

Entire Application
DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
AFG Application (General Questions and Narrative)

OMB No.: 1660-0054
Expiration Date: August, 31 2019

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 9 hours per response for FEMA Form 080-0-2 "AFG Application (General Questions and Narrative)". The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472-3100, Paperwork Reduction Project (1660-0054) NOTE: Do not send your completed form to this address.

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, 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 valid and active at time of submission.
- * I certify that the applicant organization has consulted the appropriate Notice of Funding Opportunity 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 09/24 to 10/26/2018 and will close at 5 PM EST; further that the applicant organization is aware 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: http://www.fema.gov/media-library-data/1431970163011-80ce3cd907072a91295b1627c56d8fd2/gpd_ehp_screening_form_51815.pdf
- * 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 **Mark Corso** on **2018-10-19 18:44:38.0**

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?**

No

*** 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

-
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In the space below please list the person your organization has selected to be the primary point of contact for this grant. This should be a department officer or member of the organization who will see this grant through completion, including 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 get in direct contact with the POC.

Primary Point of Contact

* Title	Deputy Director
Prefix (select one)	N/A
* First Name	Mark
Middle Initial	
* Last Name	Corso
* Primary Phone	4155583417 Ext. Type work
* Secondary Phone	4155583401 Ext. Type home
Optional Phone	Type
Fax	
* Email	mark.corso@sfgov.org

Contact Information

Alternate Contact Information Number 1

* Title Assistant Deputy Chief
Prefix (select one) N/A
* First Name Michael
Middle Initial
* Last Name Cochrane
* Primary Phone 4155583680 Ext. Type work
* Secondary Phone 4155583400 Ext. Type cell
Optional Phone Type
Fax
* Email michael.cochrane@sfgov.org

Alternate Contact Information Number 2

* Title Deputy Chief
Prefix (select one) N/A
* First Name Jeanine
Middle Initial
* Last Name Nicholson
* Primary Phone 4155583411 Ext. Type work
* Secondary Phone 4155583258 Ext. Type cell
Optional Phone Type
Fax
* Email jeanine.nicholson@sfgov.org

FEMA Form 080-0-2

Applicant Information

EMW-2018-FO-05957

Originally submitted on 10/26/2018 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-2018-FO-05957

* Organization Name San Francisco Fire Department

* Type of Applicant Fire Department/Fire District

* **Fire Department/District, Non-Affiliated EMS, and Regional applicants**, select type of Jurisdiction Served : Other (explain)

If "Other", please enter the type of Jurisdiction 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 SAM.gov 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 SAM.gov?Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

* Mailing Address 1 698 Second Street

Mailing Address 2

* City San Francisco

* State California

* Zip 94107 - 2015
[Need help for ZIP+4?](#)* **Employer Identification Number** (e.g. 12-3456789)Note: This information must match your SAM.gov profile.

94-6000417

* Is your organization using the DUNS number of your Jurisdiction?

No, we have our own DUNS number separate from our Jurisdiction.

I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application (Required if you selected Yes above)

033428819

* What is your 9 digit [DUNS number](#)?

(call 1-866-705-5711 to get a DUNS number)

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 [DUNS number](#) and bank account separate from your Jurisdiction.

* Is your [DUNS Number](#) registered in [SAM.gov](#) (System for Award Management previously CCR.gov)?

Yes

* I certify that my organization/entity is registered and active at [SAM.gov](#) and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate, current and consistent with my organization's/entity's [SAM.gov](#) record.

Headquarters or Main Station Physical Address

* 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 the right)

Maintained by my Jurisdiction

Note: The following banking information must match your [SAM.gov](#) profile.

* Type of bank account

Checking

* Bank routing number - [9 digit](#) number on the bottom left hand corner of your check

121000358

* **Your account number**

0066180050

Additional Information

* For this fiscal year (Federal) is your organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request?

* Is the applicant delinquent on any Federal debt?

If you answered yes to any of the additional questions above, please provide an explanation in the space provided below:

FEMA Form 080-0-2

Fire Department/Fire District Department Characteristics (Part I)

* 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?

* What kind of organization do you represent?

All Paid/Career

If you answered "Combination", above, how many career members in your organization? (whole numbers only)

If you answered "Volunteer" or "Combination" or "Paid on-call", how many of your volunteer Firefighters are paid members from another career department? (whole numbers only)

* What type of community does your organization serve?

* Is your Organization considered a Metro Department? (Over 350 paid career Firefighters)

* What is the square mileage of your first-due response area? (whole number only)

48

* What percentage of your response area is protected by hydrants? (whole number only)

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

* Does your organization protect critical infrastructure?

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 (129 schools, 27 colleges/universities), medical (14 hospitals), research, financial, biotech-research, technological industries and home to over 30 international financial institutions including a Federal Reserve. 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, which has an underwater Transbay railway tube serving over 400,000 commuters each week. The City is also a large hub for a variety of other regional transit systems that

service the rest of the Bay Area and the State of California, such as Cal Train and the Bay Ferry System, which will transport 6.5 million riders per year.

- * What percentage of your primary response area is for agriculture, wildland, open space, or undeveloped properties? 31 %
- * 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 %

* What is the permanent resident population of your [Primary/First-Due Response Area or jurisdiction served](#)? (whole numbers only) 884363

* Do you have a seasonal increase in population?

If "Yes" what is your seasonal increase in population?

* How many active firefighters does your department have who perform firefighting duties? (whole numbers only) 1400

* How many members in your department/organization are trained to the level of EMR or EMT, Advanced EMT or Paramedic? (whole numbers only) 1683

Does your department have a [Community Paramedic](#) program?

How many personnel are trained to the [Community Paramedic](#) level? (whole numbers only) 3

* How many stations are operated by your organization? (whole numbers only) 44

* Is your department compliant to your local Emergency Management standard for the National Incident Management System (NIMS)?

* 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. AFG does not require NFIRS reporting for nonaffiliated EMS Organizations and State Fire Training Academy.

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 (or equivalent)? (whole numbers only) 1400

* How many of your active firefighters are trained to the level of Firefighter II (or equivalent)? (whole numbers only, include all personnel who have attained Firefighter I) 1400

Are you requesting training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001?

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 Firefighter 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	Emergency Medical Responder	Rescue Operational Level
Airport Rescue Firefighting (ARFF)	Haz-Mat Operational Level	Rescue Technical Level
Basic Life Support	Haz-Mat Technical Level	Structural Fire Suppression
Community Paramedic	Maritime Operations/Firefighting	Wildland Fire Suppression

* 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 884,363, comprised of 49 square miles with 29 miles of coastline. It is ranked as the second most densely populated major city in the United States, yielding over 18,000 persons/square mile with its resident population alone. In 2016, 25 million tourists visited San Francisco and with hundreds of thousands of commuters entering the City every day, the average daily population swells to over 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 these two bridges will see 83 million vehicles per year. San Francisco is ranked as one of the top seven Tier 1 Urban Area Cities and the Port of San Francisco, which has ferry and cruise ship terminals, is identified as a Group 1 Port at highest risk for terrorist attack. The cruise ship terminal will see 80 cruise ship port calls per year. San Francisco is experiencing a commercial boom with new high rises currently under construction that will add to the existing inventory of high rises. In addition, two major construction projects are underway in San Francisco, for its version of the "Big Dig". The central subway/underground is under construction with a 1.7-mile extension that will provide underground rail access to additional neighborhoods. Secondly, a new Transbay Transit Center opened to replace the old train/bus station, extend the current train line, and accommodate California's new high-speed rail project. The SFFD's approximately 1,650 Firefighting and Emergency Medical personnel are part of the Metropolitan Medical Response System (MMRS), Urban Search and Rescue (USAR), and Regional Task Force (RTF) response for Chemical, Biological, Radiological Nuclear, Explosive (CBRNE) incidents. 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. In 2017, the SFFD responded to over 145,000 calls for service. All SFFD Firefighters are 100% compliant in NFPA 1001/1002 Standards (FFI & FFII). For 2015, Firehouse Magazine ranked the SFFD's Engine 3 as the busiest Engine in the country with 10,853 runs and Truck 3 also ranked as the 3rd busiest Ladder Truck with 5,246 runs. The City has approximately 380,971 housing units; 67% of those units are multi-unit structures. With 14,000 Victorian houses, much of the City's housing stock is old and primarily constructed of wood; 50% of the City's residential housing was built before 1940 and 25% was built between 1940 and 1959. SFFD responds to this community with 44 Engines and 20 Trucks divided into two Divisions, with ten Battalion Districts. Specialty units of the SFFD include: 2 Heavy Rescue Squads, 2 Coastal Rescue units (Cliff & Surf), 1 Rescue Boat, 2 Rescue Water Craft, 3 Fireboats, a Mobile Command Vehicle, 2 Multi-Casualty Units, a Hazardous Materials Unit, a CO2 unit, and a Mobile Air Unit. The SFFD has 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. The SFFD also provides water response mutual aid under the same agreement to the Counties of Alameda, San Mateo, Contra Costa, Marin, Solano and Sonoma Counties.

FEMA Form 080-0-2

Fire Department Characteristics (Part II)

	2017	2016	2015
* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?	1	5	5
* What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?	24	29	30
* What is the total number of line of duty member fatalities in your jurisdiction over the last three calendar years?	0	0	0
* What is the total number of line of duty member injuries in your jurisdiction over the last three calendar years?	306	194	217

*Over the last three years, what was your organization's operating budget? 386588412

* How much of your TOTAL budget is dedicated to personnel costs (salary, overtime and fringe benefits)? 354034886

Does your department have any rainy day reserves, emergency funds, or capital outlay? No

If Yes, what is the total amount currently set aside?

If Yes, describe the planned purpose of this fund

* What percentage of your annual operating budget is derived from:

Enter numbers only, percentages must sum up to 100% 2017 2016 2015

	2017	2016	2015
<u>Taxes?</u>	77 %	88 %	86 %
Bond Issues?	0 %	0 %	0 %
<u>EMS Billing?</u>	7 %	8 %	9 %
Grants?	0 %	0 %	0 %
Donations?	0 %	0 %	0 %
Fund drives?	0 %	0 %	0 %
<u>Fee for Service?</u>	16 %	4 %	5 %

* Applicants should describe their financial need and how consistent it is with the intent of the AFG Program. This statement should include details describing the applicant's financial distress, including summarizing budget constraints, unsuccessful attempts to obtain vehicle and outside funding, and proving the trouble is out of their control.

The SFFD's Fiscal Year 2018-19 Operating budget is approximately \$400 million. 64% derived from the City's General Fund. The remaining 36% is funded through State sales tax revenue (13%), EMS Ambulance revenue (7%), Fire Prevention fees (3%), and other fees for services (13%). Of the total operating budget, 88% is for personnel costs, including salaries, overtime, and fringe benefits. That leaves only 12% to cover all the non-personnel costs for the Department. While the SFFD's total budget has increased each of the past three fiscal years, this is due primarily to costs beyond the SFFD's controls, such as MOU changes and increases to health benefit costs and the City's contribution to the retirement and pension system. The scarcity of general fund dollars has led to the reality of competing interests in the City for funding. At first glance, the health of the City's economy in recent years seems robust. The City's general fund, however, has seen a large negative impact to its ability to fund City Departments and programs due to the cost of expenditures outpacing revenues. It has been extremely difficult to fund needed projects for equipment, especially for the fire department where equipment costs are already very high for the City. At the onset of the most recent budget process, the City of San Francisco was looking at a fiscal year with a projected shortfall of approximately \$88 million for Fiscal Year 2018-19 and \$173 million for Fiscal Year 2019-20. Without major changes, the City was looking at a budget deficit of approximately \$709 million in FY2021-22. Last fiscal year (FY2017-18), the Department was requested to reduce its general fund support by 2.5%. This was in addition to mandated reductions in prior years, and is anticipated to occur again in the upcoming years. The Department is also prepared for the potential of mid-year cuts this fiscal year given current projections as well as the impacts of the local, State and national policy changes. Given the realities of this fiscal environment, the SFFD is not able to procure sufficient funds for equipment such as hand tools and cordless tools. As the City of San Francisco attempts to grapple with structural issues such as rising personnel and benefit costs, the City's economic outlook presents many challenges for a Department such as the SFFD that relies on support from the City's general fund to make up its operating budget. While still amid a healthy local economy, the City's economic growth factors have slowed considerably, while projected personnel costs are anticipated to grow at accelerated rates, resulting in a larger and larger deficit. The City, like many other jurisdictions, is dealing with large future pension obligations along with rising health benefit costs for its employees. With

these constraints, requests for increases to non-personnel items, such as equipment, is nearly impossible. While fortunate to not have laid off any members during the most recent economic downturn, the Department was unable to properly fund infrastructure needs, including equipment, training, and contract services. The Department has requested funding for equipment in its annual operating budget request for the past few years, but funding that was allocated has been mainly designated to address an aging fleet that has not been refreshed in years. We are aggressively seeking alternative funding sources such as grants with mixed results. Presently, the AFG appears to be our only viable option. If given the opportunity, SFFD is committed to the necessary matching funds (15%) next fiscal year for this project to come to fruition.

* In cases of demonstrated economic hardship, and upon the request of the grant recipient, the FEMA Administrator may waive or reduce an AFG grant recipient's cost share requirement. Is it your department's intent to apply for cost share waiver?

No

* 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.** (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 I or Type II Engine Urban Interface	44	16	176
Ambulances for transport and/or emergency response:	55	0	108
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	26	5	38

Firefighting), Command/Mobile Communications Vehicle			
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FEMA Form 080-0-2

Fire Department Call Volume

2017 2016 2015

* **Summary** of responses per year by category (Enter whole number only. If you have no calls for any of the categories, Enter 0)

Fire - NFIRS Series 100	3845	4558	4210
Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series 200	125	105	124
Rescue & Emergency Medical Service Incident - NFIRS Series 300	117888	112015	107527
Hazardous Condition (No Fire) - NFIRS Series 400	1937	1666	1564
Service Call - NFIRS Series 500	7156	6177	5861
Good Intent Call - NFIRS Series 600	1768	1703	1822
False Alarm & False Call - NFIRS Series 700	14010	14457	13903
Severe Weather & Natural Disaster - NFIRS Series 800	44	15	28
Special Incident Type - NFIRS Series 900	324	294	276

FIRES

* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)

Of the NFIRS Series 100 calls, how many are "Structure Fire" (NFIRS Codes 111-120)	1470	1494	1317
Of the NFIRS Series 100 calls, how many are "Vehicle Fire" (NFIRS Codes 130-138)	288	264	313
Of the NFIRS Series 100 calls, how many are "Vegetation Fire" (NFIRS Codes 140-143)	134	137	126
What is the total acreage of all vegetation fires?	0	0	0

RESCUE AND EMERGENCY MEDICAL SERVICE INCIDENTS

* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)

Of the NFIRS Series 300 calls, how many are "Motor Vehicle Accidents" (NFIRS Codes 322-324)	2687	2709	2775
Of the NFIRS Series 300 calls, how many are "Extrications from Vehicles" (NFIRS Code 352)	38	44	56
Of the NFIRS Series 300 calls, how many are "Rescues" (NFIRS Codes 300, 351, 353-381)	113647	107904	103518
How many EMS-BLS Response Calls	60274	57596	54138
How many EMS-ALS Response Calls	57614	54419	53389
How many EMS-BLS Scheduled Transports	0	0	0
How many EMS-ALS Scheduled Transports	0	0	0
How many Community Paramedic Response Calls	0	0	0

MUTUAL AND AUTOMATIC AID

* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)

How many times did your organization receive Mutual Aid?	6	7	13
How many times did your organization receive Automatic Aid?	3	4	2
How many times did your organization provide Mutual Aid?	1	5	5
How many times did your organization provide Automatic Aid?	6	8	10
Of the Mutual and Automatic Aid responses, how many were structure fires?	1	0	2

FEMA Form 080-0-2

Request Information

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

Program Name

Operations and Safety

2. Will this grant benefit more than one organization?

Yes

If you answered "Yes" to Question 2, please explain how this request benefits other organizations below:

The Department can be called for automatic aid to any of its neighboring counties in the region, so any equipment purchased through the AFG grant can be considered a regional asset.

* 3. Is your department facing a new risk, expanding service to new area, or experiencing an increased call volume?

Yes

If you answered "Yes" to Question 3., please explain how your department is facing a new risk, expanding service to new area, or experiencing an increased call volume

The Department has faced an annual increase in total call volume over the past decade. Total calls have increased by over 40% over the same time period, from 106,066 in Fiscal Year 2008-09 to 148,859 last fiscal year. Over the last three years, call volume has increased by 7.5%. With San Francisco at its largest daytime and nighttime populations in its history, and construction continuing all over the City, it is anticipated that the Department will see continued increases in call volume.

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

\$0

* 5. Are you requesting a Micro Grant?
A Micro Grant is limited to \$50,000 Federal share. Modification to Facilities activity is ineligible for Micro Grants.

No

FEMA Form 080-0-2

Request Details

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

Activity Specific Questions for AFG Operations and Safety Applications

OMB No.: 1660-0054

Expiration Date: August, 31 2019

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 4.6 hours per response for FEMA Form 080-0-2b "Activity Specific Questions for AFG Operations and Safety Applications". The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any

suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472-3100, Paperwork Reduction Project (1660-0054) NOTE: Do not send your completed form to this address.

The activities for program **Operations and Safety** are listed in the table below.

Activity	Number of Entries	Total Cost	Additional Funding
Equipment	2	\$ 620,592	\$ 52,750
Modify Facilities	0	\$ 0	\$ 0
Personal Protective Equipment	0	\$ 0	\$ 0
Training	0	\$ 0	\$ 0
Wellness and Fitness Programs	0	\$ 0	\$ 0

Grant-writing fee associated with the preparation of this request. \$0

Equipment

Equipment Details

1. What equipment will your organization purchase with this grant? Electric/Gas Powered Saws/Tools

* Please provide a detailed description of the item selected above. Hand tools and saws

2. Number of units: (whole number only) 28

3. Cost per unit: (whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.) \$ 7300

4. Generally the equipment purchased under this grant program will:

Replace unusable/unrepairable equipment to meet current standard

If you selected "Replace unusable/unrepairable equipment to meet current standard" or "Replace non-compliant equipment to current standard" (from Q4) above, please specify the age of equipment in years. 12

5. Will the equipment being requested bring the organization into voluntary compliance with a national standard, e.g. compliance with NFPA, OSHA, etc?

In your Narrative Statement, please explain how this equipment will bring the organization into voluntary compliance.

6. Is your department trained in the proper use of the equipment being requested?

7. Are you requesting funding to be trained for these item(s)? (Funding for requested training should be requested in the Equipment Additional Funding section).(Under the Action column select Update Additional Funding)

8. If you are not requesting training funds through this application, will you obtain training for this equipment through other sources?

Equipment

Equipment Details

- 1. What equipment will your organization purchase with this grant? Electric/Gas Powered Saws/Tools
- * Please provide a detailed description of the item selected above. Converting the Department's current outdated corded/gas-powered tools and equipment to cordless/eclectic versions with updated technologies. This includes ventilation fans, electric power tools, and a USAR concrete crusher
- 2. Number of units: (whole number only) 28
- 3. Cost per unit: (whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.) \$ 14864
- 4. Generally the equipment purchased under this grant program will:
Replace unusable/unrepairable equipment to meet current standard
If you selected "Replace unusable/unrepairable equipment to meet current standard" or "Replace non-compliant equipment to current standard" (from Q4) above, please specify the age of equipment in years. 15
- 5. Will the equipment being requested bring the organization into voluntary compliance with a national standard, e.g. compliance with NFPA, OSHA, etc?
In your Narrative Statement, please explain how this equipment will bring the organization into voluntary compliance.
- 6. Is your department trained in the proper use of the equipment being requested?
- 7. Are you requesting funding to be trained for these item(s)? (Funding for requested training should be requested in the Equipment Additional Funding section).(Under the Action column select Update Additional Funding)
- 8. If you are not requesting training funds through this application, will you obtain training for this equipment through other sources?

FEMA Form 080-0-2b

Firefighting Equipment - Additional Funding (optional unless you're applying for Training funds)

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	\$ 0

f. Contractual	Help	\$ 0
g. Construction	Help	\$ 0
h. Other	Help	\$ 0
i. Indirect Charges	Help	\$ 0
j. State Taxes	Help	\$ 52750

Explanation

This line item is the State sales tax (8.5% at time of application) associated with this equipment purchase

FEMA Form 080-0-2b

Firefighting Equipment - 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 SFFD has done a needs assessment of equipment and has identified 1) hand tools and 2) electric tools as the highest equipment priorities for the Department. We believe this equipment will have the highest impact on firefighter safety and operations on a daily basis. The Department's current inventory of these tools is all over 12 years old and are in need of an upgrade. These projects align with the highest priority equipment categories in the AFG guidance.

HAND TOOLS/SAWS

The San Francisco Fire Department seeks \$212,600 to purchase new hand tool sets for its truck and specialty units, a total of 28 sets in all. These tool sets consist of the following: chain saw (2 @\$800), partner saw (2 @\$1,250), and bullet saw (2 @\$1,600) for a total of \$7,300 per set before tax.

In 2017, the Department responded to over 145,000 calls for service. These tools are used everyday by members in emergency situations (fire ventilation and overhaul) as well as non-emergency situations (such as tree/debris removal). The Department currently has sets of tools on its apparatus, but these are all over ten years old and are subject to constant maintenance and repair issues due to their age, usage, and condition. In addition, current tools making use of updated technologies offer a lighter, more efficient tool for members to use in response.

ELECTRIC TOOLS

The San Francisco Fire Department is requesting \$451,569 to purchase electrical tools to replace its current inventory of outdated gasoline powered tools. The Department is requesting to purchase 28 sets of the following to deploy on Department truck and specialty rescue companies: ventilation fans (1 @\$4,500), electric power tools (1 each of a grinder, reciprocating saw, hammer drill, and rotary hammer for a total of \$1,864), and USAR concrete crusher (1 @\$8,500) for a total of \$14,864 per set before tax. This request has both operational as well as health/safety benefits for our members.

Truck companies are a crucial aspect of the Department's response to extrications. These tools would assist the Department's response to incidents with trapped victims, incidents involving response to industrial sites, and other incidents where crews are needed to cut through hard surfaces such as concrete or marble.

SFFD has a strong history of administrating federal grants and is committed to the guidelines set in the AFG NOFO. Included in our request is an additional 8.5% for sales tax. If awarded, SFFD will ensure the necessary matching funds (15%) are set aside next fiscal year.

PROJECT DETAILS:

28X Sets of Hand Tools and Saws (\$7,300/set) \$204,400

28X Sets of Cordless Electrical Tools and Fans (\$14,864/set) \$416,192

CA Sales Tax (8.5%): \$52,750

TOTAL: \$664,229

SFFD Share (15%): \$99,634

FEMA Share: \$564,595

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

The cost-benefit of this project aligns with the priorities of the AFG to address and enhance response capabilities, safety, and operations. SFFD serves one of the most populated and bustling cities in the world. We respond to over 145,000 calls for service each year. We are already negatively impacted by the age of some of our current equipment and cannot afford to let old equipment impact our services.

HAND TOOLS/SAWS

New tools for the Department's truck companies and specialty rescue units would create numerous advantages, and would offset the costs of repair and down time that the Department currently experiences. New tools come with newer technologies, drastically improving performance over the Department's current aged inventory. The newer models are lighter than current model, and would be safer as well by not leaking fuel as many of our current units do. The newer tools are more efficient, and have higher standards of performance than our existing units.

ELECTRIC TOOLS

If awarded, the Department's replacement of old gas-powered and corded tools with electrical cordless tools would result in improved operational functionality and efficiency. Given technology upgrades, the capabilities of electrical units on the market today far exceed the corded/gasoline tools the Department currently deploys. The battery-powered tools would allow for crews to instantly deploy the various rescue tools, not having crews wait for generators or corded connections to power up.

In addition, the electrical tools provide numerous health and safety benefits for the members that are using them daily. By eliminating these corded and gas-powered tools carried by the Department's truck companies and moving toward electric battery-powered replacements, the Department reduces dramatically the fumes and toxins that members are exposed to as a result of the gasoline-powered engine exhaust of the Department's current tools. These new tools, due to their reduced noise and not having a reliance on a loud generator, can further protect the hearing of members, and can also reduce the physical weight of the tools. These changes are also environmentally friendly, reducing the impact to the environment as a result of some of the improvements over time to the tools.

*** 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**

By approving this project for award, the SFFD will be able to completely update the hand tools and heavy-duty corded tools on all of its truck companies and specialty rescue units. This is important for both improving daily front-line operations given the high volume of calls the Department responds to, but at the same time protecting the health and safety of Department members. The overall impact to the surrounding community would be overwhelmingly positive.

HAND TOOLS/SAWS

New tools and saws for our truck and specialty rescue companies would have extremely positive impacts on daily operations, especially given the Department's high (and annually increasing) call volume levels. These tools are used on pretty much all fire suppression calls, be it residential or commercial structures, for such things as making cuts for ventilation as well as overhaul operations. In addition, the Department uses these tools in efforts to improve general public safety for the general community, such as removing downed trees or clearing debris. New tools would absolutely improve the reliability and efficiency of Departmental response.

ELECTRIC TOOLS

As the Department has not replaced its tools in over twelve years, it has missed out on some of the technological improvements in tools. Department crews will be able to make use of some of the more recent advances in these tools, such as the overall lighter weight as well as the higher performance levels. For example, new tools would allow the Department to breach thicker walls, given the capabilities of new units over the Department's current units.

In addition, as mentioned in section 2, these tools, when upgraded to electrical, will provide great health benefits and reduce the pollution that enters the air locally.

We hope that you find our grant request worthy of funding. Thank you for your consideration.

FEMA Form 080-0-2b

BudgetBudget Object Class

a. Personnel	\$ 0
b. Fringe Benefits	\$ 0
c. Travel	\$ 0
d. Equipment	\$ 620,592
e. Supplies	\$ 0
f. Contractual	\$ 0
g. Construction	\$ 0
h. Other	\$ 0
i. Indirect Charges	\$ 0
j. State Taxes	\$ 52,750
Federal and Applicant Share	
Federal Share	\$ 612,130
Applicant Share	\$ 61,212
Applicant Share of Award (%)	10

* Non-Federal Resources *(The combined Non-Federal Resources must equal the Applicant Share of \$ 61,212)*

a. Applicant	\$ 61,212
b. State	\$ 0
c. Local	\$ 0
d. Other Sources	\$ 0

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

Total Budget

\$ 673,342

FEMA Form 080-0-2b

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.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination

provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

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

Signed by **Mark Corso** on **10/26/2018**

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 **Mark Corso** on **10/26/2018**

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.

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	Status
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 asterisk (*) are required.

I, Mark Corso, am hereby providing my signature for this application as of 26-Oct-2018.