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/1431970163011-80ca3cd907072a91295b1627c56e8fd2/cpd_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(129,632),(288,686), 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, or existing award being revoked pending investigation, or referral to the Office of the Inspector General.

Signed by Robert J Vencl on 2018-10-04 12:53:47.0

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?

https://eservices.fema.gov/FemaFireGrant/firegrant.jsp?sysAppId=1070082&print=true&app_number=EMW-2016-F... 1/27
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

Need help for ZIP+4?

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
Prefix (select one)
First Name
Middle Initial
Last Name
Primary Phone
Secondary Phone
Optional Phone
Fax
Email

Firefighter/Paramedic
Mr.
Robert
J
Vencl
440-822-1646
440-942-7207
440-975-3534
vencl.whfd@gmail.com

Alternate Contact Information Number 1

Title
Prefix (select one)
First Name
Middle Initial
Last Name
Primary Phone

Fire Chief
Mr.
Timothy
Serazin
440-942-8715

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
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<tbody>
<tr>
<td>Secondary Phone</td>
<td>440-567-3286</td>
</tr>
<tr>
<td>Optional Phone</td>
<td></td>
</tr>
<tr>
<td>Fax</td>
<td>440-975-3534</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Serazin.whfd@gmail.com">Serazin.whfd@gmail.com</a></td>
</tr>
</tbody>
</table>

Alternate Contact Information Number 2

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Lieutenant</td>
</tr>
<tr>
<td>Prefix (select one)</td>
<td>Mr.</td>
</tr>
<tr>
<td>First Name</td>
<td>Louis</td>
</tr>
<tr>
<td>Middle Initial</td>
<td></td>
</tr>
<tr>
<td>Last Name</td>
<td>DiMattia</td>
</tr>
<tr>
<td>Primary Phone</td>
<td>440-781-1979</td>
</tr>
<tr>
<td>Secondary Phone</td>
<td>440-918-8711</td>
</tr>
<tr>
<td>Optional Phone</td>
<td></td>
</tr>
<tr>
<td>Fax</td>
<td>440-975-3534</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Dimattia.whfd@gmail.com">Dimattia.whfd@gmail.com</a></td>
</tr>
</tbody>
</table>
**Applicant Information**

EMW-2018-FO-01561  
Originally submitted on 10/23/2018 by Robert Vendl (Userid: chiefharmon)

**Contact Information:**

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

**Application number is EMW-2018-FO-01561**

* Organization Name: Willoughby Hills Fire Department  
* Type of Applicant: Fire Department/Fire District  
* Fire Department/District, Non-Affiliated EMS, and Regional applicants, select type of Jurisdiction Served: City  
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?  
35405 Chardon Road  
Willoughby Hills  
Ohio  
44094 - 9195  
Need help for ZIP+4?

* Employer Identification Number (e.g. 12-3456789)  
34-6003085  
Note: This information must match your SAM.gov profile.

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

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

* 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
  Willoughby Hills
  Ohio
  44094 - 9195
  Need help for ZIP+4?

* Physical Address 2
  35405 Chardon, Road
  Willoughby Hills
  Ohio
  44094 - 9195
  Need help for ZIP+4?

Mailing Address

* Mailing Address 1
* City
* State
* Zip

* Mailing Address 2
* City
* State
* Zip

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:

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?  
No

* What kind of organization do you represent?  
Combination

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

9

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)

0

* What type of community does your organization serve?  
Suburban

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

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

17

80 %

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

Lake County

* 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 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. Twelve and eight-inch domestic water mains run throughout the city's main roadways while 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. 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 large electrical sub-station maintained by First Energy Corporation while eleven sanitary/sewer pump stations and three large generators provide additional 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, provide an increase in daytime population and afford unique response concerns to our organization. One EAS facility houses sulfuric and hydrochloric acids. While compliant and cooperative with fire department 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?

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

* How many stations are operated by your organization? (whole numbers only)
  1

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

* Do you currently report to the National Fire Incident Reporting System (NFIRS)?
  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

* How many of your active firefighters are trained to the level of Firefighter I (or equivalent)? (whole numbers only)
  43035
  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?

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.

The WHFD training program consists of several in-house state certified fire instructors as well as affiliation agreements with multiple state and local community colleges. Being that our department only has one member that is not certified to the NFPA 1001 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 acquisition and implementation of new SCBA units compliant with current NFPA 1981 standards. This project has been deemed a high priority by our city following multiple equipment failures from our current 20 year old SCBA units. Having 100% compliance with all aspects of NFPA 1001 is certainly a priority within our organization, so it is our goal to finish our one members FF II training in the next twelve months. This will then bring our entire staff up to NFPA 1001 compliance so we can then focus our efforts on providing appropriate respiratory safety through the much need acquisition of new SCBA units 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-Met Operational Level</td>
<td>Rescue Technical Level</td>
</tr>
<tr>
<td>Basic Life Support</td>
<td>Haz-Met 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 nine career members and twenty-one 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 (AMA) agreements 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 District residing on the southern area of the city and over 60 road miles of interstate including Route 90 and Interstate 271 run through the city of Willoughby Hills. 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 pre-determined 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 “East Tech” 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, and Black) and miles of Lake Erie coastline. WHFD also 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 Response. Incidents at the nuclear power plant can include fire, radiological releases, confined space and hazardous materials incidents.

**Fire Department Characteristics (Part II)**

<table>
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<th>Year</th>
<th>2017</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fatalities</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Injuries</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total Fatalities</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total Injuries</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

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

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

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

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

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

*Does your department have any rainy day reserves, emergency funds, or capital outlay?*

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

If Yes, describe the planned purpose of this fund.

FEMA Form 080-0-2
* What percentage of your annual operating budget is derived from:
Enter numbers only, percentages must sum up to 100%  

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
<th>2015</th>
</tr>
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<tbody>
<tr>
<td>Taxes?</td>
<td>82%</td>
<td>82%</td>
<td>82%</td>
</tr>
<tr>
<td>Bond Issues?</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>EMS Billing?</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Grants?</td>
<td>3%</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Donations?</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
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<tr>
<td>Fund drives?</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Fee for Service?</td>
<td>5%</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

* 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 3.5%, almost equaling the U.S. average of 3.9% while the cost of living in the city increased to 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 fire department's total budget over the past five years has remained constant while operating costs have increased. In order to prevent further cuts in staffing (Staffing in 2001, 7.5/day, in 2005, 5.5/day and in 2018, 4.5/day), the full-time Assistant Fire Chief and Fire Safety Inspector have been eliminated while the full-time fire chief position has remained vacant since 2016. Additional reductions in operating and capital projects have been implemented in an attempt to maintain minimum staffing levels while our call volume has more than doubled over the last fifteen years. Personnel costs, which account for 87% of our expenditures, are consuming an increasing portion of our budget, department operations now only account for 12.5% of our budget. In the last six months the City of Willoughby Hills has laid off the following full time positions; executive assistant to the mayor, mayors court clerk of courts, finance assistant and building/service department clerk. Additionally, the following part-time positions were eliminated; property staff manager, community center monitor, secretary/recreation, and two clerks. If the elimination of these positions aren’t difficult enough, the city felt it was in the best interest of the safety forces to utilize a regionalized dispatching center and lay off eight full-time police and fire dispatchers. In total 17 positions have been eliminated from our small city in an attempt to maintain our already reduced staffing levels. Multiple businesses have moved out of the city over the past five years including the cities second largest income tax base (Eaton Corporation). This decrease in funding cost the city over $300,000 annually, a 7.5% loss in income tax revenue. The City of Willoughby Hills will supply the matching monies 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. We have researched and found vendors that will supply our department with the current specified SCBA requirements set forth by NFPA 1881 and always the City of Willoughby Hills participates in a competitive bid process. The figures presented in the budget section of this request reflect a conservative but realistic cost for the required equipment. 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 assistance will provide the most efficient use of funding and will greatly influence the health and safety of all firefighters within our organization.

* 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.)

<table>
<thead>
<tr>
<th>Type or Class of Vehicle</th>
<th>Number of Front Line</th>
<th>Number of Reserve</th>
<th>Number of Seated</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Apparatus Type</th>
<th>Apparatus</th>
<th>Apparatus</th>
<th>Riding Positions</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>1</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Ambulances for transport and/or emergency response:</td>
<td>1</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Tankers or Tenders (pumping capacity of less than 750 gallons per minute (gpm) and water capacity of 1,000 gallons or more):</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Aerial Apparatus: Aerial Ladder Truck, Telescoping, Articulating, Ladder Towers, Platform, Tiller Ladder Truck, Quint</td>
<td>1</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Rescue Vehicles: Rescue Squad, Rescue (Light, Medium, Heavy), Technical Rescue Vehicle, Hazardous Materials Unit</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Additional Vehicles: EMS Chase Vehicle, Air/Light Unit, Rehab Units, Bomb Unit, Technical Support (Command, Operational Support/Supply), Hose Tender, Salvage Truck, ARFF (Aircraft Rescue Firefighting), Command/Mobile Communications Vehicle</td>
<td>2</td>
<td>0</td>
<td>4</td>
</tr>
</tbody>
</table>

FEMA Form 080-0-2

Fire Department Call Volume

* Summary of 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>2017</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire - NFIRS Series 100</td>
<td>74</td>
<td>81</td>
<td>76</td>
</tr>
<tr>
<td>Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series 200</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Rescue &amp; Emergency Medical Service Incident - NFIRS Series 300</td>
<td>1611</td>
<td>1386</td>
<td>1194</td>
</tr>
<tr>
<td>Hazardous Condition (No Fire) - NFIRS Series 400</td>
<td>67</td>
<td>49</td>
<td>60</td>
</tr>
<tr>
<td>Service Call - NFIRS Series 500</td>
<td>97</td>
<td>100</td>
<td>91</td>
</tr>
<tr>
<td>Good Intent Call - NFIRS Series 600</td>
<td>135</td>
<td>151</td>
<td>151</td>
</tr>
<tr>
<td>False Alarm &amp; False Call - NFIRS Series 700</td>
<td>91</td>
<td>85</td>
<td>93</td>
</tr>
<tr>
<td>Severe Weather &amp; Natural Disaster - NFIRS Series 800</td>
<td>5</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Special Incident Type - NFIRS Series 900</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

FIRES

* 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>NFIRS Series 100 calls</th>
<th>2017</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structure</td>
<td>51</td>
<td>61</td>
<td>58</td>
</tr>
</tbody>
</table>

**Fire** (NFIRS Codes 111-120)

| Of the NFIRS Series 100 calls, how many are "Vehicle Fire" (NFIRS Codes 130-138) | 6   | 10  | 8   |
| Of the NFIRS Series 100 calls, how many are "Vegetation Fire" (NFIRS Codes 140-143) | 5   | 10  | 6   |
| 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)

| Of the NFIRS Series 300 calls, how many are "Motor Vehicle Accidents" (NFIRS Codes 322-324) | 97  | 123 | 101 |
| Of the NFIRS Series 300 calls, how many are "Extrications from Vehicles" (NFIRS Code 352) | 0   | 0   | 0   |
| Of the NFIRS Series 300 calls, how many are "Rescues" (NFIRS Codes 300, 351, 353-381) | 34  | 16  | 24  |
| How many EMS-BLS Response Calls | 0   | 0   | 0   |
| How many EMS-ALS Response Calls | 1480 | 1370 | 1067 |
| 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? | 56  | 57  | 77  |
| How many times did your organization receive Automatic Aid? | 21  | 15  | 26  |
| How many times did your organization provide Mutual Aid? | 73  | 85  | 69  |
| How many times did your organization provide Automatic Aid? | 28  | 43  | 39  |
| Of the Mutual and Automatic Aid responses, how many were structure fires? | 25  | 40  | 41  |
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 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) has become an intricate part of multiple specialized teams including the "East Tech" Technical Rescue Team, Lake County Hazardous Materials team and Western Lake County SWAT/Medic team. Additionally, through contractual agreements, the WHFD also participates in an automatic mutual aid agreement throughout the Lake and Cuyahoga areas for any working structural incident. When responding to these incidents, we are no longer able to provide uniformity in areas like buddy breathing techniques, rapid intervention team cohesion or the sharing of SCBA bottles as needed. All departments neighboring the WHFD have replaced their obsolete SCBA devices within the last five years so a true regional grant request was unavailable. If awarded the funding, the WHFD would have the means to work in union with all neighboring departments thus providing an increase in service delivery to the residents of Willoughby Hills and all neighboring communities alike.

* 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 staffing and expanding cancer rates, our career requires our personnel to remain prepared 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 we serve so the Willoughby Hills Fire Department (WHFD) is no exception. The call volume of the WHFD continues to increase at an astonishing rate; in 2011 the WHFD totaled 1,620 emergency responses with a manpower of six personnel per day. In 2017 the total run volume increased to 2,082 and is again on pace to increase to over 2,200 in 2018 with a daily manning of only 4.5/day. The increase from 2011 to 2018 totaled 36% all while operating with a continued reduction in personnel. Because of our increases in senior living communities, added physicians offices and multiple government assisted residential properties, our call volume will continue to grow in to the foreseeable future. The continued increase in department responses means the need for compliant and reliable SCBAs is at an all-time high. The daily use of our obsolete equipment, of which was manufactured in 1999 and compliant with the 1997 edition of NFPA 1981, has proven detrimental during emergency incidents from equipment failures. On multiple incidents where an SCBA is needed to operate in an IDLH environment, our current devices have become inoperable, jeopardizing the safety of the individual, the crew and the residents we serve. Additionally, the added cost to maintain our 20-year-old equipment has proven detrimental to an already depleted budget. WHFD will continue to be one of the busiest single station departments in the area responding to over 2,200 emergencies with 20% of that total consisting of multiple call responses. Following a 2018 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, only responding 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 or illness and unsafe working conditions but the residents we have sworn to protect are now forced to accept longer response times and reduced manning. 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 equipment modifications needed to create a safer environment for our members and the residents we serve.

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
DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
Activity Specific Questions for AFG Operations and Safety Applications  

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>0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Personal Protective Equipment</td>
<td>1</td>
<td>$187,000</td>
<td>$8,000</td>
</tr>
<tr>
<td>Training</td>
<td>0</td>
<td>$0</td>
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<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

Personal Protective Equipment

SCBA: SCBA Unit includes: Harness/Backpack, Face Piece and 2 cylinders


1. Select the PPE that you propose to acquire (select one):

   Please provide a detailed description of the item selected above.

2. Number of units: 22 (whole number only)

3. Cost per unit: $8500 (whole dollar amounts only; this

https://services.fema.gov/FemaFireGrant/firegrant.jsp/fire2018/application/print_app.jsp?sysApid=1070062&print=true&appNumber=EMW-2018-...
4. Please provide your amount for the appropriate question below:
   • For turnout requests, what number of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards?
   • If you are requesting new SCBA, how many of your seated riding positions currently have compliant SCBA assigned to it?
   • If you are asking for specialized PPE (e.g., Haz-Mat), how many applicable members currently have specialized PPE that meets established standards?

5. What is the purpose of this request?

What are the specific ages of the type of PPE you are requesting?

<table>
<thead>
<tr>
<th>Age (in Years)</th>
<th>Current Inventory</th>
<th>Being Replaced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
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<td>3</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If you have indicated you are requesting SCBA or Cylinders in Question 1, to which edition(s) of the NFPA 1981 standard are your SCBA or Cylinders compliant? If not requesting SCBA/Cylinders, please select "N/A" and continue on to the next question. Please account for ALL SCBA/Cylinders currently in your department's inventory - not just the SCBA/Cylinders you wish to replace. If you have damaged or inoperable SCBA/Cylinders/Face Pieces please list them in the "Obsolete/Damaged" section.

6. Are you requesting for members that currently do not have above-mentioned item? If Yes, enter the number of members that do not have this item. If No, click N/A.

7. Is your department trained in the proper use of the PPE/SCBA being requested?

8. Are you requesting funding for training for this PPE/SCBA?

9. If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources?

---

**FEMA Form 080-0-2b**

Firefighting PPE - Additional Funding (optional unless you're applying for training funds)
Budget Object Class Definitions

Additional Funding

- a. Personnel $0
- b. Fringe Benefits $0
- c. Travel $0
- d. Equipment $8000
- e. Supplies $0
- f. Contractual $0
- g. Construction $0
- h. Other $0
- i. Indirect Charges $0
- j. State Taxes $0

Explanation

In order for the Willoughby Hills Fire Department (WHFD) to remain compliant with current NFPA standards, additional funding is being requested to replace our current 19-year-old Rapid Intervention Crew (RIC) equipment. Currently our deteriorating RIC bags consist of a 45 minute SCBA bottle married to a frayed 1997 standard universal quick connect adapter. Also included in the kits are 19-year-old standard SCBA face pieces without current heads up display (HUD) capabilities, light duty halogen flashlights and natural fiber rope utilized for search and rescue techniques. While this equipment remains adequate for RIC operation, the goal of the WHFD is to provide exceptional service delivery in all aspects of the fire rescue profession. According to NFPA 1407; Standard for Training Fire Service Rapid Intervention Crews 2015 Edition, tools and equipment to be used by the RIC shall be determined by the Authority Having Jurisdiction (AHJ) based on need and resources available. Equipment to be included but not limited to; ropes, including search, rescue, and life safety, universal rescue air supply, a low profile SCBA face piece and an approved LED hand light. Following additional research completed based on the needs of the WHFD and surrounding communities with updated SCBA and RIC equipment, additional features needed for compatibility and exceptional service delivery include; a high visibility carrying bag that provides ease of access and additional reinforcement on the bottom for dragging during RIT operations, an upgraded 60 minute SCBA rescue bottle in the event of a prolonged rescue operation, external LED pressure gauges, high and low pressure air lines and a low profile emergency face piece and regulator.

While the need to replace our current out of date SCBA units remains the top priority of our organization following an internal study, obtaining new RIC packs is equally important when providing lifesaving rescue operations involving a fellow firefighter. When operating in a high risk low frequency event such as a RIC deployment, it is imperative to have up date, functioning equipment that will provide the best opportunity for a successful rescue. The WHFD aims to provide the best possible service to its resident and all neighboring communities throughout the Lake and Cuyahoga county areas and with the assistance requested through the AFG program we can help provide the highest level of emergency service while supplying up-to-date equipment in the event of having to rescue one of our own.

FEMA Form 080-0-2b

Firefighting PPE - 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 funding from the Assistance to Firefighters Grant Program under Operations and Safety, specifically for the purchase of new SCBA units. After completion of an internal needs & risk
assessment of its PPE and equipment at the beginning of 2015 it was determined that the immediate goal was to replace the departments 20 year old outdated SCBA units.

The AFG Program Guidance identifies that replacing and/or updating obsolete PPE that does not meet the current standards as the highest priority. Our entire inventory of SCBAs were purchased in 1999 and are only compliant with the 21-year-old, 1997 edition of NFPA 1981. Since purchasing these SCBA units, there have been four updates to the NFPA 1981 standard. These air packs are almost twenty years old and have far exceeded the recommendations set forth by the AFG program.

Due to the age of our current SCBA units, mechanical failures are becoming a monthly occurrence creating addition cost to an already deteriorating budget. The new SCBA's would provide 45 minute/4500 psi capacity and meet the current NFPA 1981, 2019 edition as well as OSHA standards. This equipment would have integrated durability of heads up display (HUD) requirements; they would meet the new voice intelligibility requirements and would meet the new End-of-Service Time Indicator (EOSTI) standards. The universal RIC connections would allow for universal operations with other neighboring departments. All bottles will be carbon fiber wrapped reducing weight to the user and yielding a 15-year shelf life adding durability and longevity to the life of the product. The purchase of this equipment would provide NFPA 1981 and 1982, 2019 edition compliant SCBA's to all riding positions within the organization. The requested assistance would allow individual face pieces to all department members thus promoting a proper fit for each firefighter, reduced illness from the elimination of face piece sharing and an overall increase in department safety as a result of utilizing compliant equipment.

Of the 9,934 residents residing in our first due response area, a majority of this population resides in our multi-story high rise apartment complexes. According to IFSTA/NFPA studies, high rise firefighting requires 3-7 times the manpower needed compared to a traditional residential house fire. Reduced labor, fatigue, and exertion are just some of the ways the WHFD would benefit from having lighter and safer SCBA units while meeting the standards of current NFPA requirements.

* 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 AFG is to enhance, through financial assistance, the safety of the public and firefighters while providing a continuum of support for emergency responders. Implied in this statement is the requirement that all fire departments are able to respond to an emergency with the tools and equipment to do the job in the most professional manner. Due to the age of our current non-compliant SCBA's, mechanical failures and equipment deterioration hinders our members from completing these tasks in the required safe and efficient manner. By replacing our obsolete SCBA units (NFPA 1997 edition), we would be able to upgrade to the current 2019 and 2018 editions of NFPA 1981, 1982 respectively.

Without this grant the risk to our organization and our residents will continue to increase because we will have to operate with our current obsolete PPE, or be forced to reduce staffing once again to pay for the needed equipment. The benefits to this project are two-fold; it will increase our ability to protect our residents and the communities we surround while assuring the safest and most efficient equipment to our firefighters. It would also help support an already depleted operating budget through reduced replacement expenditures and maintenance costs to our current 20 year old SCBA units.

Four revisions have been made to NFPA 1981 since our current SCBA's were manufactured. These changes were designed to increase firefighting performance while providing safer and more reliable equipment. Current SCBA features include voice communication capabilities, heads-up face piece displays, emergency breathing support connections, and Chemical, Biological, Radiological, and Nuclear (CBRN) designation.

Cost Efficiencies:

Following an internal study, it was determined the cost the city of Willoughby Hills would exceed $40,000 to refurbish our current SCBA units. While the existing parts would be replaced, the units would still remain non-compliant with current NFPA standards. Because our current units are compliant with a standard created 21 years ago, it is obvious refurbishing this equipment would not be a fiscally responsible decision.

Given that it is not economically prudent to refurbish our current SCBA's, we are forced to spend a considerable amount of money annually to maintain our current units. This task is growing increasingly difficult as more of the SCBA's are requiring repairs. After exploring many avenues, it was determined the most optimal course of action would be to replace our current inventory.

Project Cost versus Benefits:

We intend to purchase 22 new SCBA's to replace our current obsolete units. After substantial research our organization projects no concerns in maintaining the requested units for the foreseeable future. By electing to request funding for only 22 SCBA's versus 32 (current reserve SCBA's), we reduce maintenance costs from bench testing, hydro-testing and repairs by over 30%.

Based on the applicant share calculations set forth through the AFG program and the average life expectancy of an SCBA being 15 years (based on hydrostatic testing requirements), the cost efficiency breaks down to approximately 6 cents per year for each resident of the city Willoughby Hills.

Obtaining compliant SCBA’s and providing training programs for emergency response and mitigation, has a direct correlation on every firefighter’s health and safety. Our SCBA units are vital tools that are required to provide many different aspects of emergency services to our community. Additionally, qualitative data can be shown as we provide an increase in service delivery to other organizations and surrounding city’s through our current Mutual Aid agreements. It is imperative that all firefighters are equipped with current NFPA compliant SCBA’s in order to perform vital firefighter functions in a safe and efficient manner.

Notable deficiencies of our current obsolete SCBA units include; decreased durability, deteriorating components, and a lack of HUD to each face piece. Current SCBA face pieces do not comply with the new voice intelligibility requirements while the SCBA units themselves do not meet the new End-of-Service Time Indicator (EOSTI) requirements. Current SCBA’s are also now equipped with a universal RIC connections and are CBRNE rated, all of which are absent from our current devices.

229,266 (2017) residents call Lake County, Ohio home while the county employs 117,498 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 replacement of our SCBA’s will offer our department and other surrounding agencies the ability to respond with compliant equipment and universal integration while remaining at a low cost per firefighter.

Replacement of SCBA’s to NFPA 1981 and 1982 (2019 and 2018 standards), will translate into heightened confidence and abilities on scene, while immeasurably improving the safety and efficiency of our firefighters. Firefighter line of duty deaths and injuries may be avoided because of the additional safety requirements, durability, and reductions in weight, to the new SCBA models. Over the last four years, two of our previous ten career members were diagnosed with cancer that ultimately took their lives a short time after retirement. Through proper training and education, our department has vowed to assist each other in items including the proper donning of SCBA/PPE during emergency incidents, properly decontaminating all equipment including SCBA’s after an emergency incident, and remaining abreast to all new rules and regulations set forth by the NFPA, FEMA, and equipment manufactures. If approved, the completion of this project will not have any negative effect on the Willoughby Hills Fire Department’s current or future budget. Current bench and hydrostatic testing are completed based on the national standard and will continue to be done for the fifteen-year lifespan of the new SCBA units. Weekly inspections and preventative maintenance will provide optimum life expectancies and reduced deterioration for all SCBA units. All WHFD members will be trained on the newly acquired SCBA’s and fit tested to assure proper mask sizing. In service training will be provided for the equipment by the individual vendor with assistance from our certified fire instructors so no additional cost will be needed for training. We feel replacing our obsolete SCBA’s remains a top priority to the department for the many reasons listed above. Providing NFPA 1981/1982 compliant SCBA’s allows our organization the ability to work in unison with all surrounding communities, a feat we have been unable to attain for many years. We can also enhance the service delivery to our residents, employers, and visitors to the county and region.

FEMA Form 080-0-2b

Budget

**Budget Object Class**

<table>
<thead>
<tr>
<th>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>$ 195,000</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>
</tbody>
</table>
j. State Taxes

Federal and Applicant Share

Federal Share  
$ 185,715

Applicant Share  
$ 9,285

Applicant Share of Award (%)  
5

* Non-Federal Resources *(The combined Non-Federal Resources must equal the Applicant Share of $ 9,285)*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Applicant</td>
<td>$ 9,285</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**  
$ 195,000

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 280 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.


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 1986 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 10/16/2018
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 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 10/16/2018
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>
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<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>
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<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 23-Oct-2018.