# **Entire Application**

## **Applicant's Acknowledgements**

\* I certify the DUNS number in this application is our only DUNS number and we have confirmed it is active in SAM.gov as the correct number.

\* As required per 2 CFR ¿ 25.205, I certify that prior to submission of this application I have checked the DUNS number listed in this application against the SAM.gov website and it is a correct and active at time of submission.

\* I certify that the applicant organization has consulted the appropriate Funding Opportunity Announcement and that all requested activities are programmatically allowable, technically feasible and can be completed within the award's one (1) year Period of Performance (POP).

\* I certify that the applicant organization is aware that this application period is open from 11/03 to 12/05/2014 and will close at 5 PM EST; further that the applicant organization is aware that that once an application is submitted, even if the application period is still open, a submitted application cannot be changed or released back to the applicant for modification.

\* I certify that the applicant organization is aware that it is solely the applicant organization's responsibility to ensure that all activities funded by this award(s), comply with Federal Environmental planning and Historic Preservation (EHP) regulations, laws, and Executive Orders as applicable. The EHP Screening Form designed to initiate and facilitate the EHP Review is available at: <a href="http://www.fema.gov/media-library/assets/documents/30521?id=6906">http://www.fema.gov/media-library/assets/documents/30521?id=6906</a>

\* I certify that the applicant organization is aware that the applicant organization is ultimately responsible for the accuracy of all application information submitted. Regardless of the applicant's intent, the submission of information that is false or misleading may result in actions by FEMA that include, but are not limited to: the submitted application not being considered for award, an existing award being locked pending investigation, or referral to the Office of the Inspector General.

Signed by Joanne Hayes-White on 2014-12-05

## Overview

\*Did you attend one of the workshops conducted by an AFG regional fire program specialist?

No, I have not attended workshop

\*Did you participate in a webinar that was conducted by AFG?

Yes

\*Are you a member, or are you currently involved in the management, of the fire department or nonaffiliated EMS organization or a State Fire Training Academy applying for this grant with this application?

Yes, I am a member/officer of this applicant

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

**Preparer Information** 

- \* Preparer's Name
- Address 1
- Address 2
- City
- \*State

\* Zip

## Need help for ZIP+4?

In the space below please list the person your organization has selected to be the primary point of contact (POC) for this grant. This should be a department officer or member of the organization who will see this grant through completion, to include closeout. Reminder: if this person changes at any time during the period of performance please update this information. Please list only phone numbers where we can reach the POC.

- .

	Primary Point of Contact
* Title	Assistant Deputy Chief
Prefix (select one)	Mr.
* First Name	Shane
Middle Initial	
* Last Name	Francisco
* Primary Phone(e.g. 123-456-7890)	415-558-3680 Ext. Type work
* Secondary Phone (e.g. 123-456-7890)	415-238-5266 Ext. Type cell
Optional Phone (e.g. 123-456-7890)	Type Select
Fax (e.g. 123-456-7890)	
* Email (e.g. user@xyz.org)	shane.francisco@sfgov.org

# **Contact Information**

Title

Alternate Contact Information Number 1 Chief Financial Officer

Prefix (select one)	N/A
* First Name	Mark
Middle Initial	
* Last Name	Corso
* Primary Phone	415-558-3417 Ext. Type work
*Secondary Phone	415-558-3401 Ext. Type home
Optional Phone	Туре
Fax	
*Email	mark.corso@sfgov.org
	Alternate Contact Information Number 2
* Title	Deputy Chief
Prefix (select one)	N/A
* First Name	Raymond
Middle Initial	
* Last Name	Guzman
* Primary Phone	415-558-3411 Ext. Type work
*Secondary Phone	415-558-3401 Ext. Type home
Optional Phone	Туре
Fax	
*Email	raymond.guzman@sfgov.org

## **Applicant Information**

EMW-2014-FV-02608 Originally submitted on 12/05/2014 by Joanne Hayes-White (Userid: mariotrevino)

# **Contact Information:**

Address: 698 Second Street City: San Francisco State: California Zip: 94107 Day Phone: 4155583417 Evening Phone: 4155583417 Cell Phone: 4155583417 Email: mark.corso@sfgov.org

#### Application number is EMW-2014-FV-02608

<ul> <li>Organization Name</li> </ul>	San Francisco Fire Department	
* Type of Applicant	Fire Department/Fire District	
<ul> <li>Fire Department/District, Nonaffiliated E of Jurisdiction Served</li> </ul>	MS, and Regional applicants, select type	Other (explain)
If "Other", please enter the type of Jurisdi	ction	City & County

### SAM.gov (System For Award Management)

 What is the legal name of your Entity as it appears in SAM.gov?
 Note: This information must match your <u>SAM.gov</u> profile if your organization is using the DUNS number of your Jurisdiction.
 San Francisco Fire Department

• What is the legal business address of your Entity as it appears in <u>SAM.gov</u>? Note: This information must match your <u>SAM.gov</u> profile if your organization is using the DUNS number of your Jurisdiction.

Note: This information must match your S	Alvi.gov profile if your organiza
* Mailing Address 1	698 Second Street
Mailing Address 2	
* City	San Francisco
* State	California
* Zip	94107 - 2015 Need help for ZIP+4?
* <u>Employer Identification Number</u> (e.g. 12-3456789) Note: This information must match your <u>SAM.gov</u> profile.	94-6000417
* Is your organization using the DUNS number of your Jurisdiction?	Yes
I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application. (Required if you select Yes above)	
• What is your 9 digit <u>DUNS number</u> ?	033428819 (call 1-866-705-5711 to get a
If you were issued a 4 digit number (DUNS plus 4) by your Jurisdiction in addition to your 9 digit number please enter it here. Note: This is only required if you are using your Jurisdiction's DUNS number and have a separate bank account from your Jurisdiction. Leave the field blank if you are using your Jurisdiction's bank account or have your own <u>DUNS number</u> and bank account separate from your Jurisdiction.	
Is your <u>DUNS Number</u> registered in <u>SAM.gov</u> (System for Award Management previously CCR.gov)?	Yes
<ul> <li>I certify that my organization/entity is registered and active at <u>SAM.gov</u> and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate,</li> </ul>	Z

DUNS number)

current and consistent with my organization's/entity's <u>SAM.gov</u> record.

# Headquarters or Main Station Physical Addr

Headquarters or Main Station Physical Ac	ldress	
* Physical Address 1	698 Second Street	
Physical Address 2		
* City	San Francisco	
* State	California	
* Zip	94107 - 2015 Need help for ZIP+4?	
Mailing Address		
* Mailing Address 1	698 Second Street	
Mailing Address 2		
* City	San Francisco	
* State	California	
* Zip	94107 - 2015 Need help for ZIP+4?	
Bank Account Information		
• The bank account being used is: (Please select one from right)	Note: If this is selected, a 4 digit DUNS p Maintained by my Jurisdiction	olus 4 is required if you answered "YES" to using the DUNS number of your Jurisdiction.
Note: The following banking information n		
* Type of bank account	Checking	
• Bank routing number - <u>9 digit</u> number on the bottom left hand corner of your check	121000358	
*Your account number	0066180050	
Additional Information		
• For this fiscal year (Federal) is your orga any other grant program that may duplica request?		No
* If awarded, will your organization expend during your organization's fiscal year? If "	Yes", your organization may be required	
to undergo an A-133 audit. Reasonable of eligible expenditure and should be include Please enter audit costs only once under Details" section of the application.	ed in the applicant's proposed budget.	Yes
* Is the applicant delinquent on any Feder	al debt?	No
If you answered "Yes" to any of the addition	onal questions above, please provide an e	explanation in the space provided below:

The Department has received a number of Federal awards that will be expended during its fiscal year. These funds predominately come in the form of Federal grants. The Department was allocated funding in the 2013 Assistance to Fire Fighters grant that will be expended in the fiscal year that exceeds the \$750,000 threshold alone. In addition, the Department has received a number of Homeland Security (UASI) grant awards as well as a Port Security grant award that will push the Department's Federal allocation past the threshold.

# Fire Department/Fire District Department Characteristics (Part I)

<ul> <li>Is this application being submitted on behalf of a Federal Fire Department or organization contracted by the Federal government which is solely responsible for the suppression of fires on Federal property?</li> </ul>	No
• What kind of organization do you represent?	All Paid/Career
If you answered "Combination" above, what is the percentage of career members in your organization?	%
If you answered "Volunteer", "Combination" or "Paid on-call", how many of your volunteer Firefighters are paid members from another career department?	
* What type of community does your organization serve?	Urban
Is your Organization considered a Metro Department?	Yes
* What is the square mileage of your first-due response area? Primary/First Due Response Area is a geographical area proximate to a fire or rescue facility and normally served by the personnel and apparatus from that facility in the event of a fire or other emergency and does not include daily or seasonal population surges.	48
* What percentage of your primary response area is protected by hydrants?	100 %
* In what county/parish is your organization physically located? If you have more than one station, in what county/parish is your main station located?	San Francisco County
* Does your organization protect critical infrastructure?	Yes
If "Yes", please describe the critical infrastructure protected below :	

San Francisco is home to a variety of critical infrastructure, both for the City itself, but also for State, National, and International interests. Within the San Francisco Fire Department (SFFD)'s response area is an array of critical infrastructures including National monuments and famous landmarks, bridges, sports arenas, postal facilities, fuel tanks, water treatment facilities, under bay fuel transmission lines, power and energy infrastructure, educational, medical, research, financial, technological industries and home to over 30 international financial institutions. The SFFD services a major international airport, and is home to a regional Federal Reserve Bank. San Francisco is ranked one of the top seven Tier 1 Urban Area Cities and the Port of San Francisco is identified as a Group 1 Port at highest risk for terrorist attack. San Francisco makes up a large component of the Bay Area Rapid Transit (BART) system, and is a large hub for a variety of other regional transit systems that service the rest of the Bay Area and the State of California.

* How much of your primary response area is for agriculture, wildland, open space,	21 0/
or undeveloped properties?	31 70

- \* What percentage of your primary response area is for commercial and industrial purposes? 25 %
- \* What percentage of your primary response area is used for residential purposes? 44 %

<ul> <li>How many occupied structures (commercial, industrial, residential, or institutional) in your primary response area are more than three(3) stories tall? Do not include structures which are not regularly occupied such as silos, towers, steeples, etc.</li> </ul>	4225
* What is the permanent resident population of your <u>Primary/First-Due Response</u> <u>Area or jurisdiction served?</u>	837442
*Do you have a seasonal increase in population?	No
If "Yes" what is your seasonal increase in population?	
* How many active firefighters does your department have who perform firefighting duties?	1238
<ul> <li>How many members in your department/organization are trained to the level of EMT-I or EMT-Advanced?</li> </ul>	1483
Does your department have a Community Paramedic program?	No
How many personnel are trained to the Community Paramedic level?	
* How many stations are operated by your organization?	44
* Is your department compliant to your local Emergency Management standard for the National Incident Management System (NIMS)?	Yes
* Do you currently report to the National Fire Incident Reporting System (NFIRS)? Note: You will be required to report to NFIRS for the entire period of the grant.	Yes
If you answered "Yes" above, please enter your FDIN/FDID	38005
* How many of your active firefighters are trained to the level of Firefighter I? (Include all personnel who have attained Firefighter I)	100 %
* How many of your active firefighters are trained to the level of both Firefighter I and Firefighter II?	100 %
If you answered less than 100% to either guestion above, are you requesting for	

training funds in this application to bring 100% of your firefighters into compliance with NEPA 10012

If you indicated that less than 100% of your firefighters are trained to the Firefighter II level and you are not asking for training funds to bring everyone to the FF II level in this application, please describe in the box below your training program and your plans to bring your membership up to Firefighter II.

\* What services does your organization provide?

Advanced Life Support Airport Rescue Firefighting (ARFF) Basic Life Support Formal/Year-Round Fire Prevention Program Haz-Mat Operational Level Haz-Mat Technical Level Maritime Operations/Firefighting Rescue Operational Level Rescue Technical Level Structural Fire Suppression Wildland Fire Suppression

# Emergency Medical Responder

\* Please describe your organization and/or community that you serve.

The City and County of San Francisco has an extremely diverse, multi-national population of 837, 442, a 4% increase from 2010, comprising 49 square miles, with 29 miles of coastline. It is ranked as the second most densely populated major city in the United States, yielding roughly 17,867 persons/square mile with its resident population alone. In 2013, 16.9 million tourists visited San Francisco and with an estimated 614,748 commuters, the average daily population swells to 1.5 million during the week. The City, surrounded by water on 3 sides, has two major bridges, the Golden Gate Bridge and the Bay Bridge, and together, 83 million vehicles traverse these two bridges per year.

Within the San Francisco Fire Department's (SFFD) response area is an array of critical infrastructures. San Francisco is ranked as one of the top seven Tier 1 Urban Area Cities and the Port of San Francisco is identified as a Group 1 Port at highest risk for terrorist attack.

After the five-year economic downturn, San Francisco has begun to experience a commercial boom, with 26 new high rises currently under construction that will add to the existing 505 high rises. In addition, two major construction projects are underway in San Francisco, for its version of the "Big Dig". The central subway/underground project is underway with a 1.7 mile extension that will provide underground rail access to additional neighborhoods. In addition, a new Transbay Transit Center will replace the old train and bus station, extend the current train line, and accommodate California's new high speed rail project.

With regard to the City's residential sector, there are approximately 380,971 housing units, 67% of which are multi-unit structures. With 14,000 Victorian houses, much of the City's housing stock is old and primarily of wood construction; 50% of the City's historic residential housing was built prior to 1940 and 25% was built between 1940 and 1959.

The SFFD's 1,490 Firefighting and Emergency Medical personnel respond to this robust and challenging community with 44 Engines and 20 Trucks divided into two Divisions and nine Battalion Districts. Specialty units of the SFFD include: 2 Heavy Rescue Squads, 2 Coastal Rescue units (Cliff & Surf), 2 Rescue Boats, 2 Rescue

Water Craft, 2 Fireboats, Mobile Command Vehicle, Multi-Casualty Unit, Hazardous Materials Unit, CO2 unit, and a Mobile Air Unit. All SFFD Firefighters are 100% compliant in NFPA 1001/1002 Standards. In 2013, the SFFD responded to 120,315 calls for service. For 2013, Firehouse magazine ranked the SFFD's Engine 3 as the busiest engine in the country with 9,885 runs and Truck 3 also ranked as the 3rd busiest truck with 4,662 runs.

In addition to the SFFD's immediate responsibilities within the City, it also participates as a collaborative partner in the greater Public Safety community as follows: active membership in Metropolitan Medical Response System (MMRS), Urban Search and Rescue (USAR), and Regional Task Force (RTF) response for Chemical, Biological, Radiological Nuclear, Explosive (CBRNE) incidents. Moreover, the SFFD, the California Office of Emergency Services (Cal-OES), and the surrounding eight Bay Area Counties have developed the first Regional Disaster Response Plan for responding to a catastrophic man-made or natural disaster, such as a paralyzing major earthquake or pandemic. The SFFD has also been a contributor to the State of California Master Mutual Aid Agreement since its inception in 1950, providing mutual aid to 49 counties within the State, as well as parts of southern Oregon and western Nevada. Finally, the SFFD, likewise, provides water response mutual aid under the same agreement to the Counties of Alameda, San Mateo, Contra Costa, Marin, Solano and Sonoma Counties.

## Fire Department Characteristics (Part II)

	2013	2012	2011
* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?	6	2	2
<ul> <li>What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?</li> </ul>	51	60	58
• What is the total number of line of duty member fatalities in your jurisdiction over the last three calendar years?	0	0	2
<ul> <li>What is the total number of line of duty member injuries in your jurisdiction over the last three calendar years?</li> </ul>	211	279	268
Over the last three years, what was your organization's average operating budget?	30508539	30086985	27466739
<ul> <li>What percentage of your TOTAL budget is dedicated to personnel costs (salary, overtime and fringe benefits)?</li> </ul>	91%	91%	91%
<ul> <li>What percentage of your annual operating budget is derived from: Enter numbers only, percentages must sum up to 100%</li> </ul>	2013	2012	2011
Taxes?	78 %	78 %	80 %
Bond Issues	0 %	0 %	0 %
EMS Billing?	9 %	9 %	8 %
Grants?	0 %	0 %	0 %
Donations?	0 %	0 %	0 %
Fund drives?	0 %	0 %	0 %
Fee for Service?	4 %	3 %	3 %
Other?	9 %	10 %	9 %
	The other field of De	partmental revenue sou	urces includes funding

If you entered a value into Other field (other than 0), please explainthat the Fire Department (and the City) received from enterprise<br/>departments, specifically in this case from the Federal government<br/>for providing fire and medical services to the San Francisco<br/>International Airport, and from the Port of San Francisco, which<br/>pays for the maintenance and staffing of the Department's fire boat.Does your organization intend to provide a cost share greater than the required amount?<br/>(If applying for a Micro Grant, please select "N/A")NoIf yes, how much additional funding in excess of the required cost share is your organization willing to<br/>contribute? Enter the amount in the box to the right.\$

Note: This figure will not affect the budget calculations .

\* Please describe your organization's need for Federal financial assistance.

The SFFD is requesting much needed financial assistance to upgrade its Hydraulic Extrication tools, increase its number of Thermal Imagining Cameras to be able to deploy to all Engine companies, and purchase five replacement ambulances. Given the long-term recession over the last five years, from which the City is just beginning to recover, the SFFD has found it extremely difficult to secure the funding needed to procure new, as well as replacement equipment for its operations. Due to a variety of factors, including reductions to commercial and residential property tax revenue, State sales tax and Vehicle License Fee revenue reductions, increased unemployment rates, and reductions in State funding for various programs, the City's General Fund has seen a large negative impact to its ability to finance City Departments and programs.

At the onset of the current year's budget process, the City of San Francisco was looking at a fiscal year with a projected shortfall of \$101 million for Fiscal Year 2014-15 and \$118 million for Fiscal Year 2015-16. Given this fiscal environment, the SFFD has not been able to secure operating funds for the replacement of this critical front-line equipment. As the City of San Francisco attempts to grapple with increasing personnel and benefit costs, requests for increases to non-personnel items remain challenging. With the SFFD predominantly funded by the City's General Fund, funding requests for items that the Department would consider a basic part of everyday operations and a high priority, including facility repair, maintenance, and replacement of obsolete equipment, are not always fulfilled for a variety of reasons, such as competing interests from other Departments for General Fund monies. In addition, given the difficulty of receiving funding for replacing and maintaining existing assets (for example, the rescue tools and ambulances the Department is requesting), enhancing the Department's capabilities through new equipment (such as the Thermal Imagers the Department is requesting ) is extremely difficult.

The SFFD's Fiscal Year 2014-15 budget is approximately \$346 million, 75% of which is supported through the City's General Fund. The remaining 25% is funded through State sales tax revenue (13%), EMS Ambulance revenue (8%), Fire Prevention fees (3%), and other fees for services (1%). Of the SFFD's General Fund operating budget, 90% is for personnel costs, including salaries, overtime, and fringe benefits. That leaves the SFFD with 10% to cover all of the non-personnel costs for the Department for everyday operations, including supplies, equipment, fuels, facility maintenance and other every day operational needs.

During the Fiscal Year 2014-15 budget process, the Department was requested to reduce its General Fund support by over \$2.4 million over the next two years. This was

in addition to previous reductions over the past five fiscal years totaling \$51 million. The Department is prepared for the potential of on-going mid-year cuts on the horizon in the current year, as the City experiences the fallout of several funding issues at the State and Federal levels.

The Department has requested a replacement of its heavy-duty rescue tools in previous years' budgets, but to no avail. The Department has also requested funding to replace ambulances in accordance to its fleet replacement plan as approved by the San Francisco Fire Commission. In both cases, the Department has not been able to secure funding to replace all of its units that are aged and outdated, both from an operational as well as technological perspective.

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

Type or Class of Vehicle	Number of Front Line Apparatus	Number of Reserve Apparatus	Number of Seated Riding Positions
Engines or Pumpers (pumping capacity of 750 gpm or greater and water capacity of 300 gallons or more): Pumper, Pumper/Tanker, Rescue/Pumper, Foam Pumper, CAFS Pumper, Type lor Type II Engine Urban Interface	44	16	176
Ambulances for transport and/or emergency response:	49	0	98
Tankers or Tenders (pumping capacity of less than 750 gallons per minute (gpm) and water capacity of 1,000 gallons or more):	1	1	2
Aerial Apparatus: Aerial Ladder Truck, Telescoping, Articulating, Ladder Towers, Platform, Tiller Ladder Truck, Quint	20	5	100
Brush/Quick attack(pumping capacity of less than 750 gpm and water carrying capacity of at least 300 gallons): Brush Truck, Patrol Unit (Pickup w/ Skid Unit), Quick Attack Unit, Mini-Pumper, Type III Engine, Type IV Engine, Type V Engine, Type VI Engine, Type VII Engine	4	0	8
Rescue Vehicles: Rescue Squad, Rescue (Light, Medium, Heavy), Technical Rescue Vehicle, Hazardous Materials Unit	5	2	20
Additional Vehicles: EMS Chase Vehicle, Air/Light Unit, Rehab Units, Bomb Unit, Technical Support (Command, Operational Support/Supply), Hose Tender, Salvage Truck, ARFF (Aircraft Rescue Firefighting), Command/Mobile Communications Vehicle	26	5	38

## Fire Department Call Volume

	2013	2012	2011
* How many responses per year by category? (Enter whole numbers o	nly. If you have no calls for any of the catego	ories, Enter 0)	
Structural Fires	2159	2271	2287
False Alarms/Good Intent Calls	13581	16810	16419
Vehicle Fires	201	246	268
Vegetation Fires	128	110	91
EMS-BLS Response Calls	47605	34653	33787
EMS-ALS Response Calls	43022	52283	52604
EMS-BLS Scheduled Transports	0	0	0
EMS-ALS Scheduled Transports	0	0	0
Community Paramedic Response Calls	0	0	0
Vehicle Accidents w/o Extrication	3055	3111	3073
Vehicle Extrications	25	13	27
Other Rescue	2191	621	704
Hazardous Condition/Materials Calls	1708	1747	1630
Service Calls	3727	3837	3788
Other Calls and Incidents	4385	4613	4185
Total	121787	120315	118863
* How many responses per year by category? (Enter whole numbers o	nly. If you have no calls for any of the catego	pries, Enter 0)	
What is the total acreage of all vegetation fires?	0	0	0
* How many responses per year by category? (Enter whole numbers o	nly. If you have no calls for any of the catego	pries, enter 0)	
In a particular year, how many times does your organization receive Mutual Aid?	3	0	1
In a particular year, how many times does your organization receive Automatic Aid?	0	0	0
In a particular year, how many times does your organization provide Mutual Aid?	2	2	0
In a particular year, how many times does your organization provide Automatic Aid?	0	0	0
Total Mutual / Automatic Aid (please total the responses from the previous two blocks)	5	2	1
Out of the Mutual / Automatic Aid responses, how many were structure fires?	0	0	0

Application Number: EMW-2014-FV-02608

## **Request Information**

1. Select the program for which you are applying. You can apply for as many activities within a program as you need. If you are interested in applying under Vehicle Acquisition or Operations and Safety, you will need to submit separate applications.

Program Name

Vehicle Acquisition

2. Will this grant directly benefit more than one organization?

### No

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

# \$0

* 4. Are you requesting a Micro Grant? A Micro Grant is limited to \$25,000 Federal share. Modification to Facilities activity is ineligible for Micro Grants.	Νο

# **Request Details**

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

	Item	Total Cost	Additional Funding	Action
Ambulance		\$ 157,916	\$ 13,830	<u>View Details</u> Additional Funding <u>Narrative</u>
Ambulance		\$ 157,916	\$ 13,830	<u>View Details</u> Additional Funding <u>Narrative</u>
Ambulance		\$ 157,916	\$ 13,830	<u>View Details</u> <u>Additional Funding</u> <u>Narrative</u>
Ambulance		\$ 157,916	\$ 13,830	<u>View Details</u> <u>Additional Funding</u> <u>Narrative</u>
Ambulance		\$ 157,916	\$ 13,830	<u>View Details</u> Additional Funding <u>Narrative</u>

Vehicle Inventory

Grant-writing fee associated with the preparation of this request.

\$0

View Vehicle Inventory

## Vehicle Inventory

If you have more than 15 emergency response vehicles - other than those categorized as "Other", please provide the oldest, newest, and average age for each type of vehicle.

age

Type or Class	Quantity	Oldest (age	) Newest (age)	Average
Additional Vehicles	31	1988	2014	10
Aerial Apparatus	25	1990	2011	16
Ambulance	49	1999	2014	10
Brush/Quick attack	4	1999	2003	13
Engines (or Pumpers)	60	1991	2013	13
Rescue Vehicles	7	1989	2007	9
Tankers	2	2008	2013	5

# **View Firefighter Vehicle Program**

Vehicle Details		
*1. What type or class of vehicle are you requesting?	Ambulance	
* Please provide a detailed description of the item selected above:	The Department is requesting a new front-line ambulance to replace an aging vehicle in its fleet.	
*2. Cost: (whole dollar amounts only)	\$ 157916	
*3. Is the vehicle you propose to buy:	Replacement of an existing apparatus	

4. Was the vehicle you're requesting to replace built prior to the applicable NFPA vehicle standard from 1992?	No
5. If you are requesting to replace an ambulance, what is the mileage of the ambulance being replaced?	149926
*6. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)	No
Do you intend to use a group purchasing plan for this purchase?	
If No, explain:	
*7. If awarded a grant, are the specifications available for immediate release?	Yes
8. What is the age of the vehicle being replaced?	16 years
*9. Do you have a driver-training program equivalent to national or NFPA standards?	Yes
If No, will you develop one prior to receipt of the vehicle per the Funding Opportunity Announcement (FOA )?	No
*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be entered in the Firefighting Vehicle Additional Funding section)	No
If you are not requesting funding for training, will you obtain the appropriate training through other sources ?	Yes
11. If awarded, will you permanently remove the vehicle to be replaced from your organization's emergency response service ?	Yes
Please enter the type and year of manufacture for vehicle being replaced.	1999 Ford E450
Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:	1FDXE40F8XHA00475
*12. How long have you owned the vehicle you are replacing?	16 Years (whole number only)
*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2013 (documented through vehicle or dispatch logs)?	0 (whole number only)
*14. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?	Yes
*15. Will this vehicle be used for automatic and/or mutual aid?	Both
*16. How many vehicles of the same type/class as the requested vehicle are assigned to the location the requested vehicle will be located?	35

# Firefighting Vehicle - Additional Funding (optional)

**Budget Object Class Definitions** 

Additional Funding		
a. Personnel	Help	\$ 0
b. Fringe Benefits	Help	\$ 0
c. Travel	Help	\$ 0
d. Equipment	Help	\$ 0
e. Supplies	Help	\$ O
f. Contractual	Help	\$ 0
g. Construction	Help	\$ 0
h. Other	Help	\$ O
i. Indirect Charges	Help	\$ 0
j. State Taxes	Help	\$ 13830

# Explanation

This additional funding covers State and local sales tax, as well as California State tire tax.

# Firefighting Vehicle - Narrative

\* Section # 1 Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This

includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. \*4000 characters

The San Francisco Fire Department (SFFD) is requesting 2014 Assistance to Firefighters Grant (AFG) program funding to replace ambulances in its aged vehicle fleet. Given financial difficulties felt in the City in recent years, along with uncertainty about the long-term status of the City's 911 ambulance system as a whole due to changes at the State level, the Department has been unable to secure funding to replace ambulances in its fleet. This has resulted in increased maintenance costs to the Department, as well as decreased emergency response capabilities due to the unreliability of these older units. However, given increased call volume seen by the Department in the past few years due to new residents and visitors of San Francisco, as well as additional mandates from the State increasing the Department's responsibilities to respond to 911 ambulance calls City-wide, the Department must increase the capabilities of its ambulance fleet and purchase new ambulances to retire unreliable units as well as meet current demands of the ambulance system.

In the current year, the SFFD is working to resolve resource issues for its ambulance operations, both equipment and personnel. The SFFD responds to over 80,000 ambulance calls per year, and over 70% of its more than 120,000 annual calls are medical in nature. The Department currently has a fleet of 50 ambulances it uses in front-line field operations to respond to these calls, and employs a dynamic deployment model for its personnel to respond throughout the City. Due to the high volume of runs, as well as the topographical demands (steep hills, traffic, narrow streets) of San Francisco, the Department's ambulance fleet is constantly under heavy stress in the course of responding to emergencies. With averages of 10 years of age and 128,931 miles on their odometers, the Department's ambulances are in need of constant maintenance and regular replacement. The high usage has contributed to high maintenance costs for the Department on an annual basis – for example the five units the Department is proposing to replace had an average of \$20,252 in maintenance and repair costs in fiscal year 2014, a heavy burden on the Department financially. In addition to cost savings, the Department's old ambulance have caused operational issues for the Department, as Department ambulance personnel have had to go out of service responding to a call as their ambulance has broken down enroute to a medical emergency or a hospital. These selected units have an average age of 15 years and mileage of 157,996 miles.

In 2012, the California Emergency Medical Services Authority (EMSA) issued a decision to restore the City and County of San Francisco's Exclusive Operating Area (EOA) rights for 911 ambulance transports back to the San Francisco Fire Department. This mandated the Department be responsible for a baseline of 80% of all 911 medical ambulance calls. Given that at the time of this decision, the Department was operating at approximately 65% of all ambulance calls, this represented a significant increase in the number of calls the Department would be responsible for on an annual basis. In addition to this increase in market share, over the past five years, the City as a whole has seen an increase in over 20% of all medical calls due to increases in residents and the work force in San Francisco. This call volume increase, coupled with the increased responsibilities imposed by the California EMSA, has only increased the daily demands on the Department's aged ambulance fleet. The Department must be able to obtain the resources to sustainably meet the current levels of service, but also the anticipated increase in crease in crease in the Department in the near future. To begin to deal with these challenges, the Department must be able to replace its oldest units that have exceeded their useful life term.

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In addition to these operational benefits as a result of the funding of new ambulances, there are absolutely cost savings the Department would be able to realize as the older ambulances were retired. As mentioned previously, for the five ambulances that the Department wishes to replace as a result of this grant proposal, the average cost of maintenance and repair of five vehicles in the previous fiscal year for the SFFD was \$20,252. This is an annual cost for the Department as a result of the age of these vehicles. New vehicles would dramatically reduce the cost of annual maintenance, and allow the Department to retire its older units. Along with the maintenance savings, the new vehicles have other advantages over the ambulances that are proposed to be replaced, including improved vehicle technologies, improved driver/passenger safety measures, and emission advancements.

Due to the recent revision of its ambulance specifications that the Department has undertaken, there would be long-term cost savings to the Department in addition to any annual maintenance and repair savings seen by the Department. Through much research, the Department has developed specifications for these new ambulances going forward, specifications that it believes meet the operational needs for its members in the most cost-efficient way possible. As a result of its analysis of the workload of its ambulance fleet, the Department has shifted to a re-mountable chassis model for its new ambulances, and has developed specifications to this extent that are ready for the bidding and procurement process. This ambulance model allows for a distinction between the ambulance chassis and box, and considers these as separate units of the vehicle, allowing the Department to replace only the part of the ambulance that needs to be replaced due to wear and tear. Due to the topographical challenges of the City of San Francisco and high daily call volume of 911 calls, the SFFD's ambulances are overly stressed in on an every-day basis. This has resulted in many cases in premature cracking throughout the body of the vehicle. Therefore, with its re-mountable chassis model, the Department can re-use the ambulance box multiple times by simply replacing the chassis on the unit that is damaged, saving the costs of the box by simply reusing the existing one. This could save approximately \$40,000-50,000 per unit upon time of replacement, representing significant long-term savings for the Department.

\* Section # 3 Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? \*4000 characters

This awarding of this project would have an overall positive impact to the daily operations of the Fire Department, both from the perspective of providing emergency services to the community but also to the health and safety of our members. These new ambulances would improve the availability of resources in the City's emergency ambulance system, as there would be less mechanical issues with the Department's fleet. Vehicles would be more dependable, and would reduce any out of service time periods of crews who have vehicle issues preventing them from responding on-duty. The increased reliability of the vehicles would allow the crews to focus on their main objective of providing high levels of emergency care and responding to medical emergencies, and not have them figure out mechanical issues with their vehicles and how to resolve them.

For patient's that are transported in the current aged ambulances, the replacement of these units with new ambulances would improve the patient experience. Due to the condition of the older units, the transport is not a comfortable experience, and can be rough at times. New ambulances in better conditions would result in a smoother and more comforting ride in the patient's time of need.

The Department's ambulance employees will have their daily operations improved as a result of these new ambulances. Outside of the reliability issues of the current old ambulances that the members will be able to move on from, the personal safety of the members will be positively impacted. The new apparatus will have taken advantage of improved safety requirements and crash ratings that have come into effect since the to-be-replaced vehicles were purchased approximately 15 years ago. There are other operational benefits for members of the new members, including improved efficiency of equipment storage as compared to the older vehicles.

A portion of the narrative requests the number of incidents that each unit has responded to. It is difficult for the Department to determine, as in the past the Department has swapped unit numbers in the dispatch system depending on crews and whichever vehicles are available. The Department's dispatch system tracks the unit number, and not the actual vehicle. In addition, the application requests the number of similar units located at the same location as the unit the Department is requesting to replace. The Department deploys a dynamic ambulance system, and ambulances are based out of one ambulance depot and posted throughout the City depending on need. The Department included the number of similar units assigned to the ambulance depot.

The Department has done a thorough analysis of its ambulance fleet, and has determined five units it would like to retire. Age and mileage were obviously taken into account, as were individual repair and maintenance histories of all five units as well as the overall condition of the unit and how it has held up over its lifespan with the demands of the Department. If awarded, the Department will be able to take these inexpensive and inefficient units off the street and out of operations, and replaces them with new units that are more durable, more dependable, "Star-of-Life" Federally certified, and able to improve the services delivered to the residents and visitors of San Francisco. The San Francisco Fire Department thanks you for your consideration of this project.

# **View Firefighter Vehicle Program**

Vehicle Details		
*1. What type or class of vehicle are you requesting?	Ambulance	
* Please provide a detailed description of the item selected above:	The Department is requesting a new front-line ambulance to replace an aging vehicle in its fleet.	
*2. Cost: (whole dollar amounts only)	\$ 157916	
*3. Is the vehicle you propose to buy:	Replacement of an existing apparatus	
4. Was the vehicle you're requesting to replace built prior to the applicable NFPA vehicle standard from 1992?	No	
5. If you are requesting to replace an ambulance, what is the mileage of the ambulance being replaced?	158596	
*6. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)	No	
Do you intend to use a group purchasing plan for this purchase?		
If No, explain:		
*7. If awarded a grant, are the specifications available for immediate release?	Yes	
8. What is the age of the vehicle being replaced?	16 years	
*9. Do you have a driver-training program equivalent to national or NFPA standards?	Yes	
If No, will you develop one prior to receipt of the vehicle per the Funding Opportunity Announcement (FOA )?		
*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be entered in the Firefighting Vehicle Additional Funding section)	No	
If you are not requesting funding for training, will you obtain the appropriate training through other sources ?	Yes	
11. If awarded, will you permanently remove the vehicle to be replaced from your	Yes	
organization's emergency response service ?		
Please enter the type and year of manufacture for vehicle being replaced.	1999 Ford E450	
Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:	1FDXE40FXXHA28858	
*12. How long have you owned the vehicle you are replacing?	16 Years (whole number only)	
*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2013 (documented through vehicle or dispatch logs)?	0 (whole number only)	
*14. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?	Yes	
*15. Will this vehicle be used for automatic and/or mutual aid?	Both	
*16. How many vehicles of the same type/class as the requested vehicle are assigned to the location the requested vehicle will be located?	35	

# Firefighting Vehicle - Additional Funding (optional)

# **Budget Object Class Definitions**

Additional Funding		
a. Personnel	Help	\$ 0
b. Fringe Benefits	Help	\$ 0

Application Number: EMW-2014-FV-02608

Help	\$ 0
Help	\$ 0
Help	\$ 13830
	Help Help Help Help Help

#### Explanation

This additional funding covers State and local sales tax, as well as California State tire tax.

### Firefighting Vehicle - Narrative

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# **View Firefighter Vehicle Program**

Vehicle Details		
*1. What type or class of vehicle are you requesting?	Ambulance	
* Please provide a detailed description of the item selected above:	The Department is requesting a new front-line ambulance to replace an aging vehicle in its fleet.	
*2. Cost: (whole dollar amounts only)	\$ 157916	
*3. Is the vehicle you propose to buy:	Replacement of an existing apparatus	
4. Was the vehicle you're requesting to replace built prior to the applicable NFPA vehicle standard from 1992?	No	
5. If you are requesting to replace an ambulance, what is the mileage of the ambulance being replaced?	136559	
*6. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)	Νο	
Do you intend to use a group purchasing plan for this purchase?		
If No, explain:		
*7. If awarded a grant, are the specifications available for immediate release?	Yes	
8. What is the age of the vehicle being replaced?	15 years	
*9. Do you have a driver-training program equivalent to national or NFPA standards?	Yes	
If No, will you develop one prior to receipt of the vehicle per the Funding Opportunity Announcement (FOA )?		
*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be entered in the Firefighting Vehicle Additional Funding section)	No	
If you are not requesting funding for training, will you obtain the appropriate training through other sources ?	Yes	
11. If awarded, will you permanently remove the vehicle to be replaced from your organization's emergency response service ?	Yes	
Please enter the type and year of manufacture for vehicle being replaced.	2000 Ford E450	

 Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:
 1FDXE45F4YHB27315

 \*12. How long have you owned the vehicle you are replacing?
 15 Years (whole number only)

 \*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2013 (documented through vehicle or dispatch logs)?
 0 (whole number only)

 \*14.
 If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?
 Yes

 \*15. Will this vehicle be used for automatic and/or mutual aid?
 Both

\*16. How many vehicles of the same type/class as the requested vehicle are assigned to the location the requested vehicle will be located?

# Firefighting Vehicle - Additional Funding (optional)

### Budget Object Class Definitions

Additional Funding		
a. Personnel	Help	\$ O
b. Fringe Benefits	Help	\$ 0
c. Travel	Help	\$ O
d. Equipment	Help	\$ 0
e. Supplies	Help	\$ O
f. Contractual	Help	\$ 0
g. Construction	Help	\$ O
h. Other	Help	\$ O
i. Indirect Charges	Help	\$ 0
j. State Taxes	Help	\$ 13830

#### Explanation

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## Firefighting Vehicle - Narrative

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This awarding of this project would have an overall positive impact to the daily operations of the Fire Department, both from the perspective of providing emergency services to the community but also to the health and safety of our members. These new ambulances would improve the availability of resources in the City's emergency ambulance system, as there would be less mechanical issues with the Department's fleet. Vehicles would be more dependable, and would reduce any out of service time periods of crews who have vehicle issues preventing them from responding on-duty. The increased reliability of the vehicles would allow the crews to focus on their main objective of providing high levels of emergency care and responding to medical emergencies, and not have them figure out mechanical issues with their vehicles and how to resolve them.

For patient's that are transported in the current aged ambulances, the replacement of these units with new ambulances would improve the patient experience. Due to the condition of the older units, the transport is not a comfortable experience, and can be rough at times. New ambulances in better conditions would result in a smoother and more comforting ride in the patient's time of need.

The Department's ambulance employees will have their daily operations improved as a result of these new ambulances. Outside of the reliability issues of the current old ambulances that the members will be able to move on from, the personal safety of the members will be positively impacted. The new apparatus will have taken advantage of improved safety requirements and crash ratings that have come into effect since the to-be-replaced vehicles were purchased approximately 15 years ago. There are other operational benefits for members of the new members, including improved efficiency of equipment storage as compared to the older vehicles.

A portion of the narrative requests the number of incidents that each unit has responded to. It is difficult for the Department to determine, as in the past the Department has swapped unit numbers in the dispatch system depending on crews and whichever vehicles are available. The Department's dispatch system tracks the unit number, and not the actual vehicle. In addition, the application requests the number of similar units located at the same location as the unit the Department is requesting to replace. The Department deploys a dynamic ambulance system, and ambulances are based out of one ambulance depot and posted throughout the City depending on need. The Department included the number of similar units assigned to the ambulance depot.

The Department has done a thorough analysis of its ambulance fleet, and has determined five units it would like to retire. Age and mileage were obviously taken into account, as were individual repair and maintenance histories of all five units as well as the overall condition of the unit and how it has held up over its lifespan with the demands of the Department. If awarded, the Department will be able to take these inexpensive and inefficient units off the street and out of operations, and replaces them with new units that are more durable, more dependable, "Star-of-Life" Federally certified, and able to improve the services delivered to the residents and visitors of San Francisco. The San Francisco Fire Department thanks you for your consideration of this project.

# **View Firefighter Vehicle Program**

Vehicle Details		
*1. What type or class of vehicle are you requesting?	Ambulance	
* Please provide a detailed description of the item selected above:	The Department is requesting a new front-line ambulance to replace an aging vehicle in its fleet.	
*2. Cost: (whole dollar amounts only)	\$ 157916	
*3. Is the vehicle you propose to buy:	Replacement of an existing apparatus	
4. Was the vehicle you're requesting to replace built prior to the applicable NFPA vehicle standard from 1992?	No	
5. If you are requesting to replace an ambulance, what is the mileage of the ambulance being replaced?	165798	

*6. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)	No
Do you intend to use a group purchasing plan for this purchase?	
If No, explain:	
*7. If awarded a grant, are the specifications available for immediate release?	Yes
8. What is the age of the vehicle being replaced?	14 years
*9. Do you have a driver-training program equivalent to national or NFPA standards?	Yes
If No, will you develop one prior to receipt of the vehicle per the Funding Opportunity Announcement (FOA )?	
*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be entered in the Firefighting Vehicle Additional Funding section)	No
If you are not requesting funding for training, will you obtain the appropriate training through other sources ?	Yes
11. If awarded, will you permanently remove the vehicle to be replaced from your organization's emergency response service ?	Yes
Please enter the type and year of manufacture for vehicle being replaced.	2001 Ford E450
Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:	1FDXE45F91HA06222
*12. How long have you owned the vehicle you are replacing?	14 Years (whole number only)
*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2013 (documented through vehicle or dispatch logs)?	0 (whole number only)
*14. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?	Yes
*15. Will this vehicle be used for automatic and/or mutual aid?	Both
*16. How many vehicles of the same type/class as the requested vehicle are assigned to the location the requested vehicle will be located?	35

# Firefighting Vehicle - Additional Funding (optional)

# **Budget Object Class Definitions**

Additional Funding			
a. Personnel	Help	\$ O	
b. Fringe Benefits	Help	\$ O	
c. Travel	Help	\$ O	
d. Equipment	Help	\$ 0	
e. Supplies	Help	\$ 0	
f. Contractual	Help	\$ O	
g. Construction	Help	\$ O	
h. Other	Help	\$ 0	
i. Indirect Charges	Help	\$ O	
j. State Taxes	Help	\$ 13830	

#### Explanation

This additional funding covers State and local sales tax, as well as California State tire tax.

### **Firefighting Vehicle - Narrative**

\* Section # 1 Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. \*4000 characters

The San Francisco Fire Department (SFFD) is requesting 2014 Assistance to Firefighters Grant (AFG) program funding to replace ambulances in its aged vehicle fleet. Given financial difficulties felt in the City in recent years, along with uncertainty about the long-term status of the City's 911 ambulance system as a whole due to changes at the State level, the Department has been unable to secure funding to replace ambulances in its fleet. This has resulted in increased maintenance costs to the Department, as well as decreased emergency response capabilities due to the unreliability of these older units. However, given increased call volume seen by the Department in the past few years due to new residents and visitors of San Francisco, as well as additional mandates from the State increasing the Department's responsibilities to respond to 911 ambulance calls City-wide, the Department must increase the capabilities of its ambulance fleet and purchase new ambulances to retire unreliable units as well as meet current demands of the ambulance system.

In the current year, the SFFD is working to resolve resource issues for its ambulance operations, both equipment and personnel. The SFFD responds to over 80,000 ambulance calls per year, and over 70% of its more than 120,000 annual calls are medical in nature. The Department currently has a fleet of 50 ambulances it uses in front-line field operations to respond to these calls, and employs a dynamic deployment model for its personnel to respond throughout the City. Due to the high volume of runs, as well as the topographical demands (steep hills, traffic, narrow streets) of San Francisco, the Department's ambulance fleet is constantly under heavy stress in the course of responding to emergencies. With averages of 10 years of age and 128,931 miles on their odometers, the Department's ambulances are in need of constant maintenance and regular replacement. The high usage has contributed to high maintenance costs for the Department on an annual basis – for example the five units the Department is proposing to replace had an average of \$20,252 in maintenance and repair costs in fiscal year 2014, a heavy burden on the Department financially. In addition to cost savings, the Department's old ambulance have caused operational issues for the Department, as Department ambulance personnel have had to go out of service responding to a call as their ambulance has broken down enroute to a medical emergency or a hospital. These selected units have an average age of 15 years and mileage of 157,996 miles.

In 2012, the California Emergency Medical Services Authority (EMSA) issued a decision to restore the City and County of San Francisco's Exclusive Operating Area (EOA) rights for 911 ambulance transports back to the San Francisco Fire Department. This mandated the Department be responsible for a baseline of 80% of all 911 medical ambulance calls. Given that at the time of this decision, the Department was operating at approximately 65% of all ambulance calls, this represented a significant increase in the number of calls the Department would be responsible for on an annual basis. In addition to this increase in market share, over the past five years, the City as a whole has seen an increase in over 20% of all medical calls due to increases in residents and the work force in San Francisco. This call volume increase, coupled with the increased responsibilities imposed by the California EMSA, has only increased the daily demands on the Department's aged ambulance fleet. The Department must be able to obtain the resources to sustainably meet the current levels of service, but also the anticipated increase in crease in cell response levels for the Department in the near future. To begin to deal with these challenges, the Department must be able to replace its oldest units that have exceeded their useful life term.

\* Section # 2 Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. \*4000 characters

The funding of this project proposal for ambulance replacement by the AFG program would have the primary direct benefit to the population and visitors of San Francisco by increasing ambulance availability in the current 911 emergency ambulance system. This is done by ensuring that the Department's deployed ambulances are able to operate and be counted on by Department crews in their daily emergency medical responses. Too often, Department ambulance crews that are forced to be deployed in one of the Department's older ambulances for their daily assignment have vehicle issues, to the extent that the vehicle must be taken out of service for repairs and the crews reassigned to a different apparatus. This can take an extended period of time depending on the Department's resources available at that given time to respond and provide a new vehicle for the members. This means that the ambulance personnel that are on-duty but cannot respond to an emergency call should one arise, reducing the ambulance resources available City-wide. As a Department that looks to achieve any efficiency from its dynamic deployment of ambulance resources, this is an externely inefficient use of the members' time due to equipment failure. As part of the members' inability to provide medical assistance to the public during this downtime, the Department misses out on potential revenue from these missed ambulance calls, for which the Department bills for.

In addition to these operational benefits as a result of the funding of new ambulances, there are absolutely cost savings the Department would be able to realize as the older ambulances were retired. As mentioned previously, for the five ambulances that the Department wishes to replace as a result of this grant proposal, the average cost of maintenance and repair of five vehicles in the previous fiscal year for the SFFD was \$20,252. This is an annual cost for the Department as a result of the age of these vehicles. New vehicles would dramatically reduce the cost of annual maintenance, and allow the Department to retire its older units. Along with the maintenance savings, the new vehicles have other advantages over the ambulances that are proposed to be replaced, including improved vehicle technologies, improved driver/passenger safety measures, and emission advancements.

Due to the recent revision of its ambulance specifications that the Department has undertaken, there would be long-term cost savings to the Department in addition to any annual maintenance and repair savings seen by the Department. Through much research, the Department has developed specifications for these new ambulances going forward, specifications that it believes meet the operational needs for its members in the most cost-efficient way possible. As a result of its analysis of the workload of its ambulance fleet, the Department has shifted to a re-mountable chassis model for its new ambulances, and has developed specifications to this extent that are ready for the bidding and procurement process. This ambulance model allows for a distinction between the ambulance chassis and box, and considers these as separate units of the vehicle, allowing the Department to replace only the part of the ambulance that needs to be replaced due to wear and tear. Due to the topographical challenges of the City of San Francisco and high daily call volume of 911 calls, the SFFD's ambulances are overly stressed in on an every-day basis. This has resulted in many cases in premature cracking throughout the body of the vehicle. Therefore, with its re-mountable chassis model, the Department can re-use the ambulance box multiple times by simply replacing the chassis on the unit that is damaged, saving the costs of the box by simply reusing one. This could save approximately \$40,000-50,000 per unit upon time of replacement, representing significant long-term savings for the Department.

\* Section # 3 Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? \*4000 characters

This awarding of this project would have an overall positive impact to the daily operations of the Fire Department, both from the perspective of providing emergency services to the community but also to the health and safety of our members. These new ambulances would improve the availability of resources in the City's emergency ambulance system, as there would be less mechanical issues with the Department's fleet. Vehicles would be more dependable, and would reduce any out of service time periods of crews who have vehicle issues preventing them from responding on-duty. The increased reliability of the vehicles would allow the crews to focus on their main objective of providing high levels of emergency care and responding to medical emergencies, and not have them figure out mechanical issues with their vehicles and how to resolve them.

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The Department's ambulance employees will have their daily operations improved as a result of these new ambulances. Outside of the reliability issues of the current old ambulances that the members will be able to move on from, the personal safety of the members will be positively impacted. The new apparatus will have taken advantage of improved safety requirements and crash ratings that have come into effect since the to-be-replaced vehicles were purchased approximately 15 years ago. There are other operational benefits for members of the new members, including improved efficiency of equipment storage as compared to the older vehicles.

A portion of the narrative requests the number of incidents that each unit has responded to. It is difficult for the Department to determine, as in the past the Department has swapped unit numbers in the dispatch system depending on crews and whichever vehicles are available. The Department's dispatch system tracks the unit number, and not the actual vehicle. In addition, the application requests the number of similar units located at the same location as the unit the Department is requesting to replace. The Department deploys a dynamic ambulance system, and ambulances are based out of one ambulance depot and posted throughout the City depending on need. The Department included the number of similar units assigned to the ambulance depot.

The Department has done a thorough analysis of its ambulance fleet, and has determined five units it would like to retire. Age and mileage were obviously taken into account, as were individual repair and maintenance histories of all five units as well as the overall condition of the unit and how it has held up over its lifespan with the demands of the Department. If awarded, the Department will be able to take these inexpensive and inefficient units off the street and out of operations, and replaces them with new units that are more durable, more dependable, "Star-of-Life" Federally certified, and able to improve the services delivered to the residents and visitors of San Francisco. The San Francisco Fire Department thanks you for your consideration of this project.

# **View Firefighter Vehicle Program**

Vehicle	Details
*1. What type or class of vehicle are you requesting?	Ambulance
* Please provide a detailed description of the item selected above:	The Department is requesting a new front-line ambulance to replace an aging vehicle in its fleet.
*2. Cost: (whole dollar amounts only)	\$ 157916
*3. Is the vehicle you propose to buy:	Replacement of an existing apparatus
4. Was the vehicle you're requesting to replace built prior to the applicable NFPA vehicle standard from 1992?	No
5. If you are requesting to replace an ambulance, what is the mileage of the ambulance being replaced?	179102
*6. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)	No
Do you intend to use a group purchasing plan for this purchase?	
If No, explain:	
*7. If awarded a grant, are the specifications available for immediate release?	Yes
8. What is the age of the vehicle being replaced?	12 years
*9.	Yes
Do you have a driver-training program equivalent to national or NFPA standards?	
If No, will you develop one prior to receipt of the vehicle per the Funding Opportunity Announcement (FOA )?	
*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be entered in the Firefighting Vehicle Additional Funding section)	No
If you are not requesting funding for training, will you obtain the appropriate training through other sources ?	Yes
11. If awarded, will you permanently remove the vehicle to be replaced from your organization's emergency response service ?	Yes
Please enter the type and year of manufacture for vehicle being replaced.	2003 Ford E450
Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:	1FDXE45F23HA97790
*12. How long have you owned the vehicle you are replacing?	12 Years (whole number only)
*13. If you are removing a vehicle from service, what is the number of calls that vehicle responded to during 2013 (documented through vehicle or dispatch logs)?	0 (whole number only)
*14. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?	Yes
*15. Will this vehicle be used for automatic and/or mutual aid?	Both
*16. How many vehicles of the same type/class as the requested vehicle are assigned to the location the requested vehicle will be located?	35

## Firefighting Vehicle - Additional Funding (optional)

# Budget Object Class Definitions

Additional Funding			
a. Personnel	Help	\$ O	
b. Fringe Benefits	Help	\$ O	
c. Travel	Help	\$ O	
d. Equipment	Help	\$ O	
e. Supplies	Help	\$ 0	

Help	\$ 0
Help	\$ 0
Help	\$ 0
Help	\$ 0
Help	\$ 13830
	Help Help Help

## Explanation

This additional funding covers State and local sales tax, as well as California State tire tax.

## Firefighting Vehicle - Narrative

\* Section # 1 Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. \*4000 characters

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In the current year, the SFFD is working to resolve resource issues for its ambulance operations, both equipment and personnel. The SFFD responds to over 80,000 ambulance calls per year, and over 70% of its more than 120,000 annual calls are medical in nature. The Department currently has a fleet of 50 ambulances it uses in front-line field operations to respond to these calls, and employs a dynamic deployment model for its personnel to respond throughout the City. Due to the high volume of runs, as well as the topographical demands (steep hills, traffic, narrow streets) of San Francisco, the Department's ambulance fleet is constantly under heavy stress in the course of responding to emergencies. With averages of 10 years of age and 128,931 miles on their odometers, the Department's ambulances are in need of constant maintenance and regular replacement. The high usage has contributed to high maintenance costs for the Department on an annual basis – for example the five units the Department is proposing to replace had an average of \$20,252 in maintenance and repair costs in fiscal year 2014, a heavy burden on the Department financially. In addition to cost savings, the Department's old ambulances have caused operational issues for the Department, as Department ambulance personnel have had to go out of service responding to a call as their ambulance has broken down enroute to a medical emergency or a hospital. These selected units have an average age of 15 years and mileage of 157,996 miles.

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\* Section # 2 Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. \*4000 characters

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unit upon time of replacement, representing significant long-term savings for the Department.

\* Section # 3 Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? \*4000 characters

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For patient's that are transported in the current aged ambulances, the replacement of these units with new ambulances would improve the patient experience. Due to the condition of the older units, the transport is not a comfortable experience, and can be rough at times. New ambulances in better conditions would result in a smoother and more comforting ride in the patient's time of need.

The Department's ambulance employees will have their daily operations improved as a result of these new ambulances. Outside of the reliability issues of the current old ambulances that the members will be able to move on from, the personal safety of the members will be positively impacted. The new apparatus will have taken advantage of improved safety requirements and crash ratings that have come into effect since the to-be-replaced vehicles were purchased approximately 15 years ago. There are other operational benefits for members of the new members, including improved efficiency of equipment storage as compared to the older vehicles.

A portion of the narrative requests the number of incidents that each unit has responded to. It is difficult for the Department to determine, as in the past the Department has swapped unit numbers in the dispatch system depending on crews and whichever vehicles are available. The Department's dispatch system tracks the unit number, and not the actual vehicle. In addition, the application requests the number of similar units located at the same location as the unit the Department is requesting to replace. The Department deploys a dynamic ambulance system, and ambulances are based out of one ambulance depot and posted throughout the City depending on need. The Department included the number of similar units assigned to the ambulance depot.

The Department has done a thorough analysis of its ambulance fleet, and has determined five units it would like to retire. Age and mileage were obviously taken into account, as were individual repair and maintenance histories of all five units as well as the overall condition of the unit and how it has held up over its lifespan with the demands of the Department. If awarded, the Department will be able to take these inexpensive and inefficient units off the street and out of operations, and replaces them with new units that are more durable, more dependable, "Star-of-Life" Federally certified, and able to improve the services delivered to the residents and visitors of San Francisco. The San Francisco Fire Department thanks you for your consideration of this project.

## Budget

Budget Object Class	
a. Personnel	\$ 0
b. Fringe Benefits	\$ 0
c. Travel	\$ 0
d. Equipment	\$ 789,580
e. Supplies	\$ O
f. Contractual	\$ O
g. Construction	\$ O
h. Other	\$ 0
i. Indirect Charges	\$ 0
j. State Taxes	\$ 69,150
Federal and Applicant Share	
Federal Share	\$ 780,664
Applicant Share	\$ 78,066
Applicant Share of Award (%)	10
* Non-Federal Resources (The combined Non-Federal Resources must equal the Applicant Share of \$78,066)	
a. Applicant	\$ 78,066
b. State	\$ 0
c. Local	\$ 0
d. Other Sources	\$ 0
If you entered a value in Other Sources other than zero (0), include your explanation below. You can use this space to provide information on the pr match, or if you have an indirect cost agreement with a federal agency.	oject, cost share

Total Budget

\$ 858,730

## **Narrative Statement**

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

## Assurances and Certifications

#### FEMA Form SF 424B

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

Note: Fields marked with an \* are required.

#### O.M.B Control Number 4040-0007

#### Assurances Non-Construction Programs

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

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

- 1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- 3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of face, (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

Signed by Shane Francisco on 12/05/2014

# Form 20-16C

## You must read and sign these assurances.

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

### O.M.B Control Number 1660-0025

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

#### 1. Lobbying

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

(a) No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal amendment or modification of any Federal grant or cooperative agreement.

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions.

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

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

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

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

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

(c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification: and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

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

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

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

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

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

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

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

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

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

(1) Abide by the terms of the statement and

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

(e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable DHS awarding office, i.e. regional office or DHS office.

(f) Taking one of the following actions, against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the

requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency.

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

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

 Place of Performance
 Street
 City
 State
 Zip
 Action

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

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

Signed by Shane Francisco on 12/05/2014

# FEMA Standard Form LLL

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

Status

# Submit Application

# Application 100% complete, Submitted

Please click on any of the following links to visit a particular section of your application. Once all areas of your application are complete, you may submit your application.

Application Area	
Applicant's Acknowledgements	Complete
Overview	Complete
Contact Information	Complete
Applicant Information	Complete
Applicant Characteristics (I)	Complete
Applicant Characteristics (II)	Complete
Department Call Volume	Complete
Request Information	Complete
Request Details	Complete
Budget	Complete
Assurances and Certifications	Complete

PLEASE READ THE FOLLOWING STATEMENTS BEFORE YOU SUBMIT.

- YOU WILL NOT BE ALLOWED TO EDIT THIS APPLICATION ONCE IT HAS BEEN SUBMITTED. If you are not yet ready to submit this application, save it, and log out until you feel that you have no more changes.
- When you submit this application, you, as an authorized representative of the organization applying for this grant, are certifying that the following statements are true:

To the best of my knowledge and belief, all data submitted in this application are true and correct.

This application has been duly authorized by the governing body of the applicant and the applicant will comply to the Assurances and Certifications if assistance is awarded.

To sign your application, check the box below and enter your password in the space provided. To submit your application, click the Submit Application button below to officially submit your application to FEMA.

Note: The primary contact will be responsible for signing and submitting the application. Fields marked with an ' are required.

I, Shane Francisco, am hereby providing my signature for this application as of 05-Dec-2014.