gunshot location system**  
7 **project.**

8  
9 WHEREAS, The Chief of Police for the City and County of San Francisco  
10 desires to undertake a certain project designated "COPS Tech 09-10 Gunshot  
11 Location System", to be funded from funds made available through the U.S.  
12 Department of Justice Office of Community Oriented Policing Services (COPS);  
13 and

14 WHEREAS, The City and County of San Francisco currently operates a  
15 gunshot location system covering 3.3 square miles; and

16 WHEREAS, The expansion proposal would increase gunshot location  
17 system coverage by an additional 4 square miles; and

18 WHEREAS, The current gunshot location system reports gunfire at a rate  
19 of 692% over citizen reports; and

20 WHEREAS, The current gunshot location system enhances the ability of  
21 police management to direct resources to resolve community crime issues; and,

22 WHEREAS, The 2009 COPS Technology Program grant provides  
23 \$1,000,000.00 of funding for equipment and installation; and,  
24  
25

1           WHEREAS, The 2009 COPS Technology Program does not require  
2 matching funds for this project; and

3           WHEREAS, The 2009 COPS Technology Program does not allow for  
4 indirect costs; and

5           WHEREAS, The grant does not require an Annual Salary Ordinance  
6 Amendment; now, therefore, be it

7           RESOLVED, That the Chief of Police for the City and County of San  
8 Francisco is authorized on behalf of the City and County of San Francisco to  
9 retroactively accept and expend funding for this project from the U.S. Department  
10 of Justice Office of Community Oriented Policing Services; and, be it

11           FURTHER RESOLVED, That the Chief of Police for the City and County  
12 of San Francisco is authorized to execute on behalf of the City and County of  
13 San Francisco the necessary Grant Agreement for this project including any  
14 extensions, funding augmentations from the U.S. Department of Justice Office of  
15 Community Oriented Policing Services, or amendments thereof; and, be it

16           FURTHER RESOLVED, That it is agreed that any liability arising out of  
17 performance of this Grant Agreement, including civil court actions for damages,  
18 shall be the responsibility of the grantee and the authorizing agency; and, be it

19           FURTHER RESOLVED, That grant funds received hereunder shall not be  
20 used to supplant expenditures controlled by the Board of Supervisors.

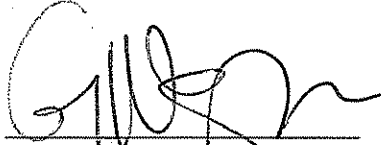
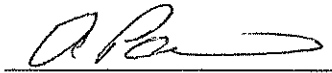
1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

Recommended:



Kevin Cashman for  
George Gascón  
Chief of Police

Approved:

  
Office of the Mayor

Office of the Controller





TO: Angela Calvillo, Clerk of the Board of Supervisors  
FROM: *GW* Mayor Gavin Newsom *GN*  
RE: Resolution authorizing the acceptance of a \$1,000,000 grant from the  
U.S. Department of Justice  
DATE: March 9, 2010

---

Dear Madame Clerk:

Attached for introduction to the Board of Supervisors is a resolution authorizing the Chief of Police for the City and County of San Francisco to retroactively accept and expend a grant in the amount of \$1,000,000.00 from the U.S. Department of Justice Office of Community Oriented Policing Services for expansion of a gunshot location system project.

I request that this item be scheduled in the Public Safety committee.

Should you have any questions, please contact Starr Terrell (415) 554-5262.

162001

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** San Francisco Police Department  
**DATE:** March 5, 2010  
**SUBJECT:** Accept and Expend Resolution for Subject Grant

**GRANT TITLE:** COPS Tech 09-10 Gunshot Location System

---

Attached please find the original and 4 copies of each of the following:

Proposed grant resolution; original signed by Department, Mayor, Controller

Grant information form, including disability checklist

Grant budget

Grant application

Grant award letter from funding agency

Other (Explain):

**Special Timeline Requirements:**

**Departmental representative to receive a copy of the adopted resolution:**

Name: Dana Lang

Phone: 415.553.1120

Interoffice Mail Address: 850 Bryant, Room 500

Certified copy required Yes

No

(Note: certified copies have the seal of the City/County affixed and are occasionally required by funding agencies. In most cases ordinary copies without the seal are sufficient).



**File Number:** \_\_\_\_\_  
(Provided by Clerk of Board of Supervisors)

**Grant Information Form**  
(Effective March 2005)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: COPS Tech 09-10 Gunshot Location System
2. Department: Police
3. Contact Person: Dana Lang Telephone: 553-1120
4. Grant Approval Status (check one):  
 Approved by funding agency                       Not yet approved
5. Amount of Grant Funding Approved or Applied for: \$1,000,000.00
- 6a. Matching Funds Required: \$0  
b. Source(s) of matching funds (if applicable): N/A
- 7a. Grant Source Agency: U.S. Department of Justice Office of Community Oriented Policing Services  
b. Grant Pass-Through Agency (if applicable): N/A
8. Proposed Grant Project Summary: Expansion of the existing gunshot location system.
9. Grant Project Schedule, as allowed in approval documents, or as proposed:  
Start-Date: 3/11/09                      End-Date: 03/10/12
- 10a. Amount budgeted for contractual services: \$0  
b. Will contractual services be put out to bid? N/A  
c. If so, will contract services help to further the goals of the department's MBE/WBE requirements? N/A  
d. Is this likely to be a one-time or ongoing request for contracting out? N/A
- 11a. Does the budget include indirect costs?                       Yes                       No  
b1. If yes, how much? N/A  
b2. How was the amount calculated? N/A  
c. If no, why are indirect costs not included?  
 Not allowed by granting agency                       To maximize use of grant funds on direct services  
 Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? The grant prohibits including indirect costs.

12. Any other significant grant requirements or comments:

**\*\*Disability Access Checklist\*\***

13. This Grant is intended for activities at (check all that apply):

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Existing Site(s) | <input checked="" type="checkbox"/> Existing Structure(s) | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s)       | <input type="checkbox"/> New Program(s) or Service(s)                 |
| <input checked="" type="checkbox"/> New Site(s)      | <input type="checkbox"/> New Structure(s)                 |   |

14. The Departmental ADA Coordinator and/or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:

Comments:

Departmental or Mayor's Office of Disability Reviewer: Justine Hindervater  
(Name)

Date Reviewed: March 8, 2010

Department Approval: Kevin Cashman Assistant Chief/Acting Chief  
(Name) (Title)  
[Signature]  
(Signature)



**U. S. Department of Justice**  
*Community Oriented Policing Services*

**Grants Administration Division**  
**Law Enforcement Technology**

1100 Vermont Avenue, NW  
Washington, DC 20530

**Memorandum**

**To:** Director Kevin Ryan  
San Francisco, City and County of

**From:** Andrew A. Dorr, Assistant Director for Grants Administration  
Tammy Richardson, Grant Program Specialist  
Budget Prepared By: Tammy Richardson, Grant Program Specialist

**Re:** Law Enforcement Technology Financial Clearance Memo

A financial analysis of budgeted costs has been completed. Costs under this award appear reasonable, allowable, and consistent with existing guidelines. Exceptions / Adjustments are noted below.

OJP Vendor #: 946000479      ORI #: CA138ZZ      DUNS #: 046004081      Grant #: 2009CKWX0455

<u>Budget Category</u>	<u>Proposed Budget</u>	<u>Approved Budget</u>	<u>Adjustments</u>	<u>Disallowed/Adjusted - Reasons/Comments</u>
Equipment	\$873,710.00	\$873,710.00	\$0.00	
Other	\$300,285.00	\$126,290.00	\$173,995.00	
Direct Costs:	\$1,173,995.00	\$1,000,000.00	\$173,995.00	
<b>Grand Total</b>	<b>\$1,173,995.00</b>	<b>\$1,000,000.00</b>	<b>\$173,995.00</b>	
<b>Grand Total:</b>	<b>Federal Share:</b>	<b>\$ 1,000,000.00</b>		
	<b>Applicant Share:</b>	<b>\$ 0.00</b>		

Cleared Date: 8/28/2009

Overall Comments:

All costs listed in this budget were programmatically approved based on the final Budget Detail Worksheets submitted by your agency to the COPS Office. Maintenance agreements (if applicable) must be purchased and paid in full within the three-year grant period. Prior to the obligation, expenditure or drawdown of grant funds for non-competitive contracts in excess of \$100,000, grantee must submit a sole source justification to the COPS Office for review and approval. Prior to the obligation, expenditure, or drawdown of grant funds for consultant fees in excess of \$550 per day when the consultant is hired through a noncompetitive bidding process, approval must be obtained from the COPS Office. If the vendor number on this form differs from the EIN number included in your application, then for administrative purposes only, we are assigning a different vendor number to your agency. The reason for this administrative change is that your original EIN number has been assigned to another agency. If this applies to your agency, please use the new vendor number on all financial documents related to this grant award. The vendor number should not be used for IRS purposes and only applies to this grant.

Opportunity Title:	COPS Technology Program
Offering Agency:	Community Oriented Policing Services
CFDA Number:	
CFDA Description:	
Opportunity Number:	COPS-OTHERTECH-2009-2
Competition ID:	
Opportunity Open Date:	05/18/2009
Opportunity Close Date:	06/22/2009
Agency Contact:	COPS Office Response Center 1-800-421-6770 askCopsRC@usdoj.gov

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

\* Application Filing Name: City and County of San Francisco, Mayor

## Mandatory Documents

--

Move Form to Complete

Move Form to Delete

## Mandatory Documents for Submission

COPS Budget  
COPS Application Attachment

## Optional Documents

--

Move Form to Submission List

Move Form to Delete

## Optional Documents for Submission

Other Attachments Form

Enter a name for the application in the Application Filing Name field.

- This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
- You can save your application at any time by clicking the "Save" button at the top of your screen.
- The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.

Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

- It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
- The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".

- To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.

- All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.

Click the "Save & Submit" button to submit your application to Grants.gov.

- Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
- Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
- The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
- You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

**Application for Federal Assistance SF-424**

Version 02

**\* 1. Type of Submission:**

- Preapplication
- Application
- Changed/Corrected Application

**\* 2. Type of Application:**

- New
- Continuation
- Revision

**\* If Revision, select appropriate letter(s):**

**\* Other (Specify)**

**\* 3. Date Received:**

Completed by Grants.gov upon submission.

**4. Applicant Identifier:**

**5a. Federal Entity Identifier:**

**\* 5b. Federal Award Identifier:**

**State Use Only:**

**6. Date Received by State:**

**7. State Application Identifier:**

**8. APPLICANT INFORMATION:**

**\* a. Legal Name:**

City and County of San Francisco, Mayor's Office

**\* b. Employer/Taxpayer Identification Number (EIN/TIN):**

94-6000479

**\* c. Organizational DUNS:**

046004081

**d. Address:**

**\* Street1:**

1 Dr. Carlton B. Goodlett Place

**Street2:**

**\* City:**

San Francisco

**County:**

San Francisco

**\* State:**

CA: California

**Province:**

**\* Country:**

USA: UNITED STATES

**\* Zip / Postal Code:**

94102

**e. Organizational Unit:**

**Department Name:**

Office of Criminal Justice

**Division Name:**

**f. Name and contact information of person to be contacted on matters involving this application:**

**Prefix:**

Mr.

**\* First Name:**

Kevin

**Middle Name:**

**\* Last Name:**

Ryan

**Suffix:**

**Title:**

Director

**Organizational Affiliation:**

**\* Telephone Number:**

415-554-6564

**Fax Number:**

415-554-6995

**\* Email:**

Kevin.Ryan@sfgov.org

**Application for Federal Assistance SF-424**

Version 02

**9. Type of Applicant 1: Select Applicant Type:**

B: County Government

**Type of Applicant 2: Select Applicant Type:**

**Type of Applicant 3: Select Applicant Type:**

**\* Other (specify):**

**\* 10. Name of Federal Agency:**

Community Oriented Policing Services

**11. Catalog of Federal Domestic Assistance Number:**

**CFDA Title:**

**\* 12. Funding Opportunity Number:**

COPS-OTHERECH-2009-2

**\* Title:**

COPS Technology Program

**13. Competition Identification Number:**

**Title:**

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

City and County of San Francisco, California

**\* 15. Descriptive Title of Applicant's Project:**

ShotSpotter, Gunshot Location System Expansion.

Attach supporting documents as specified in agency instructions.



Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

\* a. Applicant CA-008

\* b. Program/Project CA-008

Attach an additional list of Program/Project Congressional Districts if needed.

--	--	--	--

17. Proposed Project:

\* a. Start Date: 09/01/2009

\* b. End Date: 12/31/2009

18. Estimated Funding (\$):

* a. Federal	1,000,000.00
* b. Applicant	
* c. State	
* d. Local	
* e. Other	
* f. Program Income	
* g. TOTAL	1,000,000.00

\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

- Yes  No

21. \*By signing this application, I certify (1) to the statements contained in the (list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

\*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr. \* First Name: Kevin  
Middle Name:  
\* Last Name: Ryan  
Suffix:

\* Title: Director

\* Telephone Number: 415-554-6564 Fax Number: 415-554-6995

\* Email: Kevin.Ryan@sf.gov.org

\* Signature of Authorized Representative: Completed by Grants.gov upon submission. \* Date Signed: Completed by Grants.gov upon submission.

**Application for Federal Assistance SF-424**

Version 02

**\* Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]



# BUDGET DETAIL WORKSHEETS

OMB Control Number: 1103-0097  
Expiration Date: 5/31/2011

Applicant Legal Name:

City and County of San Francisco, Mayor's Office

ORI #:

CA138ZZ

## COPS FUNDING REQUEST

Federal assistance is being requested under the following COPS Office funding category:

Please select the funding category that was selected on the COPS Application Attachment to SF-424.

- |  |   |
|--|---|
| <input type="checkbox"/> Tribal Resources Grant Program          | <input checked="" type="checkbox"/> Targeted-Technology Program |
| <input type="checkbox"/> Targeted-Methamphetamine Initiative     | <input type="checkbox"/> Universal Hiring Program               |
| <input type="checkbox"/> Community Policing Development Programs | <input type="checkbox"/> Child Sexual Predator Program          |
| <input type="checkbox"/> Secure Our Schools                      |   |

### A. Sworn Officer Positions

No Sworn Officer Positions Requested

**Instructions:** For COPS programs which fund sworn officer positions, you may apply for entry-level salaries and benefits of newly hired, additional law enforcement officers. Please refer to the Application Guide for information on the length of the grant term for the specific program which you are applying.

This worksheet will assist your agency in properly organizing your *maximum estimated* salary and benefit costs and providing the necessary financial details for review by the COPS Office. Please list the entry-level base salary and fringe benefits *rounded to the nearest whole dollar* for one sworn officer position within your agency. COPS hiring funds may also be used to pay for entry-level salaries and benefits of newly-hired, additional officers who will backfill the positions of locally-funded veteran officers that will be deployed into community policing specialty areas (i.e., School Resource Officers). **Do not include employee contributions.**

Complete part 1 if you are requesting funds for full-time officer positions.

Officer Positions Requested:

Full-time:

Enter the number of new, entry-level full-time and/or part-time officer positions that are being requested. Do not include any officers already funded (or for which funding has been requested) under any other COPS grants or any positions otherwise funded with state, local, tribal, or BIA funds. Your request should be consistent with your agency's law enforcement needs. Do not request more positions than your agency can support and retain.

Applicant Legal Name:

City and County of San Francisco, Mayor's Office

ORI #:

CA138ZZ

A. Sworn Officer Positions

Part 1: Full time sworn officer information

Total Entry-Level Base Salary for One Position \$ [ ] x [ ] Years = \$ [ ] (Base Salary Subtotal)

B. Fringe Benefit Cost % of Base Additional Information

Social Security [ ] [ ] If Exempt Check Here: [ ] Fixed Rate: [ ] Can't Exceed 6.2% of total base salary. If less than 6.2%, exempt or fixed rate, provide an explanation in the "Sworn Officer Position Budget Summary".

Medicare [ ] [ ] If Exempt Check Here: [ ] Fixed Rate: [ ] Can't Exceed 1.45% of total base salary. If less than 1.45%, exempt, or fixed rate, provide an explanation in the "Sworn Officer Position Budget Summary".

Health Insurance [ ] [ ] Family Coverage? [ ] Yes [ ] No Fixed Rate: [ ] Can't Exceed 30% of total base salary for individual plans, or 45% for family plans. If it exceeds these rates or is a fixed rate, provide an explanation in "Sworn Officer Position Budget Summary".

Life Insurance [ ] [ ]

Vacation [ ] [ ] Number of Hours Annually: [ ]

Sick Leave [ ] [ ] Number of Hours Annually: [ ]

Retirement [ ] [ ] Fixed Rate: [ ]

Can't Exceed 20% of the total base salary (unless a fixed rate). If a fixed rate, provide an explanation in the "Sworn Officer Position Budget Summary".

Worker's Comp [ ] [ ] If Exempt Check Here: [ ] Fixed Rate: [ ] Can't Exceed 10% of the total base salary. If exempt or if it exceeds this rate, provide an explanation in the "Sworn Officer Position Budget Summary".

Unemployment Ins. [ ] [ ] If Exempt Check Here: [ ] Fixed Rate: [ ] Can't Exceed 5% of the total base salary. If exempt or if it exceeds this rate, provide an explanation in the "Sworn Officer Position Budget Summary".

Other [ ] [ ] Describe: [ ]

Other [ ] [ ] Describe: [ ]

Other [ ] [ ] Describe: [ ]

Total Salary (Part A) Total Fringe Benefits (Part B) # of Positions Sworn Officer Total \$ [ ] + [ ] x [ ] = [ ] Transfer to Budget Summary Line 1

**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**Part 2: Sworn Officer Position Budget Summary (all applicants requesting officer position(s) must complete this section.)**

After completing Part 1 of this form, answer the following questions. If necessary, attach an explanation of how you computed salaries and benefits for this worksheet. Be sure to answer EVERY question. Missing or erroneous information could significantly delay the review of your agency's request.

**1. If your agency's second and third-year costs for salaries and/or fringe benefits are greater than the first year, check the reason(s) why in the space below. You must check at least one.**

- Cost of living adjustment (COLA)    Step Raises    Change in benefit costs  
 Other - please explain briefly:

**2. If an explanation is required for any of the following categories, please provide in the space below: 1) Social Security, 2) Medicare, 3) Health Insurance, 4) Retirement, 5) Workers Compensation, and 6) Unemployment Insurance.**

1) Social Security:

2) Medicare:

3) Health Insurance:

4) Retirement:

5) Worker's Compensation:

6) Unemployment Insurance:

Applicant Legal Name:

City and County of San Francisco, Mayor's Office

ORI #:

CA138ZZ

**B. Civilian/Other Personnel**

No Civilian Personnel Positions Requested

Instructions: Each position must be listed and computed separately. On this page you can enter one civilian position and then by adding another Civilian/Other Personnel page, can enter 19 more unique positions for a total of 20. Complete each position in accordance with the instructions.

**Part 1: Total Base Salary and Fringe Benefits for Civilian/Other Personnel**

Civilian/Other Personnel Page 1 of 1

Position Title:

Base Salary Computation: ((  x  ) = X  )  (Base Salary Subtotal)  
((Annual Base Salary X Percent of Time Devoted to the Project) X Number of Months Devoted to the Project)

**Fringe Benefit      Cost                      % of Base Salary Subtotal      Additional Information**

Social Security   If Exempt Check Here:  Fixed Rate:   
Can't Exceed 6.2% of total base salary. If less than 6.2%, exempt or fixed rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Medicare   If Exempt Check Here:  Fixed Rate:   
Can't Exceed 1.45% of total base salary. If less than 1.45%, exempt, or fixed rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Health Insurance   Family Coverage?  Yes  No Fixed Rate:   
Can't Exceed 30% of total base salary for individual plans, or 45% for family plans. If it exceeds these rates or is a fixed rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Life Insurance

Vacation   Number of Hours Annually:

Sick Leave   Number of Hours Annually:

Retirement   Fixed Rate:

Can't Exceed 20% of the total base salary (unless a fixed rate). If a fixed rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Worker's Comp   If Exempt Check Here:  Fixed Rate:   
Can't Exceed 10% of the total base salary. If exempt or if it exceeds this rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Unemployment Ins.   If Exempt Check Here:  Fixed Rate:   
Can't Exceed 5% of the total base salary. If exempt or if it exceeds this rate, provide an explanation in the "civilian/non-sworn personnel budget summary".

Other   Describe:

Other   Describe:

Total Fringe Benefits:

Subtotal Position Salary and Benefits:

**CIVILIAN/OTHER PERSONNEL TOTAL:**  **Total Civilian/Other Personnel Cost**  
(Add together all Subtotals per position) (Transfer to Budget Summary Line 2)

Please include a detailed position description for all positions listed in the Budget Narrative

**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**Part 2: Civilian/Non-Sworn Personnel Budget Summary (all applicants requesting civilian/non-sworn position(s) must complete this section.)**

After completing Part 1 of this form, answer the following questions. If necessary, attach an explanation of how you computed salaries and benefits for this worksheet. Be sure to answer EVERY question. Missing or erroneous information could significantly delay the review of your agency's request.

**1. If your agency's second and third-year costs for salaries and/or fringe benefits are greater than the first year, check the reason(s) why in the space below. You must check at least one.**

- Cost of living adjustment (COLA)    Step Raises    Change in benefit costs  
 Other - please explain briefly:

**2. If an explanation is required for any of the following categories, please provide in the space below: 1) Social Security, 2) Medicare, 3) Health Insurance, 4) Retirement, 5) Workers Compensation, and 6) Unemployment Insurance.**

**1) Social Security:**

**2) Medicare:**

**3) Health Insurance:**

**4) Retirement:**

**5) Worker's Compensation:**

**6) Unemployment Insurance:**

Applicant Legal Name:

ORI #:

City and County of San Francisco, Mayor's Office

CA138ZZ

**C. EQUIPMENT/TECHNOLOGY**

No Equipment/Technology Requested

**Instructions:** List non-expendable items that are to be purchased. Non-expendable equipment is tangible property (e.g., technology) having a useful life of more than two years. Expendable items should be included either in the "SUPPLIES" or "OTHER" categories. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially for high-price items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "CONTRACTS/ CONSULTANTS" category. If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

Pursuant to the Continuing Appropriations Resolution, 2008, (P.L.110-161), be advised that, to the greatest extent practical, all equipment and products purchased with these funds must be American-made.

For agencies purchasing items related to enhanced communications systems, the COPS Office expects and encourages that, wherever feasible, such voice or data communications equipment should be incorporated into an intra- or interjurisdictional strategy for communications interoperability among federal, state, and local law enforcement agencies.

See the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying.

Unit/Item Description	Computation		Per Item Subtotal
	(# of Items/Units	X Unit Cost)	
ShotSpotter, Inc. Gunshot location system for one square mile of coverage.	4	200,000.00	800,000.00
Wireless Solutions AirStream 4.9 Ptp-End, Mid range	10	3,300.00	33,000.00
Wall Mount, 5.5', w 2-3/8" pipe	20	83.00	1,660.00
Nema 4 Box	20	275.00	5,500.00
Ethernet switch - OFC POP	10	3,100.00	31,000.00
Ethernet switch - Wireless POP	10	255.00	2,550.00
Rack and Misc Assembly Hardware	10	350.00	3,500.00
Catalyst 3750 Metro Switch	5	3,807.00	19,035.00

Catalyst Feature License Advanced IP - License - 1 Switch	5	4,479.00	22,395.00
Expansion Module - SFP - Gigabit Ethernet - 1000 Base- ZX - 1550 nm	10	2,530.00	25,300.00
Belkin 16' Fiber Optic Network Cable	10	59.00	590.00

**EQUIPMENT TOTAL:** 944,530.00

Transfer to Budget  
Summary Line 3

*Please include a detailed description for all items listed in the Budget Narrative*

Applicant Legal Name:

City and County of San Francisco, Mayor's Office

ORI #:

CA138ZZ

D. OTHER COSTS

No Other Costs Requested

Instructions: List other requested items that will support the project goals and objectives as outlined in your application. Other costs may include items such as overtime and background investigations for law enforcement officer positions and/or civilian positions if allowable under the program for which you are applying. If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

Pursuant to the Continuing Appropriations Resolution, 2008, (P.L.110-161), be advised that, to the greatest extent practical, all equipment and products purchased with these funds must be American-made.

See the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying.

Unit/Item Description	Computation		Per Item Subtotal
	(# of Items/Units	X Unit Cost)	
Installation and professional services (per hour) computing services and network engineering	975	151.00	147,225.00
Installation and professional services (per hour) wireless services	1,200	127.55	153,060.00

OTHER COST TOTAL: 300,285.00

Transfer to Budget Summary Line 4

Please include a detailed description for all items listed in the Budget Narrative



**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**E. SUPPLIES**

**No Supplies Requested**

**Instructions:** List items by type (office supplies; postage; training materials; copying paper; books; hand-held tape recorders; etc). Generally, supplies include any materials that are expendable or consumed during the course of the project. If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

See the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying.

Unit/Item Description	Computation		Per Item Subtotal
	(# of Items/Units	X Unit Cost)	
<b>SUPPLIES TOTAL:</b>			
			Transfer to Budget Summary Line 5

*Please include a detailed description for all items listed in the Budget Narrative*

**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**F. TRAVEL/TRAINING**

**No Travel/Training Costs Requested**

**Instructions:** Itemize travel expenses of project personnel by purpose (e.g., mandatory training, staff to training, field interviews, advisory group meetings). Show the basis of computation (e.g., 6 staff members times the unit cost per person for lodging for 3 days). Training projects, training fees, travel, lodging and per diem rates for trainees should be listed as separate travel items. Show the number of staff attending any event and the unit costs per person involved. Identify the location of travel, when possible. Note: Any local training costs (within a 50-mile radius) should be listed under Section D ("Other Costs"). If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

See the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying.

Reason for Travel/ Training & Location of Travel/Training	Travel/ Training Item	Computation		# of Days/ X Trips/Events)	Per Item Subtotal
		(# of Staff	X Unit Cost		
<b>TRAVEL/TRAINING TOTAL:</b>					
					Transfer to Budget Summary Line 6

*Please include a detailed description for all items listed in the Budget Narrative*

**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**G. CONTRACTS/CONSULTANTS**

**No Contracts/Consultants Costs Requested**

**Instructions:** See the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying. If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

**Contracts:** Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. If awarded, requests for sole source procurements of equipment, technology or services in excess of \$100,000 must be submitted to the COPS Office for prior approval.

**Contract Description**

**Per Contract Subtotal**

**Contracts Subtotal:**  (G1)

**Consultant Fees:** For each consultant enter the name (if known), service to be provided, hourly or daily fee (based upon an 8-hour day), and estimated length of time on the project. Unless otherwise approved by the COPS Office, approved consultant rates will be based on the salary a consultant receives from his or her primary employer. Consultant fees in excess of \$550 per day require additional written justification in the Budget Narrative and must be pre-approved in writing by the COPS Office.

Consultant Name/Title	Service Provided	(Cost	Computation X # Days or # Hours)	Per Consultant Fee Subtotal
-----------------------	------------------	-------	-------------------------------------	--------------------------------

**Consultant Fees Subtotal:**  (G2)

**Consultant Expenses:** List all expenses to be paid from the grant to the individual consultants separate from their consultant fees (e.g., travel, meals, lodging).

Consultant Name/Title	Service Provided	(Cost	Computation X # of Days)	Per Consultant Fee Subtotal
-----------------------	------------------	-------	-----------------------------	--------------------------------

**Consultant Subtotal:**  (G3)

**CONTRACTS/CONSULTANTS TOTAL:**

Contracts (G1) + Consultant Fees (G2) + Consultant Expenses (G3)

*Please include a detailed description for all contracts listed in the Budget Narrative.* Transfer to Budget Summary Line 7

**Applicant Legal Name:**

**ORI #:**

City and County of San Francisco, Mayor's Office

CA138ZZ

**H. INDIRECT COSTS**

**No Indirect Costs Requested**

**Instructions:** Indirect costs are allowed under a very limited number of specialized COPS Training and Technical Assistance programs. Please see the COPS Application Guide for a list of allowable/unallowable costs for the particular program for which you are applying. If additional budget information is required to be entered for this category please complete the information in an electronic format and attach the document using the "Other Attachments" form found in the Grants.gov forms package.

*If indirect costs are requested, a copy of the agency's fully-executed, negotiated Federal Rate Approval Agreement must be attached to this application.*

**Indirect Cost Description**

**Computation**

**Per Indirect Cost Subtotal**

**INDIRECT COSTS TOTAL:**

[Empty box for Indirect Costs Total]

Transfer to Budget  
Summary Line 8

**Applicant Legal Name:**

City and County of San Francisco, Mayor's Office

**ORI #:**

CA138ZZ

**BUDGET SUMMARY**

**Instructions:** When you have completed the Budget Detail Worksheets, please transfer the category totals to the spaces below. Please compute the Total Project Amount, Total Federal Share Amount, and Total Local Share (if applicable). Please see the Application Guide for information on the maximum federal share and local matching requirements for the grant for which you are applying.

Budget Category	Category Total	Line #
A. Sworn Officer Positions		1
B. Civilian/Other Personnel		2
C. Equipment/Technology	944,530.00	3
D. Other Costs	300,285.00	4
E. Supplies		5
F. Travel/Training		6
G. Contracts/Consultants		7
H. Indirect Costs		8
<b>Total Project Amount:</b>	<b>1,244,815.00</b>	
<b>Total Federal Share Amount:</b> (Total Project Amount X Federal Share Percentage Allowable)	<b>1,244,815.00</b>	
<b>Total Local Share Amount (If applicable):</b> (Total Project Amount - Total Federal Share Amount)	<b>0.00</b>	

**Contact Information for Budget Questions**

Please provide contact information of the financial official that the COPS Office may contact with questions related to your budget submission.

**Authorized Official's Typed Name:**

Prefix: Mr.

First Name: Mikail

Middle Name:

Last Name: Ali

Suffix:

Title: Senior Advisor for Public Safety

Phone: 415-554-5320 Fax: 415-554-6995

E-mail Address: Mikail.Ali@sfgov.org

**PAPERWORK REDUCTION ACT NOTICE**

The public reporting burden for this collection of information is estimated to be up to 2 hours per response, depending upon the COPS program being applied for, including the time for reviewing instructions, searching existing data sources, gathering the budget data needed, and completing the worksheets. Send comments regarding this burden estimate or any other aspects of the collection of this information, including suggestions for reducing this burden, to the Office of Community Oriented Policing Services, U.S. Department of Justice, 1100 Vermont Avenue, N.W., Washington, D.C. 20530; and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

You are not required to respond to this collection of information unless it displays a valid OMB control number. The OMB control number for this application is 1103-0097 and the expiration date is 5/31/2011.

## COPS Application Attachment to SF-424

### General Instructions:

The COPS Application Attachment to SF-424 is used in conjunction with all COPS program applications. Please ensure that you have completed all of the required sections. If a section is not applicable, please check the not applicable checkbox.

### Section 1: COPS PROGRAM REQUEST

Federal assistance is being requested under the following COPS program:

Select the COPS Office grant program for which you are requesting federal assistance. Please DO NOT use this form to apply for multiple grants at one time. A separate application must be completed for each COPS program for which you are applying. Please ensure that you read, understand, and agree to comply with the applicable grant terms and conditions as outlined in the COPS Application Guide before finalizing your selection.

#### CHECK ONE PROGRAM OPTION ONLY

- |  |   |
|--|---|
| <input type="checkbox"/> Targeted-Tribal Resources Grant Program | <input checked="" type="checkbox"/> Targeted-Technology Program |
| <input type="checkbox"/> Targeted-Methamphetamine Initiative     | <input type="checkbox"/> Universal Hiring Program               |
| <input type="checkbox"/> Community Policing Development          | <input type="checkbox"/> Child Sexual Predator Program          |
| <input type="checkbox"/> Secure our Schools                      |   |

### Section 2: EXECUTIVE INFORMATION

Note: Listing individuals without ultimate programmatic and financial authority for the grant could delay the review of your application, or remove your application from consideration.

A. Applicant ORI Number:

The ORI number is assigned by the FBI and is your agency's unique identifier. The first two letters are your state abbreviation, the next three numbers are your county's code, and the final two numbers identify your jurisdiction within your county. If you do not currently have an ORI number, the COPS Office will assign one to your agency for the purpose of tracking your grant.

- Check here if your agency has not been assigned an ORI #.

**B. Law Enforcement Executive/Program Official Information:**

*For Law Enforcement Agencies: Enter the law enforcement executive's name and contact information. This is the highest-ranking official within your jurisdiction (e.g., Chief of Police, Sheriff, or equivalent). For Non-Law Enforcement Agencies: Enter the program official's name and contact information. If the grant is awarded, this position would be responsible for the programmatic implementation of the award. If your agency is a "start-up" this section can remain blank.*

Title: Director  
Prefix: Mr.  
First Name: Kevin  
Middle Name:  
Last Name: Ryan  
Suffix:

Agency Name: Mayor's Office of Criminal Justice  
Street 1: 1 Dr. Carlton B. Goodlett Place  
Street 2: City Hall, Suite 496  
City: San Francisco  
County: San Francisco  
State: CA: California  
Province:  
Zip / Postal Code: 94578  
Country: USA: UNITED STATES

Telephone: 415-554-6564  
Fax: 415-554-6995  
E-mail: Kevin.Ryan@sfgov.org

Type of Agency: Municipal  
New Startup\* (please specify):  
Other\* (please specify):

*Agency types that have an asterisk next to them and that are applying for COPS hiring grants must provide additional information. Please refer to the COPS Application Guide: Agency Supplemental Information section for the questions that you will need to address. Please attach this information below:*

[Redacted area]

**C. Government Executive/Financial Official Information:**

*For Government Agencies: Enter the government executive's name and contact information. This is the highest-ranking official within your jurisdiction (Mayor, City Administrator, Tribal Chairman, or equivalent). For Non-Government Agencies: Enter the financial official's name and contact information. If the grant is awarded, this position would be responsible for the financial management of the award. Please note that information for non-executive positions (e.g. clerk, trustees, etc., are not acceptable).*

Title: Mayor  
Prefix: Mr.  
First Name: Gavin  
Middle Name:  
Last Name: Newsom  
Suffix:

**Name of Government Entity/Financial Entity:**

City and County of San Francisco

Street 1: 1 Dr. Carlton B. Goodlett Place  
Street 2: City Hall, Suite 496  
City: San Francisco  
County: San Francisco  
State: CA: California  
Province:  
Zip / Postal Code: 94102  
Country: USA: UNITED STATES  
Telephone: 415-554-6141  
Fax: 415-554-6160  
E-mail: gavin.newsom@sfgov.org

**Type of Government Entity:**

County



## Section 3: GENERAL AGENCY INFORMATION

### A. General Applicant Information

1. Cognizant Federal Agency:

Enter the legal applicant's Cognizant Federal Agency. A Cognizant Federal Agency, generally, is the federal agency from which your jurisdiction receives the most federal funding. Your Cognizant Federal Agency also may have been previously designated by the Office of Management and Budget.

2. Fiscal Year:  to  (mo/da/yr)

3. Population served as of the 2000 US Census:

4. If the population served is not represented by the U.S. census figures, please indicate the size of the population served:

### B. Law Enforcement Agency Information

**1. Is your agency contracting for law enforcement services? Contractual arrangements for law enforcement services are not fundable under the Universal Hiring Program.**

Yes  No

*If "yes," the Legal Name and address information listed on the SF-424 under section 8 (Applicant Information) should be for the jurisdiction that will be contracting to receive law enforcement services, and NOT the law enforcement agency that will actually provide those services. Also, be sure to enter the name and agency information of the contract law enforcement department under section 2, part B (law enforcement executive information) of this document. In all contracting arrangements, the jurisdiction that is applying for assistance is ultimately responsible for ensuring compliance with all grant requirements. For additional clarification on contracting guidelines, please see the program-specific section of the COPS Application Guide.*

If you are a tribal law enforcement agency, instead of providing your own law enforcement services, does your tribe exclusively contract with a non-BIA local law enforcement agency for services?

Yes  No

*If "Yes," please refer to the program-specific section of the COPS Application Guide for additional eligibility information.*

### 2. Population Served By Law Enforcement Agency

**Do officers have primary law enforcement authority for the population to be served?**

Yes  No

*An agency with primary law enforcement authority is defined as the first responder to calls for service, and has ultimate and final responsibility for the prevention, detection, and/or investigation of crime within its jurisdiction.*

If yes, what is the actual population for which your department has primary law enforcement authority? [In other words, the 2000 Census population minus the incorporated towns and cities that have their own police departments.]

If no, please explain. Include the date by which your agency anticipates having primary law enforcement authority for this population. [Please limit your response to a maximum of 250 words.]

**3. Current Budgeted Sworn Force Strength as of the Date of this Application:**

**Full Time**

**Part Time**

*Enter the budgeted sworn force strength. The budgeted sworn force strength is the number of sworn officer positions your department has allocated within its budget, including state, Bureau of Indian Affairs, and locally-funded vacancies. Do not include unpaid/reserve officers or detention staff.*

**4. Current Actual Sworn Force Strength as of the Date of this Application:**

**Full Time**

**Part Time**

*Enter the actual sworn force strength. The actual sworn force strength is the actual number of sworn officer positions employed by your department as of the date of application. Do not include vacant positions or unpaid/reserve positions.*

## **Section 4: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY**

COPS Office grants must be used to reorient the mission and activities of law enforcement agencies toward the community policing philosophy or enhance their involvement in community policing. The following is the COPS Office definition of community policing that emphasizes the primary components of community partnerships, organizational transformation, and problem solving.

Community policing is a philosophy that promotes organizational strategies, which support the systematic use of partnerships and problem-solving techniques, to proactively address the immediate conditions that give rise to public safety issues, such as crime, social disorder, and fear of crime.

The COPS Office has completed the development of a comprehensive community policing self-assessment tool for use by law enforcement agencies. Based on this work, we have developed the following list of primary sub-elements of community policing. Please refer to the COPS Office web site ([www.cops.usdoj.gov](http://www.cops.usdoj.gov)) for further information regarding these sub-elements

### **Community Partnerships:**

Collaborative partnerships between the law enforcement agency and the individuals and organizations they serve to both develop solutions to problems and increase trust in police.

- Other Government Agencies
- Community Members/Groups
- Non-Profits/Service Providers
- Private Businesses
- Media

### **Organizational Transformation:**

The alignment of organizational management, structure, personnel and information systems to support community partnerships and proactive problem-solving efforts.

#### **Agency Management**

- Climate and culture
- Leadership
- Labor relations
- Decision-making
- Strategic planning
- Policies
- Organizational evaluations
- Transparency

#### **Organizational Structure**

- Geographic assignment of officers
- Despecialization
- Resources and finances

#### **Personnel**

- Recruitment, hiring and selection
- Personnel supervision/evaluations
- Training

#### **Information Systems (Technology)**

- Communication/access to data
- Quality and accuracy of data

### **Problem Solving:**

The process of engaging in the proactive and systematic examination of identified problems to develop effective responses that are rigorously evaluated.

- Scanning: Identifying and prioritizing problems
- Analysis: Analyzing problems
- Response: Responding to problems
- Assessment: Assessing problem-solving initiatives
- Using the Crime Triangle to focus on immediate conditions (Victim/Offender/Location)

## COMMUNITY POLICING PLAN

COPS grants must be used to initiate or enhance community policing. Please complete the following questions to describe the types of community policing activities that will be initiated or enhanced as a result of COPS funding. You may find more detailed information about community policing at the COPS Office web site ([www.cops.usdoj.gov](http://www.cops.usdoj.gov)).

### Community Partnerships

The COPS Office is interested in determining if your organization will use the grant to assist in increasing the capacity to develop collaborative partnerships with individual and organizational stakeholders in communities to increase trust and to develop shared solutions to community problems.

If awarded funding, my organization will implement or enhance:

P1-Sharing of relevant crime and disorder information with community members.

Yes       No       Not Sure

P2-Seeking input from the community to identify and prioritize neighborhood problems.

Yes       No       Not Sure

P3-Engagement with the community in the development of responses to community problems.

Yes       No       Not Sure

P4-Collaboration with other agencies that deliver public services (e.g., parks and recreation, social services, public health, mental health, code enforcement).

Yes       No       Not Sure

Please provide specific examples of the types of activities you plan to engage in to enhance community partnerships if awarded grant funding (150 word maximum):

San Francisco currently has covered 3.3 square miles of its 47.7 square miles. In the year since we've covered the 3.3 square miles, we've discovered a significant difference between actual and reported incidents involving the illegal discharge of firearms. In parts of the covered area, the system reports gunfire at a rate of 692% over what citizens are reporting. As a result, officers on patrol are able to respond and apprehend perpetrators of these crimes at greater rates than were there only a reliance on information received from citizens. The systems' capturing of more gunfire incidents enhances the ability of police management to direct resources to resolve community crime issues. Additionally, it enhances the ability of police management to engage and inform the community on police efforts to resolve these problems.

### Problem Solving

The COPS Office is interested in determining if your organization will use the grant to assist in increasing the capacity to use problem solving. Problem solving is an analytical process for systematically 1) identifying and prioritizing problems, 2) analyzing problems, 3) responding to problems, and 4) evaluating problem-solving initiatives. Problem solving involves an agency-wide commitment to go beyond traditional police responses to crime to proactively address a multitude of problems that adversely affect quality of life.

If awarded funding, my organization will implement or enhance:

PS1-Integration of problem solving into patrol work.

Yes       No       Not Sure

PS2-Identification and prioritization of crime and disorder problems by examining patterns and trends involving repeat victims, offenders, and locations.

Yes       No       Not Sure

PS3-Exploring the underlying factors and conditions that contribute to crime and disorder problems.

Yes       No       Not Sure

PS4-Developing tailored responses to crime and disorder problems that address the underlying conditions that contribute to them.

Yes       No       Not Sure

Please provide specific examples of the types of activities you plan to engage in to enhance problemsolving activities if awarded grant funding (150 word maximum):

ShotSpotter technology maintains a database of gunfire incidents. This allows for analysis of the incidents as it relates day of the week, time of day and location. The storage of this information is in "real time." Managers and supervisors within the police department can use this data to optimize the allocation of personnel and other resources in accordance to the prevalence, location and time of these gunfire incidents.

### Organizational Transformation

The COPS Office is interested in determining if your organization will use the grant to assist in increasing the capacity to transform organizational environment, organizational structure, personnel, practices, and policies to support the community policing philosophy and community policing activities.

If awarded funding, my organization will implement or enhance:

OC1-Institutionalization of organizational changes that support the implementation of community policing strategies.

Yes       No       Not Sure

OC2-Incorporation of community policing principles into the agency's mission/vision statement and strategic plan.

Yes       No       Not Sure

OC3-Institutionalization of community policing principles into a corresponding set of policies, practices and procedures.

Yes       No       Not Sure

OC4-Institutionalization of community policing agency-wide.

Yes       No       Not Sure

Please provide specific examples of the types of activities you plan to engage in to enhance organizational alignment towards community policing if awarded grant funding (150 word maximum):

**Technology**

**The COPS Office is interested in determining if your organization will use the grant to assist in increasing technological capacity to better prevent and/or respond to crime and disorder incidents.**

**If awarded funding, my organization will implement or enhance:**

T1- Ensuring that agency staff have proper access to relevant data (e.g., calls for service, incident and arrest data, etc.).

Yes       No       Not Sure

T2- Analysis and understanding of problems in the community.

Yes       No       Not Sure

T3- Improvements to the agency's overall efficiency and effectiveness.

Yes       No       Not Sure

T4- Providing officers with necessary equipment to better prevent and/or respond to crime and disorder incidents.

Yes       No       Not Sure

**Please provide specific examples of the types of activities you plan to engage in to enhance alignment of technology towards community policing if awarded grant funding (150 word maximum):**

ShotSpotter technology has proven to be a force multiplier in the 3.3 square miles currently covered within our city. The expansion will enhance policy services in other neighborhoods impacted by gun violence in our city. With the expansion of our system, we intend to extend the capabilities directly to officers on patrol by installing the technology on their in-car computers. This will allow for quicker response times because these officers would receive notification of a gunfire incident within, on average, ten seconds after the incident actually occurs. This will quicken the response time because the call will no longer need to be vetted through the dispatch process. Additionally, the technology utilizes global positioning maps that clearly indicate the location of the incident on a map. This further allows for efficient coordination of a police response orchestrated by officers and supervisors on patrol in the community.

**If your organization receives this COPS grant funding, it should use your responses to these questions as your organization's community policing plan. Your organization may be audited or monitored to ensure that it is initiating or enhancing community policing in accordance with this plan.**

**We understand that your community policing needs may change during the life of your COPS grant (if awarded), and we welcome minor changes to this plan without prior approval. We also recognize that this plan may incorporate a broad range of possible community policing strategies and activities, and that your agency may implement particular community policing strategies from the plan on an as-needed basis throughout the life of the grant. If your agency's community policing plan changes significantly, however, you must submit those changes in writing to the COPS Office for approval. Changes are "significant" if they deviate from the range of possible community policing activities identified and approved in this original community policing plan submitted with your application.**

## Section 5: CONTINUATION OF PROJECT AFTER FEDERAL FUNDING ENDS

### Retention for COPS Hiring Grants

This section is applicable to applicants applying for sworn officer positions.

Check here if not applying under the Universal Hiring Program.

*Hiring grantees are required to retain all additional officer positions awarded for at least one full local budget cycle following the expiration of COPS grant funding for each COPS-funded officer position. The additional officer positions should be added to your agency's law enforcement budget with state, local, or tribal funds for at least one full local budget cycle, over and above all other locally-funded officer positions (including other school resource officers) that would have existed regardless of the grant, from the time that the thirty-six (36) months of grant funding for each COPS position expires. Absorbing COPS-funded officers through attrition (rather than adding the extra positions to your budget with additional funding) does not meet the retention requirement. Please be aware that if your agency has additional sworn officer hiring grants that are active when one hiring grant expires, the officer positions that were awarded under the expired grant are added to your baseline of locally-funded officer positions and must be maintained throughout the implementation of all additional hiring grants.*

*Use the space below to explain how your agency currently plans to retain any additional officer positions awarded. Please be as specific as possible about the source(s) of retention funding (General Fund revenues, local ballot item, etc.) your agency plans to utilize. A missing or incomplete response could affect your ability to receive funding. Please limit your response to a maximum of 250 words.*

## Section 6: NEED FOR FEDERAL ASSISTANCE

***All applicants are required to provide a brief explanation of their agency's public safety needs and an explanation of their agency's inability to implement this project and/or address these public safety needs without federal assistance.***

In the space below, please provide a brief explanation of your agency's inability to implement this project without federal assistance. [Please limit your response to a maximum of 250 words.]

The Mayor of the City and County of San Francisco recently presented a balance budget that addresses a \$575 million shortfall. To date, we have allocated all available discretionary funds to the maintenance of basic personnel and infrastructure. This includes maintenance of current information technologies. Present fiscal constraints preclude us from expanding the system though it's been proven to be an effective and essential tool for combating gun violence.

## Section 7: WAIVERS OF THE LOCAL MATCH

*Please refer to the Application Guide for information on whether waivers of the local match, are available under the grant program for which you are applying.*

Check here if not applicable

**Are you requesting a waiver of the local match based upon severe fiscal distress?**

Yes       No

*If requesting a waiver, you are required to attach a detailed waiver justification below. Please refer to the COPS Application Guide – "Waiver of the Local Match" section for information on what to include in your justification, as well as the program-specific portion of the Guide to review the local match requirements for the grant program under which you are applying.*

--	--	--	--

## Section 8: EXECUTIVE SUMMARY

*This section is applicable to COPS applicants applying under the COPS Methamphetamine Initiative, Secure Our Schools, Child Sexual Predator Program, Technology Program and Community Policing Development Programs.*

Check here if not applicable

Please attach a brief summary of how your agency will use this federal funding. Be sure to include a description of how you expect this grant to impact public safety and/or crime prevention in your community. Please refer to the COPS Application Guide for clarification on specific information to include in your summary. The Executive Summary may be used to keep Congress or other executive branch agencies informed on law enforcement strategies to deter crime in your community. [Please limit your response to a maximum of 400 words.]

ExecutiveSummaryCOPSgrant.p			
-----------------------------	--	--	--

## Section 9: PROJECT DESCRIPTION (NARRATIVE)

*This section is applicable to all COPS applicants.*

Please attach to your application an in-depth narrative response detailing your proposed project. Please refer to the program-specific section of the COPS Application Guide: "How to Apply" section for information on what should be included in your response, as well as any additional formatting requirements and page length limitations.

ProjectDescriptionCOPSgrant.pd			
--------------------------------	--	--	--



## Section 10: BUDGET NARRATIVE (EXCLUDING SWORN OFFICER POSITIONS)

*This section is applicable to COPS applicants applying under the Community Policing Development Programs, the Methamphetamine Initiative, Secure Our Schools, the Tribal Resources Grant Program, Child Sexual Predator Program and the Technology Program.*

Check here if not applicable

Please attach a budget narrative describing each item proposed for purchase, its purpose, and how the items relate to the overall project. Like items may be grouped together for ease of reporting. The structure of the Budget Narrative must mirror the structure of the Budget Detail Worksheet included in this application. In other words, each item reported in the Budget Narrative must fall under one of the following budget categories: Civilian/Other Personnel, Equipment/Technology, Other Costs, Supplies, Travel/Training, Contracts/Consultants, and Indirect Costs. For your information, a sample Budget Narrative and a sample Budget Detail Worksheet are included in the COPS Application Guide. Every item included on the Budget Detail Worksheet must be included in the Budget Narrative.

Note that allowable/unallowable costs will vary widely between different COPS grant programs and cooperative agreements. Please ensure that you refer to the program-specific portion of the COPS Application Guide – “Federal Funding: Allowable & Unallowable Costs” section for a complete list of the allowable and unallowable costs associated with the particular program for which you are applying. Including unallowable items on your application may delay the processing of your application and could ultimately result in the denial of your request.

BudgetNarrativeCOPSgrant.pdf

## Section 11: MEMORANDUM OF UNDERSTANDING

Check here if not applicable

Please attach a Memorandum of Understanding (MOU) to your application that defines the roles and responsibilities of the individuals and partner(s) involved in your proposed project. Please refer to the program-specific portion of the Guide for a complete description of information pertaining to the required MOU.

## Section 12: OFFICIAL PARTNER(S) CONTACT INFORMATION

Check here if not applicable.

An official "partner" under the grant may be a governmental or private entity that has established a legal, contractual, or other agreement with the applicant for the purpose of supporting and working together for mutual benefits of the grant. Please refer to the Application Guide for a complete description of partnership requirements under the grant program for which you are applying.

<b>Official Partner 1 of 1</b>	
Title:	<input type="text"/>
Prefix:	<input type="text"/>
First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
Name of Partner Agency (e.g., School District)	
<input type="text"/>	
Type of Partner Agency (e.g., School District)	
<input type="text"/>	
Partner Agency Address	
Street 1:	<input type="text"/>
Street 2:	<input type="text"/>
City:	<input type="text"/>
County:	<input type="text"/>
State:	<input type="text"/>
Province:	<input type="text"/>
Zip / Postal Code:	<input type="text"/>
Country:	<input type="text"/>
Telephone:	<input type="text"/>
Fax:	<input type="text"/>
E-mail:	<input type="text"/>

## Section 13: INCIDENT DATA

Incident data is required for the Secure Our Schools grant program. The data reported should cover the time period of September 1, 2006 to August 31, 2007 and should only include incidents that took place in and around the partnering schools. Please refer to the program guide for specific information and instructions regarding the data required for this submission.

Check here if not applicable.

Type of Incident	# of Incidents Reported
Homicide	
Sexual Offenses	
Aggravated/Major Assaults—for example, an attack with hands, fist, feet, or weapons on an individual.	
Simple/Minor Assaults—stalking, intimidation/bullying/coercion, etc.	
Thefts (Includes Reports of Stolen Property)	
Possession/Sale of Illegal Weapons	
Vandalism/Destruction of Property	
Alcohol-Related Offenses	
Possession, Use or Sale of Drugs	
Disorderly Conduct	

School Data	Totals
Truancy	
Detentions	
Suspensions	
Expulsions	
Threats to School Property	
# of schools involved in project	
Total Student Population for Involved Schools	

## Section 14: CERTIFICATION OF REVIEW AND REPRESENTATION OF COMPLIANCE WITH REQUIREMENTS

### Certification of Review of 28 C.F.R. Part 23/Criminal Intelligence Systems

You must answer this question regardless of the type of COPS grant you are applying for. Please review the COPS Application Guide: Legal Requirements Section for additional information.

Please check one of the following, as applicable to your agency's intended use of this grant:

- Yes, my agency will use these COPS grant funds (if awarded) to operate an interjurisdictional criminal intelligence system. By signing below, we assure that our agency will comply with the requirements of 28 C.F.R. Part 23.
- No, my agency will not use these COPS grant funds (if awarded) to operate an interjurisdictional criminal intelligence system.

The signatures of the applicant's Authorized Organizational Representative (on-line applications only), Law Enforcement Executive/Program Official and Government Executive/Financial Official, and any applicable program partners on the Certification of Review and Representation of Compliance with Requirements:

- 1) Assures the COPS Office that the applicant will comply with all legal, administrative, and programmatic requirements that govern the applicant for acceptance and use of federal funds as outlined in the applicable COPS Application Guide; AND
- 2) Attests to the accuracy of the information submitted with this application (including the Budget Detail Worksheets).

The signatures below must be made by the actual executives named on this application unless there is an officially documented authorization for a delegated signature. If your jurisdiction has such an official document, it must be attached to this application. Applications with missing, incomplete, or inaccurate signatures or responses may not be considered for funding. Stamped or electronic signatures (unless applying online via Grants.gov) also will not be accepted. Original signatures are required. Faxed copies will not be accepted. Applications postmarked after the final application deadline date may not be considered for funding.

Signatures shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

Please be advised that a hold may be placed on this application if it is deemed that the applicant agency is not in compliance with federal civil rights laws, and/or is not cooperating with an ongoing federal civil rights investigation, and/or is not cooperating with a COPS Office compliance investigation concerning a current grant award.

By signing below, I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Authorized Organizational Representative's Signature:

Completed Upon Submission to Grants.gov

Date:

Completed Upon Submission to Grants.gov

**Law Enforcement Executive/Program Official:**

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Signature: \_\_\_\_\_

Date:

---

**Government Executive/Financial Official:**

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Signature: \_\_\_\_\_

Date:



---

Signing this page also assures the COPS Office that you have read, understand, and agree, if awarded, to abide by the grant terms and conditions as outlined in the Assurances and Certifications. The signed hard copy of the Assurances and Certifications should be kept in the agency's files and furnished upon request.

---

**GRANTS.GOV NOTE:**

When applying online via Grants.gov, the Authorized Organizational Representative's signature will be the only signature submitted online. However, the Law Enforcement Executive/Program Official and the Government Executive/Financial Official signatures, as well as any applicable program partners' signatures, are MANDATORY and a hard copy of the Certification of Review and Representation of Compliance with Requirements should be kept in the agency's files and furnished upon request. Signatures shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

---

**PAPERWORK REDUCTION ACT NOTICE**

The public reporting burden for this collection of information is estimated to be up to eight average hours per response, depending upon the COPS program being applied for including time for searching existing data sources, gathering the data needed, and completing and reviewing the application. Send comments regarding this burden estimate or any other aspects of the collection of this information, including suggestions for reducing this burden, to the Office of Community Oriented Policing Services, U.S. Department of Justice, 1100 Vermont Avenue, N.W., Washington, D.C. 20530; and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

You are not required to respond to this collection of information unless it displays a valid OMB control number. The OMB control number for this application is 1103-0098 and the expiration date is 08/31/2011.

## SECTION 15: ASSURANCES

Several provisions of federal law and policy apply to all grant programs. We (the Office of Community Oriented Policing Services) need to secure your assurance that the applicant will comply with these provisions. If you would like further information about any of these assurances, please contact your state's COPS Grant Program Specialist at (800) 421-6770.

By the applicant's authorized representative's signature, the applicant assures that it will comply with all legal and administrative requirements that govern the applicant for acceptance and use of federal grant funds. In particular, the applicant assures us that:

1. It has been legally and officially authorized by the appropriate governing body (for example, mayor or city council) to apply for this grant and that the persons signing the application and these assurances on its behalf are authorized to do so and to act on its behalf with respect to any issues that may arise during processing of this application.
2. It will comply with the provisions of federal law, which limit certain political activities of grantee employees whose principal employment is in connection with an activity financed in whole or in part with this grant. These restrictions are set forth in 5 U.S.C. § 1501, et seq.
3. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act, if applicable.
4. It will establish safeguards, if it has not done so already, to prohibit employees from using their positions for a purpose that is, or gives the appearance of being, motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business or other ties.
5. It will give the Department of Justice or the Comptroller General access to and the right to examine records and documents related to the grant.
6. It will comply with all requirements imposed by the Department of Justice as a condition or administrative requirement of the grant, including but not limited to: the requirements of 28 CFR Part 66 and 28 CFR Part 70 (governing administrative requirements for grants and cooperative agreements); 2 CFR Part 225 (OMB Circular A-87), 2 CFR 220 (OMB Circular A-21), 2 CFR Part 230 (OMB Circular A-122) and 48 CFR Part 31.000, et seq. (FAR 31.2) (governing cost principles); OMB Circular A-133 (governing audits) and other applicable OMB circulars; the applicable provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended; 28 CFR Part 38.1; the current edition of the COPS Grant Monitoring Standards and Guidelines; the applicable COPS Grant Owners Manuals; and with all other applicable program requirements, laws, orders, regulations, or circulars.
7. If applicable, it will, to the extent practicable and consistent with applicable law, seek, recruit and hire qualified members of racial and ethnic minority groups and qualified women in order to further effective law enforcement by increasing their ranks within the sworn positions in the agency.
8. It will not, on the ground of race, color, religion, national origin, gender, disability or age, unlawfully exclude any person from participation in, deny the benefits of or employment to any person, or subject any person to discrimination in connection with any programs or activities funded in whole or in part with federal funds. These civil rights requirements are found in the non-discrimination provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 U.S.C. § 3789 (d)); Title VI of the Civil Rights Act of 1964, as amended (42 U.S.C. § 2000d); the Indian Civil Rights Act (25 U.S.C. §§ 1301-1303); Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794); Title II, Subtitle A of the Americans with Disabilities Act (ADA) (42 U.S.C. § 12101, et seq.); the Age Discrimination Act of 1975 (42 U.S.C. § 6101, et seq.); and Department of Justice Non-Discrimination Regulations contained in Title 28, Parts 35 and 42 (subparts C, D, E and G) of the Code of Federal Regulations.
9. In the event that any court or administrative agency makes a finding of discrimination on grounds of race, color, religion, national origin, gender, disability or age against the applicant after a due process hearing, it agrees to forward a copy of the finding to the Office of Civil Rights, Office of Justice Programs, 810 7th Street, NW, Washington, D.C. 20531.
10. Grantees that have 50 or more employees and grants over \$500,000 (or over \$1,000,000 in grants over an eighteen-month period), must submit an acceptable Equal Employment Opportunity Plan ("EEO Plan") or EEOP short form (if grantee is required to submit an EEOP under 28 CFR 42.302), that is approved by the Office of Justice Programs, Office for Civil Rights within 60 days of the award start date. For grants under \$500,000, but over \$25,000, or for grantees with fewer than 50 employees, the grantee must submit an EEOP Certification. (Grantees of less than \$25,000 are not subject to the EEOP requirement.)
11. Pursuant to Department of Justice guidelines (June 18, 2002 Federal Register (Volume 67, Number 117, pages 41455-41472)), under Title VI of the Civil Rights Act of 1964, it will ensure meaningful access to its programs and activities by persons with limited English proficiency.
12. It will ensure that any facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify us if advised by the EPA that a facility to be used in this grant is under consideration for such listing by the EPA.

11. If the applicant's state has established a review and comment procedure under Executive Order 12372 and has selected this program for review, it has made this application available for review by the state Single Point of Contact.

12. It will submit all surveys, interview protocols, and other information collections to the COPS Office for submission to the Office of Management and Budget for clearance under the Paperwork Reduction Act of 1995 if required.

13. It will comply with the Human Subjects Research Risk Protections requirements of 28 CFR Part 46 if any part of the funded project contains non-exempt research or statistical activities which involve human subjects and also with 28 CFR Part 22, requiring the safeguarding of individually identifiable information collected from research participants.

14. Pursuant to Executive Order 13043, it will enforce on-the-job seat belt policies and programs for employees when operating agency-owned, rented or personally-owned vehicles.

15. It will not use COPS funds to supplant (replace) state, local, or Bureau of Indian Affairs funds that otherwise would be made available for the purposes of this grant, as applicable.

16. If the awarded grant contains a retention requirement, it will retain the increased officer staffing level and/or the increased officer redeployment level, as applicable, with state or local funds for a minimum of one full local budget cycle following expiration of the grant period.

17. It will not use any federal funding directly or indirectly to influence in any manner a Member of Congress, a jurisdiction, or an official of any government, to favor, adopt, or oppose, by vote or otherwise, any legislation, law ratification, policy or appropriation whether before or after the introduction of any bill, measure, or resolution proposing such legislation, law, ratification, policy or appropriation as set forth in the Anti-Lobby Act, 18 U.S.C. 1913.

False statements or claims made in connection with COPS grants (including cooperative agreements) may result in fines, imprisonment, disbarment from participating in federal grants or contracts, and/or any other remedy available by law.

I certify that the assurances provided are true and accurate to the best of my knowledge.

Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

\_\_\_\_\_  
Signature of Law Enforcement Executive (or Official with  
Programmatic Authority, as applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Government Executive (or Official with  
Financial Authority, as applicable)

\_\_\_\_\_  
Date



## SECTION 16: CERTIFICATIONS

### Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; Drug-Free Workplace Requirements Coordination with Affected Agencies

Although the Department of Justice has made every effort to simplify the application process, other provisions of federal law require us to seek your agency's certification regarding certain matters. Applicants should read the regulations cited below and the instructions for certification included in the regulations to understand the requirements and whether they apply to a particular applicant. Signing this form complies with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying," 28 CFR Part 67, "Government-Wide Debarment and Suspension (Nonprocurement)," 28 CFR Part 83 Government-Wide Requirements for Drug-Free Workplace (Grants)," and the coordination requirements of the Public Safety Partnership and Community Policing Act of 1994. The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

#### 1. Lobbying

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, 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 the extension, continuation, renewal, amendment or modification of any federal grant or cooperative agreement;

B. If any funds other 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 subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

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

As required by Executive Order 12549, Debarment and Suspension, and implemented at 2 CFR Part 2867, for prospective participants in primary covered transactions, as defined at 2 CFR Part 2867, Section 2867.437 -

A. The applicant certifies that it and its principals:

(i) 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;

(ii) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) or private agreement or transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion or receiving stolen property, making false claims, or obstruction of justice, or commission of any offense indicating a lack of business integrity or business honesty that seriously and directly affects your present responsibility.

(iii) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (A)(ii) of this certification; and

(iv) 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 28 CFR Part 83, for grantees, as defined at 28 CFR Part 83, Sections 83 and 83.510 -

A. The applicant certifies that it will, or will continue to, provide a drug-free workplace by:

(i) 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;

(ii) Establishing an on-going drug-free awareness program to inform employees about -

- (a) The dangers of drug abuse in the workplace;
- (b) The grantee's policy of maintaining a drug-free workplace;
- (c) Any available drug counseling, rehabilitation and employee assistance programs; and
- (d) The penalties that may be imposed upon employees for drug- abuse violations occurring in the workplace;
- (iii) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (i);

(iv) Notifying the employee in the statement required by paragraph (i) that, as a condition of employment under the grant, the employee will -

- (a) Abide by the terms of the statement; and
- (b) Notify the employer 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;
- (v) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (iv)(b) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: COPS Office, 1100 Vermont Ave., NW, Washington, D.C. 20530. Notice shall include the identification number(s) of each affected grant.
- (vi) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (iv)(b), with respect to any employee who is so convicted -

(a) 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

(b) 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;

(vii) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (i), (ii), (iii), (iv), (v) and (vi).

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 (street address, city, county, state, zip code)

Check  if there are workplaces on file that are not identified here.

4. Coordination

The Public Safety Partnership and Community Policing Act of 1994 requires applicants to certify that there has been appropriate coordination with all agencies that may be affected by the applicant's grant proposal if approved. Affected agencies may include, among others, the Office of the United States Attorney, state or local prosecutors, or correctional agencies. The applicant certifies that there has been appropriate coordination with all affected agencies.

Grantee Agency Name and Address:

City and County of San Francisco  
 1 Dr. Carlton B. Goodlett Place  
 San Francisco, CA 94102

Grantee IRS/ Vendor Number: 94-6000479

False statements or claims made in connection with COPS grants (including cooperative agreements) may result in fines, imprisonment, disbarment from participating in federal grants or contracts, and/or any other remedy available by law.

I certify that the assurances provided are true and accurate to the best of my knowledge.

Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

Typed Name and Title of Law Enforcement Executive (or Official with Programmatic Authority, as applicable):

Kevin Ryan, Director  
 Mayor's Office of Criminal Justice

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Typed Name and Title of Government Executive (or Official with Financial Authority, as applicable):

Gavin Newsom, Mayor  
City and County of San Francisco  
1 Dr. Carlton B. Goodlett Place  
San Francisco, CA 94102

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Other Attachment File(s)**

---

\* Mandatory Other Attachment Filename:



---

To add more "Other Attachment" attachments, please use the attachment buttons below.





COPY

U.S. Department of Justice

Office of Community Oriented Policing Services (COPS).

Office of the Director  
1100 Vermont Ave., NW  
Washington, DC 20530

September 21, 2009

Director Kevin Ryan  
San Francisco, City and County of  
1 Dr. Carlton B. Goodlett Place  
City Hall Suite 496  
San Francisco, CA 94102

Re: Technology Program Grant #2009CKWX0455  
ORI#: CA138ZZ

Dear Director Ryan:

Congratulations! On behalf of Attorney General Eric Holder, I am pleased to inform you that the COPS Office has approved your agency's request for funding in the amount of \$1,000,000 under the COPS Technology Program. Enclosed in this packet is your grant award. **The award document must be signed and returned to the COPS Office within 90 days from the date of this letter to officially accept your grant.** On the reverse side of the grant award is a list of conditions that apply to your grant. You should read and familiarize yourself with these conditions. In addition, your Grant Owner's Manual and other important information to assist you with the implementation of your award are available online at <http://www.cops.usdoj.gov/Default.asp?Item=2200>.

The official start date of your grant is March 11, 2009. Therefore, you can be reimbursed for approved expenditures made on or after this date. Please carefully review the Financial Clearance Memorandum included in your award package to determine your approved budget, as some of your requested items may not have been approved by the COPS Office during the budget review process, and grant funds may only be used for approved items. Also, please be aware that any vendor or contractor who participated in drafting your grant application may not receive federal funding for any procurement under this award.

Within a few weeks, you will receive a financial documentation package from the Office of the Chief Financial Officer, Office of Justice Programs. This important package will contain the forms and instructions necessary to begin drawing down funds for your grant.

Once again, congratulations on your Technology Program award. If you have any questions about your grant, please do not hesitate to call your Grant Program Specialist through the COPS Office Response Center at 1.800.421.6770.

Sincerely,

David M. Buchanan  
Acting Director



U. S. Department of Justice  
 Community Oriented Policing Services  
 Grants Administration Division  
 Law Enforcement Technology

Treasury Account Symbol (TAS) 15X0406

Grant #: 2009CKWX0455  
 ORI #: CA138ZZ

Applicant Organization's Legal Name: San Francisco, City and County of

OJP Vendor #: 946000479  
 DUNS#: 046004081

**Law Enforcement Executive:** Director Kevin Ryan  
 Address: 1 Dr. Carlton B. Goodlett Place  
 City Hall Suite 496  
 City, State, Zip Code: San Francisco, CA 94102  
 Telephone: (415) 554-6564  
 Fax: (415) 554-6995

**Government Executive:** Mayor Gavin Newsom  
 Address: 1 Dr. Carlton B. Goodlett Place  
 City of Hall Suite 200  
 City, State, Zip Code: San Francisco, CA 94102  
 Telephone: (415) 554-6144  
 Fax: (415) 554-6160

Award Start Date: 3/11/2009

Award End Date: 3/10/2012

Award Amount: \$ 1,000,000.00

SEP 09 2009

David Buchanan  
 Acting Director

Date

By signing this Award Document, the grantee agrees to abide by all 19 Grant Terms and Conditions on the reverse side of this document and the attached pages:

DIRECTOR, KEVIN V. RYAN

9-25-09

Signature of Law Enforcement Official with the Authority to Accept this Grant Award

Typed Name and Title of Law Enforcement Official

Date

Signature of Government Official with the Authority to Accept this Grant Award

Typed Name and Title of Government Official

Date

False statements or claims made in connection with COPS grants may result in fines, imprisonment, debarment from participating in federal grants or contracts, and/or any remedy available by law to the Federal Government.

Award ID:  
 95388