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
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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 12/26/2017 to 02/02/2018 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/1431970163011-80ce3cd90772a91295b1627c56d8fd2/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 Robert J Venci on 2018-02-27 16:56:52.0

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?
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

Primary Point of Contact

* Title
  Firefighter/Paramedic
Prefix (select one)
  Mr.
* First Name
  Robert
Middle Initial
  J
Last Name
  Vencl
* Primary Phone
  440-942-7207 Ext. Type work
* Secondary Phone
  440-622-1646 Ext. Type cell
Optional Phone
Fax
  440-975-3534
* Email
  Vencl.whfd@gmail.com

FEMA Form 080-0-2

Contact Information

Alternate Contact Information Number 1

* Title
  Fire Chief
Prefix (select one)
  Mr.
* First Name
  Thomas
Middle Initial
Last Name
  Talcott
* Primary Phone
  440-918-8715 Ext. Type work
<table>
<thead>
<tr>
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<th>440-487-1901 Ext.</th>
<th>Type</th>
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<td>cell</td>
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<td><strong>Optional Phone</strong></td>
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<tr>
<td><strong>Fax</strong></td>
<td>440-975-3534</td>
<td></td>
</tr>
<tr>
<td><strong>Email</strong></td>
<td><a href="mailto:Talcott.whfd@gmail.com">Talcott.whfd@gmail.com</a></td>
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</tr>
<tr>
<td><strong>Alternate Contact Information Number 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Title</strong></td>
<td>Lieutenant</td>
<td></td>
</tr>
<tr>
<td><strong>Prefix (select one)</strong></td>
<td>Mr.</td>
<td></td>
</tr>
<tr>
<td><strong>First Name</strong></td>
<td>Louis</td>
<td></td>
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<tr>
<td><strong>Middle Initial</strong></td>
<td></td>
<td></td>
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<tr>
<td><strong>Last Name</strong></td>
<td>DiMattia</td>
<td></td>
</tr>
<tr>
<td><strong>Primary Phone</strong></td>
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<td><strong>Fax</strong></td>
<td>440-975-3534</td>
<td></td>
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<tr>
<td><strong>Email</strong></td>
<td><a href="mailto:Dimattia.whfd@gmail.com">Dimattia.whfd@gmail.com</a></td>
<td></td>
</tr>
</tbody>
</table>
Applicant Information

EMW-2017-FO-02915
Originally submitted on 01/31/2018 by Robert Vencel (Userid: chiefharmon)

Contact Information:
Address: 35455 Chardon
City: Willoughby Hills
State: Ohio
Zip: 44094
Day Phone: 4409188715
Evening Phone:
Cell Phone:
Email: Vencel.whfd@gmail.com

Application number is EMW-2017-FO-02915

* Organization Name
Willoughby Hills Fire Department

* Type of Applicant
Fire Department/Fire District

City

* Fire Department/District, Non-Affiliated EMS, and Regional applicants, select type of Jurisdiction Served:
If "Other", please enter the type of Jurisdiction

SAM.gov (System For Award Management)

* What is the legal name of your Entity as it appears in SAM.gov?
WILLOUGHBY HILLS, CITY OF
Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

* 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
35405 Chardon Road
Mailing Address 2

* City
Willoughby Hills

* State
Ohio

* Zip
44094 - 9195
Need help with ZIP+4?

34-6003085

* Employer Identification Number (e.g. 12-3456789)
Note: This information must match your SAM.gov profile.

* Is your organization using the DUNS number of your 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)

* What is your 9 digit DUNS number?
932814924

(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
  35455 Chardon, Road

* Physical Address 2
  City: Willoughby Hills
  State: Ohio
  Zip: 44094 - 9195

Mailing Address

* Mailing Address 1
  35405 Chardon, Road

* Mailing Address 2
  City: Willoughby Hills
  State: Ohio
  Zip: 44094 - 9195

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

  041000153

* Your account number

  01669726915

Additional Information

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

  No

* Is the applicant delinquent on any Federal debt?

  No

If you answered yes to any of the additional questions above, please provide an explanation in the space provided below:
• 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?
  No

• 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?
  Suburban

• Is your Organization considered a Metro Department?
  No (Over 350 paid career Firefighters)

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

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

  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?

• Does your organization protect critical infrastructure?
  Yes

If "Yes", please describe the critical infrastructure protected below:

The Willoughby Hills Fire Department (WHFD) protects over 60 road miles of interstate including Interstate 90 and Interstate 271. These main freeways provide routing capabilities for numerous hazardous materials vehicles and other means of cargo transportation. If these freeways were compromised, it would have a catastrophic impact on the economy in the Mid-West region of the United States. These interstates are also responsible for hundreds of motor vehicle accidents annually and dozens of patient extrication’s. A 500,000 gallon elevated water tank maintained by the Lake County Water Department is located on the cities south side while twelve and eight-inch domestic water mains run throughout the city’s main roadways, six-inch water mains provide service to most residential side streets. Due to our aging pipelines and increased usage, multiple water mains are broken annually costing taxpayers thousands of dollars each year. Major natural gas transmission pipelines follow along the main roadways and join into the North/South transmission mains that cross the United States. The City of Willoughby Hills houses one electrical sub-station maintained by First Energy Corporation. Eleven sanitary/sewer pump stations and three large generators to provide addition power in the event of a large grid power loss, all of which are maintained by city employees. Educational facilities ranging from child day care services to high school students, including a teenage behavioral facility, all provide an increase in daytime population and unique response concerns to our organization. One EAS facility houses sulfuric and hydrochloric acids. While compliant and cooperative with fire department inspection requirements, storing and transporting such volatile chemicals can create substantial health and safety issues in the event of an emergency. A third large cellular tower was completed in 2017 with a possible fourth in the future.

• What percentage of your primary response area is for agriculture, wildland, open space, or undeveloped properties?
  30 %

• What percentage of your primary response area is for commercial and industrial purposes?
  10 %

• What percentage of your primary response area is used for residential purposes?
  60 %

• What is the permanent resident population of your Primary/First-Due Response Area or jurisdiction served?
  9934 (whole numbers only)

• 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? (whole numbers only) 30
- How many members in your department/organization are trained to the level of EMR or EMT, Advanced EMT or Paramedic? (whole numbers only) 30

Does your department have a Community Paramedic program? No

How many personnel are trained to the Community Paramedic level? (whole numbers only) 1

- How many stations are operated by your organization? (whole numbers only) Yes
- 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)? Yes

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 43035

- How many of your active firefighters are trained to the level of Firefighter I (or equivalent)? (whole numbers only) 30
- 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) 29

Are you requesting training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001? No

If you indicated that less than 100% of your firefighters are trained to the Firefighter II level and you are not asking for training funds 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.

Our training program consists of several in-house state certified fire instructors as well as affiliation agreements with several state and local community colleges. Being that our department only has one member that is not certified to the NFPA FF Level II standard and that the State of Ohio provides a "Fire Department Training Reimbursement Grant" as a funding source for such training, we felt that it would not be as beneficial to pursue such funding through the AFG system. Our goal is to provide the safest possible working environment for our employees and the community we serve through the implementation of a direct source capture exhaust system. This project has been deemed a high priority by our city following the deaths of two active members to cancer over the last four years. Having 100% compliance with all aspects of NFPA 1001 is certainly a priority within our organization, but after confirming that the member without a current Firefighter II certification will be retiring within the next three years solidified our departments focus to the direction of cancer prevention through an exhaust removal system for which we have no other reliable source of funding.

* What services does your organization provide?

<table>
<thead>
<tr>
<th>Advanced Life Support</th>
<th>Emergency Medical Responder</th>
<th>Rescue Operational Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airport Rescue Firefighting (ARFF)</td>
<td>Haz-Mat Operational Level</td>
<td>Rescue Technical Level</td>
</tr>
<tr>
<td>Basic Life Support</td>
<td>Haz-Mat Technical Level</td>
<td>Structural Fire Suppression</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Wildland Fire Suppression</td>
</tr>
</tbody>
</table>

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

The Willoughby Hills Fire Department (WHFD) is located in Lake County, Ohio just east of Cleveland along the south shores of Lake Erie. The Fire Department consists of ten career members and twenty part-time members while providing fire protection, EMS, and rescue services to the City of Willoughby Hills, the Village of Waite Hill and numerous other communities through mutual aid agreements. The department plays an active role in our regional Mutual Aid Box Alarm System (MABAS) and currently participates in an automatic mutual aid agreement with all surrounding communities as
well as specialized regional teams including Technical Rescue operations, Hazardous Materials responses and Tactical Paramedic Care. Our primary response area encompasses seventeen square miles and is home to almost 10,000 residents. Eight multi-story residential high rise occupancies house 40% of the city’s residents. These apartment complexes provide a unique metropolitan target hazard while operating under a suburban based manpower status.

Unique and challenging characteristics of our community include: A 500,000 gallon elevated water tank maintained by the Lake County Water Department residing on the southern area of the city. Over 60 road miles of interstate including Route 90 and Interstate 271 run through the city. These main freeways provide routing capabilities for numerous hazardous materials vehicles and other cargo transportation for the entire Midwest portion of the United States. Many large natural gas transmission pipelines follow along the main roadways and join into the North/South transmission mains that cross the United States. Utility infrastructure services in the city including domestic water lines, storm drains and electrical hazards of which are responsible for dozens emergencies annually.

Multiple educational facilities ranging from infant child care to high school students are located within the city limits. WHFD also provides assistance to neighboring communities when handling emergencies involving industrial, commercial, hospital, educational, and notable predetermined target hazards. Swagelock Corporation produces multiple industrial components while utilized a variety of hazardous materials. Continuous transportation and use of chemicals including sulfuric and hydrochloric acids provides a unique target hazard to our community. The Cuyahoga County Airport and the Lost Nation Airports both border the City of Willoughby Hills. These public airports house many hazardous materials and have been responsible for multiple aviation related emergencies over the past twenty years. We also provide Technical Rescue response assistance to the Lake and Cuyahoga county areas in agreement with the Hillcrest Technical Rescue Team. Members are also affiliated with the Ohio Region 2 Urban Search and Rescue Team which encompasses a five county region. This region includes six major rivers (Ashtabula, Grand, Chagrin, Cuyahoga, Rocky, Black) and miles of Lake Erie coastline. WHFD provides trained tactical paramedics when performing search warrants, drug raids and hostage related incidents. This position requires extensive training and positive communication with our area police agencies. In 1985, WHFD established the first Hazardous Material response unit in Lake County. Throughout the years the organization has helped create the Lake County Hazardous Material response team in an effort to reduce operating costs to all cities and provide a higher level of service to the county. The Perry Nuclear Power Plant, owned and operated by First Energy Corporation is located 20 miles east of our city. WHFD is included in county emergency planning and provides active roles in Hazardous Material Responses. Incidents at the nuclear power plant can include fire, radiological releases, confined space and hazardous materials incidents.

FEMA Form 080-0-2

Fire Department Characteristics (Part II)

* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
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<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
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* What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
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</table>

* What is the total number of line of duty member fatalities in your jurisdiction over the last three calendar years?

<table>
<thead>
<tr>
<th></th>
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<th>2015</th>
<th>2014</th>
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<tbody>
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<td></td>
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* What is the total number of line of duty member injuries in your jurisdiction over the last three calendar years?

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<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

2167493

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

78

* 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

<table>
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<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
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<td></td>
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<td>Taxes?</td>
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<tr>
<td>Bond Issues?</td>
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<td>EMS Billing?</td>
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<td>Grants?</td>
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<td>Donations?</td>
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<td>Fund drives?</td>
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<td>0 %</td>
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<tr>
<td>Fee for Service?</td>
<td>5 %</td>
<td>5 %</td>
<td>5 %</td>
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* 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.

Willoughby Hills, like most suburbs of a major metropolitan area (Cleveland), has seen a drastic reduction in revenues from the collection of income taxes, property taxes and state funding due to the economic state of our country. Unemployment in Willoughby Hills has remained consistent at 5%, just below the national average while the cost of living in the city increased by 6% higher than the U.S. average. Health insurance costs have risen by 30% over the last three years while Workers Compensation premiums and other service costs continue to rise. Since 2008, the city has lost over $155,000 (42% difference) in property taxes, $427,131 (52% difference) in local government funding and $367,331 in estate taxes. Additional reductions in tangible personal property taxes and inheritance taxes through the State of Ohio, has left the city looking for any possible financial assistance available. The department's total budget for the past five years has been in a constant decline. In order to prevent further cuts in staffing (Staffing in 2001, 7.5/day, in 2005 5.5, in 2016, 4), the position of Full-Time Assistant Fire Chief and Fire Safety Inspector have been completely eliminated. Additional reductions in operating and capital projects have been implemented in an attempt to maintain minimum staffing levels while our call volume has doubled over the last fifteen years. Personnel costs, which accounts for 78% of our expenditures, are consuming an ever-increasing portion of our budget, department operations now only account for 22% of our budget. The City of Willoughby Hills was not an Enterprise Zone until 2005 so while all of the surrounding communities were in a position to offer tax and income incentives to attract business development, we remained a bedroom community with a limited tax base. As a result, income tax receipts for Willoughby Hills have stagnated in recent years and decreased by over $100,000 since 2011. Churches, a park system, and non-profit entities, none of which pay property taxes, own large sections of Willoughby Hills land. This, in combination with the low-density nature of our community, results in too few taxpayers to adequately fund the fire department and other community needs. In 2014, the city second largest income tax base (Eaton Corporation) moved to a neighboring city. This decrease in funding cost the city over $200,000 annually, a 5% loss in income tax revenue. In two years, a small college, a motorcycle dealership, two banks and numerous other businesses have left the city leaving a substantial void in city funding. The City of Willoughby Hills can and will supply the matching funds needed as stipulated by the grant program, which will be taken from the operating budget of the city. Without this grant we would not be able to make this much needed purchase, whereby possibly placing additional exposure risks to our firefighters and the public. We have researched and found vendors that will supply our department with a much needed vehicle exhaust ventilation system that will meet or exceed current NFPA standards and as always the City of Willoughby Hills participates in a competitive bidding process. The figures presented in the budget section of this request reflect to the best of our ability, a conservative but realistic cost for the material and labor costs associated with installing the new system. Since 2014 we have had the unfortunate experience of seeing two of our career members forced off of the job because of work related cancers. Within one year of their retirements, both individuals passed from their terminal disease. If awarded this much needed funding we as an organization can help prevent further illness related to our career. As previously addressed, our budget is stretched beyond capacity and we believe this purchase will provide the most efficient use of funding and will greatly influence the safety and health of all firefighters and citizens who enter our station.

* 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.)

<table>
<thead>
<tr>
<th>Type or Class of Vehicle</th>
<th>Number of Front Line Apparatus</th>
<th>Number of Reserve Apparatus</th>
<th>Number of Seated Riding Positions</th>
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</thead>
<tbody>
<tr>
<td>Engines or Pumpers (pumping capacity of 750 gpm or</td>
<td>1</td>
<td>1</td>
<td>8</td>
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1/29/2019 Application Number: EMW-2017-FO-02915
ORDINANCE NO. 2019-13
"Exhibit A" Page 9 of 25
Fire Department Call Volume

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<tr>
<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire - NFIRS Series 100</td>
<td>81</td>
<td>76</td>
<td>76</td>
</tr>
<tr>
<td>Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series 200</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Rescue &amp; Emergency Medical Service Incident - NFIRS Series 300</td>
<td>1386</td>
<td>1194</td>
<td>1024</td>
</tr>
<tr>
<td>Hazardous Condition (No Fire) - NFIRS Series 400</td>
<td>49</td>
<td>60</td>
<td>56</td>
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<tr>
<td>Service Call - NFIRS Series 500</td>
<td>100</td>
<td>91</td>
<td>192</td>
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<tr>
<td>Good Intent Call - NFIRS Series 600</td>
<td>151</td>
<td>151</td>
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</tr>
<tr>
<td>False Alarm &amp; False Call - NFIRS Series 700</td>
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<tr>
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<tr>
<td>Special Incident Type - NFIRS Series 900</td>
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FIRES

<table>
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<tr>
<th></th>
<th>2016</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of the NFIRS Series 100 calls, how many are &quot;Structure Fire&quot; (NFIRS Codes 111-120)</td>
<td>61</td>
<td>58</td>
<td>51</td>
</tr>
<tr>
<td>Of the NFIRS Series 100 calls, how many are &quot;Vehicle Fire&quot; (NFIRS Codes 130-138)</td>
<td>10</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>Of the NFIRS Series 100 calls, how many are</td>
<td>10</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>
**Vegetation Fire** (NFIRS Codes 140-143)
What is the total acreage of all vegetation fires? 1 1 1

**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)

<table>
<thead>
<tr>
<th>Category</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of the NFIRS Series 300 calls, how many are &quot;Motor Vehicle Accidents&quot;</td>
<td>123</td>
<td>101</td>
<td>84</td>
</tr>
<tr>
<td>(NFIRS Codes 322-324)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Of the NFIRS Series 300 calls, how many are &quot;Extrications from Vehicles&quot;</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(NFIRS Code 352)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Of the NFIRS Series 300 calls, how many are &quot;Rescues&quot;</td>
<td>16</td>
<td>24</td>
<td>23</td>
</tr>
<tr>
<td>(NFIRS Codes 300, 351, 353-381)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many EMS-BLS Response Calls</td>
<td>0</td>
<td>0</td>
<td>87</td>
</tr>
<tr>
<td>How many EMS-ALS Response Calls</td>
<td>1370</td>
<td>1067</td>
<td>937</td>
</tr>
<tr>
<td>How many EMS-BLS Scheduled Transports</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>How many EMS-ALS Scheduled Transports</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>How many Community Paramedic Response Calls</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**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)

<table>
<thead>
<tr>
<th>Category</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many times did your organization receive Mutual Aid?</td>
<td>57</td>
<td>77</td>
<td>55</td>
</tr>
<tr>
<td>How many times did your organization receive Automatic Aid?</td>
<td>15</td>
<td>26</td>
<td>30</td>
</tr>
<tr>
<td>How many times did your organization provide Mutual Aid?</td>
<td>85</td>
<td>69</td>
<td>78</td>
</tr>
<tr>
<td>How many times did your organization provide Automatic Aid?</td>
<td>43</td>
<td>39</td>
<td>32</td>
</tr>
<tr>
<td>Of the Mutual and Automatic Aid responses, how many were structure fires?</td>
<td>40</td>
<td>41</td>
<td>24</td>
</tr>
</tbody>
</table>

FEMA Form 080-0-2
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 Willoughby Hills Fire Department (WHFD) often holds multi-jurisdictional training with its neighboring communities. Members from WHFD have become an intricate part of many different specialized teams including the Hillcrest Technical Rescue team, Lake County Hazardous Materials team and Western Lake County SWAT/Medic team. Multiple days per year the Willoughby Hills fire station hosts these organizations and others to help continue expanding our education and provide cohesion to all surrounding agencies. While these teams are using the station facilities, the duty crew must still manage daily emergency and non-emergency responses, thus leaving all members exposed to the harmful toxins produced by our emergency vehicles. This funding would help provide safety for not only the members of the WHFD but all surrounding public service agencies.

* 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:

While every fire department throughout the country faces new risks and concerns from issues including lightweight building construction, budget reductions, reduced manning and expanding cancer rates, our career requires its personnel to remain composed and professional while adapting to these changing situations. Increased call volumes can create a substantial hardship on the organization, the personnel, the budget and the residents served, and the Willoughby Hills Fire Department (WHFD) is no exception. WHFDs call volume continues to increase at an astonishing rate; in 2011 WHFD totaled 1,620 emergency responses with a manpower of six personnel per day. In 2016 the total run volume increased to 1,854 and again increased to 2,082 in 2017 with a daily manning of 4.5. The increase from 2011 to 2017 totaled 29% all while operating with a continued reduction in personnel. Because of our aging population, increase in senior living communities, added physician offices and multiple government assisted residential properties, our call volume will continue to grow into the foreseeable future with no additional revenue expansion. The continued increase in department responses means our emergency vehicles will be entering and exiting the bay floors more than ever and without the proper exhaust removal system to catch the well documented harmful carcinogens, our members, their families and the visiting public will continue being exposed to these unnecessary toxins. WHFD will continue to be one of the busiest single station departments in the area responding to over 2,080 emergencies with 20% of that total consisting of multiple call responses. Following a 2016 study, the WHFD holds the highest call volume to daily manpower ratio compared to its 10 surrounding cities. These statistics prove while our job description remains extensive, we are struggling to keep up with the increased call volume in attempts to remain proficient in areas like fire and EMS training, fire prevention and public education. As a department comprised of both full-time and part-time members, housing a ladder truck remains a priority given the amount of residential population (40%) located in one of our eight high rise structures. With our current staffing and call volume, we are unable to operate this much needed piece of equipment forcing the ladder to remain browned out for a vast majority of the year. This invaluable piece of equipment only responded to 20 emergencies in 2016. While our call volume increases and our job description broadens, our daily manning continues to be reduce leaving not only our firefighters vulnerable to fatigue, injury, illness and unsafe working conditions but the residents we have sworn to protect are now forced to accept longer response times, reduced manning and public servants that are subjected to extremely high levels of carcinogens. According to a study conducted by the CDC and NIOSH (2016). Firefighters studied showed higher rates of certain types of cancer than the general U.S. population. Based on U.S. cancer rates: -Firefighters have a greater number of cancer diagnoses and cancer-related deaths. -These were mostly digestive, oral, respiratory, and urinary cancers. -There were twice as many firefighters with malignant mesothelioma. -There were more cases of certain cancers among younger fire fighters. -Firefighters who were under 65 years of age had more bladder and prostate cancers than expected. -The chance of lung cancer diagnosis or death increased with amount of time spent at fires. -The chance of leukemia death increased with the number of fire runs, WHFD has already been forced to provide funeral services to two of its active members over the last three years from job related cancer deaths. It is our intention to make the proper station modifications needed to create a safer environment for our members, their families and the residents we serve who occupy the station on a daily basis.

4. Enter grant-writing fee associated with the preparation of this request. Enter 0 if there is no fee.
5. 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.  

* 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.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number of Entries</th>
<th>Total Cost</th>
<th>Additional Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equipment</td>
<td>0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Modify Facilities</td>
<td>1</td>
<td>$65,000</td>
<td>$0</td>
</tr>
<tr>
<td>Personal Protective Equipment</td>
<td>0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Training</td>
<td>0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Wellness and Fitness Programs</td>
<td>0</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

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

View Fire Operations and Firefighter Safety - Modify Facilities

Modify Facilities Details

1. On what type of modification will the funds be spent? (Add one line-item request per facility being modified)  

Please provide a detailed description of the modification selected above.

Source Capture Exhaust System(s)

If awarded the modifications would include a Vehicle Exhaust Ventilation System and 8 apparatus drop hoses connected to each emergency vehicle through a magnetized exhaust coupling. The hoses will be connected to a 7.5 hp fan which will filter and expel the exhaust fumes. These fumes will then be forced through the approved duct-work and out
2. What is the square footage of the area that your modification will directly affect? (number only)

3. If you are installing an exhaust system, how many vehicles do you plan on attaching to the system (only include currently owned vehicles or vehicles on order - do not include equipment for future capacity)? (whole number only)

4. Does the facility you wish to modify have a drive through bay?

5. Number of units: (whole number only)

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

7. What is the age of the facility that is being modified? (whole number only)

8. What type of facility will be modified?

9. What is the level of occupancy for the facility you wish to modify? Note: The occupancy is defined by the number of hours the facility is used within a single 24 hour time period.

Firefighting Modify Facilities - 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 Willoughby Hills Fire Department (WHFD) is requesting $85,715 under the 2017 Assistance to Firefighters Grant program. The fire department Operation and Safety program includes station modification fund requests for the purchase and installation of a direct capture vehicle exhaust system that meets the requirements of the National Fire Protection Association (NFPA). The program will help protect the health and safety of the fire department personnel, neighboring agencies and the public we serve. This project is considered a high priority by local, state and federal (FEMA) agencies because of the significant health considerations involved. WHFD is attempting to replace an out-dated obsolete air cleaning system with a new direct capture magnetic vehicle attached exhaust removal system for all emergency response vehicles. After completing the necessary competitive bidding process, it was determined the most efficient and appropriate system for our organization would include a turnkey package consisting of eight apparatus hose drops, mechanical/ductwork installation, electrical high and low voltage wiring, a 7.5 HP exhaust fan, and magnetic couplings attached to each vehicle exhaust pipe. The evacuation system includes an EPA recognized filter to help purify the exhaust particles before being emitted into the atmosphere. In service training to all members will be provided by installation/manufacturer crews and maintenance will be assigned to the appropriate station maintenance personnel. The existing air cleaning system which has been in place for over eight years, has proven both ineffective and costly to maintain while exposing all employees, neighboring agencies and community visitors the harmful toxins produced by our emergency vehicles. Notable soot stains can be found throughout the apparatus bay walls and ceilings while also allowing these carcinogens to enter our kitchen, living quarters and dormitory which are located directly off the apparatus floor. The existing air cleaning system was installed prior to the forced retirements of two of our nine (22%) line career members over the last five years. Both members were forced into early retirement because of their debilitating job related illness which ultimately claimed both of their lives. Because of the inherent hazards we face on the job, it is well known that firefighters are 68% more likely to develop cancer than the general population. NFPA 1500 Standard on Fire Department Occupational Safety, Health, and Wellness Program (2018) edition section 10.1.5 states "The fire department shall prevent exposure to fire fighters and contamination of living and sleeping areas to exhaust fumes". Due to new
emission standards, new emergency vehicles are no longer compatible with our outdated air filtration system. To have been made to self-remedy the accumulation of diesel exhaust accumulation but due to the frigid northeast Ohio temperatures, we are unable to keep our apparatus bay doors open to allow for natural ventilation five months out of the year. Because the exhaust from our front line ambulance and engine are in close proximity to our structural firefighting personal protective equipment (PPE), we are required to more frequently wash our PPE to minimize potential exposure to contaminants from the PPE, ultimately decreasing the life-span of the PPE. If awarded, this system will help provide the foundation to a healthier and safer working environment for the WHFD as determined by our organizations safety committee. It is our goal to not only prevent but eliminate cancer from the workplace through instituting such policies as; immediate decontamination following any structural incident followed by mandatory gear washing, zero tolerance tobacco use policy on department grounds, mandatory use of an SCBA while operating in any IDLH environment, annual physicals for all members and now the use of an emergency vehicle exhaust removal system.

* 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 purpose of the Assistance to Firefighter Grant Program (AFG) is to enhance, through financial assistance, the safety of the public and firefighters while providing a continuum of support for emergency responders. Imply in this statement is the requirement that all fire departments are able to handle our daily operations and respond to an emergency with the tools and equipment to do the job in the most professional manner. Contributing factors like the accumulation of diesel exhaust within our building promotes increases in sick use, long term disabilities, added health care costs, overtime and Bureau of Workers Compensation (BWC) premiums. Mechanical failures and equipment deterioration hinders the existing air filtration (Non-diesel/smoke removal system) from providing a safe atmosphere to work in while emergency vehicles enter and exit the station. Standards including NFPA 1500 ask fire departments to contain all vehicle exhaust emissions to a level of no less than 100% effective capture. These recommendations also comply with NIOSH's requirements to reduce emissions to the lowest feasible level, to limit impact on firefighters health, and require our members to complete the necessary tasks in a safe and efficient manner. By complying to these standards we not only provide a safe working environment for our employees, families and visitors but we reduce the departments operating costs through the elimination or reduction of excessive sick time usage, long term disabilities claims, health care costs and BWC premiums. After comparing the project pricing to other neighboring communities who have similar direct source capture systems, it was determined through multiple quotes that the value associated with this project is advantageous and will provide cost savings to the department in both short and long term capacities. From lower project maintenance costs, updated energy efficiency and reduced health insurance premiums, this project can provide a much needed piece of life safety equipment to our organization that otherwise would not be able to be purchased because of an already depleted operating budget. Local and state funds have been exhausted because of the increase in cancer related illnesses to firefighters in the last 10 years. The State of Ohio recently passed SB27, a presumptive cancer bill for any proven job related cancer to a member with at least six years of hazardous experience. This bill was created because of a local Northeast Ohio fire officer who passed away in 2017 from brain cancer. The amount of area fire departments who have experienced cancer related disabilities because of direct exposures like diesel exhaust fumes continues to increase at an alarming rate. The financial burden to the taxpayers associated with the continued payment to the family of the disabled or deceased is beyond substantial. In addition to the financial burden, the mental and emotional aspects of these situations to both the firefighters and their families can be detrimental.

* 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

229,245 (2016) residents call Lake County home while the county employs 86,124 people in fields varying from commercial manufacturing, power plant professionals, mining, utility workers and hospital employees. Each profession presents varying degrees for potential emergencies. The implementation of a new direct capture vehicle exhaust system will offer our department, other surrounding agencies and the general public we serve, the ability to conduct daily business, training and station tours in a safe and carcinogen free atmosphere. Many multi-jurisdictional training events including the Lake County Hazardous Materials Team, the Hillcrest Technical Rescue Team, and the Western Lake County SWAT-Medic Team are held at the Willoughby Hills Fire Department (WHFD). Our organization also holds two large public events throughout the year offering all community residents the opportunity to tour the station, sit in the apparatus and ask questions while grasping a thorough understanding of what our career entails. While providing these services to the public it is our goal to not have the concern of carcinogen exposure on our minds instead focusing on these appropriate training and public education platforms. Because of the inclement weather we are exposed to five months out of the year, our apparatus bay doors must remain closed in fear of freezing pipes and increased energy costs due to heat loss. This award would afford our members the opportunity to run our emergency vehicles in house to handle preventive maintenance as needed and have no concerns of spreading harmful exhaust fumes throughout the apparatus floors, walls, living areas, kitchen and dormitory. By not having to pull all emergency apparatus outside to exercise the equipment or provide training related to each vehicle, our organization can now maintain proper maintenance levels and vehicle readiness year round.
Both short term and long term cost savings can be seen after the installation of a new direct capture vehicle exhaust system. In the short term, money will be saved from the lack of maintenance needed to keep the systems in operation because of their efficiency and durability. Long term savings will become apparent following the reduction of long term disability costs and reduced healthcare premiums from a safer and healthier workforce. Possibly the most important aspect of the system is that it gives every employee/visitor the satisfaction of knowing they are in a clean and safe environment anywhere throughout the building.

It is well documented that many fire departments throughout the country have been plagued with cancer related illnesses over the last fifteen years and our organization is no exception. WHFD has been forced to handle the loss of two senior officers from job related cancers in just the last four years. The first member succumbed to his intestinal/rectal cancer in 2014 after completing his 23rd year of service. Multiple sources have stated that the constant exposure to diesel exhaust fumes while working at the fire station contributed to the cancer that ultimately took this father of three. The second officer selflessly responded to the World Trade Center attacks on September 11th 2001 to assist in the recovery efforts with her certified cadaver dog. Twelve years later she was diagnosed with the same form of lung and spinal cancer that the responders from New York are still battling today. Her fight ended in 2016 after a courageous battle. It is our goal to prevent ever having to go through these devastating situations again so as an organization we have vowed to provide both current and future employees a safe and healthy place of employment so that the focus can be on affording the best possible service to the residence we have sworn to protect.

FEMA Form 080-0-2b

Budget

Budget Object Class

<table>
<thead>
<tr>
<th>Budget Object Class</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Personnel</td>
<td>$ 0</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>$ 0</td>
</tr>
<tr>
<td>c. Travel</td>
<td>$ 0</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>$65,000</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>$ 0</td>
</tr>
<tr>
<td>f. Contractual</td>
<td>$ 0</td>
</tr>
<tr>
<td>g. Construction</td>
<td>$ 0</td>
</tr>
<tr>
<td>h. Other</td>
<td>$ 0</td>
</tr>
<tr>
<td>i. Indirect Charges</td>
<td>$ 0</td>
</tr>
<tr>
<td>j. State Taxes</td>
<td>$ 0</td>
</tr>
</tbody>
</table>

Federal and Applicant Share

<table>
<thead>
<tr>
<th>Component</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Share</td>
<td>$61,905</td>
</tr>
<tr>
<td>Applicant Share</td>
<td>$3,095</td>
</tr>
</tbody>
</table>

*Non-Federal Resources* (The combined Non-Federal Resources must equal the Applicant Share of $3,095)

<table>
<thead>
<tr>
<th>Component</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Applicant</td>
<td>$3,095</td>
</tr>
<tr>
<td>b. State</td>
<td>$ 0</td>
</tr>
<tr>
<td>c. Local</td>
<td>$ 0</td>
</tr>
<tr>
<td>d. Other Sources</td>
<td>$ 0</td>
</tr>
</tbody>
</table>
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

$65,000

FEMA Form 080-0-2b
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...

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.


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 Robert Vencel on 01/11/2018
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 grantee’s 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:

<table>
<thead>
<tr>
<th>Place of Performance</th>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Action</th>
</tr>
</thead>
</table>

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 Robert Venci on 01/11/2018
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.

<table>
<thead>
<tr>
<th>Application Area</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant's Acknowledgements</td>
<td>Complete</td>
</tr>
<tr>
<td>Overview</td>
<td>Complete</td>
</tr>
<tr>
<td>Contact Information</td>
<td>Complete</td>
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<tr>
<td>Applicant Information</td>
<td>Complete</td>
</tr>
<tr>
<td>Applicant Characteristics (I)</td>
<td>Complete</td>
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<tr>
<td>Applicant Characteristics (II)</td>
<td>Complete</td>
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<tr>
<td>Department Call Volume</td>
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<td>Request Information</td>
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<td>Request Details</td>
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<td>Budget</td>
<td>Complete</td>
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<tr>
<td>Assurances and Certifications</td>
<td>Complete</td>
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</tbody>
</table>

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, Robert J Venci, am hereby providing my signature for this application as of 09-Jul-2018.