File Number: (Provided by Clerk of Board of Supervisors) Grant Resolution Information Form (Effective July 2011)	
The following describes the grant referred to in th	ne accompanying resolution:
Grant Title: FEMA Emergency Operations Ce	enter Grant FY2024
2. Department: Fire Department	
3. Contact Person: Mark Corso	Telephone: 415-558-3417
4. Grant Approval Status (check one):	
[X] Approved by funding agency	[] Not yet approved
5. Amount of Grant Funding Approved or Applied	d for: \$637,200
6a. Matching Funds Required: \$212,400 b. Source(s) of matching funds (if applicable):G	eneral Fund
7a. Grant Source Agency: Federal Emergency M b. Grant Pass-Through Agency (if applicable): N	• •
8. Proposed Grant Project Summary: Purchase	replacement personal breathing apparatus
9. Grant Project Schedule, as allowed in approve	al documents, or as proposed:
Start-Date: 08/01/2024	End-Date: 08/20/2027
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 th requirements? N/A	e goals of the Department's Local Business Enterprise (LBE)
d. Is this likely to be a one-time or ongoing red	quest for contracting out? N/A
11a. Does the budget include indirect costs?	[] Yes [X] No
b1. If yes, how much? \$ N/A b2. How was the amount calculated? N/A	
c1. If no, why are indirect costs not included? [] Not allowed by granting agency [] Other (please explain):	[X] To maximize use of grant funds on direct services

c2. If no indirect costs are included, what would have been the indirect costs? Administrative Expenses

12. Any other significant grant requirements or comments: **Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability) 13. This Grant is intended for activities at (check all that apply): [X] Existing Site(s) [] Existing Structure(s) [X] Existing Program(s) or Service(s) [] Rehabilitated Site(s) [] Rehabilitated Structure(s) [] New Program(s) or Service(s) New Site(s) [] New Structure(s) 14. The Departmental ADA Coordinator 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 disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to: 1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures; 2. Having auxiliary aids and services available in a timely manner in order to ensure communication access; 3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers. If such access would be technically infeasible, this is described in the comments section below: Comments: Departmental ADA Coordinator or Mayor's Office of Disability Reviewer: Mark Corso (Name) **Deputy Director** (Title) Mark Corso Date Reviewed: 10/1/25

Department Head or Designee Approval of	Grant Information Form:
Mark Corso	
(Name) Deputy Director	
(Title) Date Reviewed: 10/1/25	Mark Corso
	(Signature Required)