Edward J. Byrn Application To Section I. Applicant Information	Commonwealth of Massacl utive Office of Public Safety Office of Grants & Rese e Memorial Justice Assistand <u>Attachment A</u> emplate for Local Law Enfo Technology Grant	and Security arch ce Grant Program (JAG) prcement Equipment &		
Name of Local Police Department:				
JAG Funding Requested: \$				
Name of Police Chief:	(First and Last Name)			
Police Chief Phone:				
Police Department Mailing Addres	s:			
Street:	City:	_ Zip Code:		
County:	Phone:	Fax:		
Grant Contact Name: Title: (Note: The person designated as the <i>Grant Contact</i> shall serve as the project's point person and be responsible for receiving and responding to EOPSS' project related requests) Grant Contact Mailing Address:				
Same as Above				
Street:	City:	_ Zip Code:		
County:	Phone:	Fax:		
E-mail:	-			
Fiscal Point of Contact for Grant: 1	Name:	Title:		
Fiscal Contact Mailing Address: Same as Above				
Street:	City:	_ Zip Code:		
County:	Phone:	Fax:		
E-mail:				
DUNS Number	Currently registere	d in SAM 🗌 Yes 🗌 No		
	1			

Project Summary: Four sentences (250 characters *maximum*), summarizing the type of equipment/software to be purchased.

Non-Supplant

I hereby certify that, in accordance with DOJ Financial Guidelines, the _

(NAME OF APPLICANT)

has been informed by the EOPSS that supplanting of JAG funds is strictly prohibited and if awarded will not use grant funds to replace state and local funds that would, in the absence of such assistance, otherwise be made available for this law enforcement purpose.

Statewide Interoperability Interoperable Communications Investment Proposal (ICIP)

Equipment proposals that request funds for interoperable communications components such as the purchase of radios, mobile data terminals or communication system components are subject to an additional review and approval process per Executive Order 493 (SIEC) or a representative thereof. Law enforcement departments requesting to purchase this type of equipment must also download and complete an additional Interoperable Communications Investment Proposal (ICIP) form to submit with this application. The ICIP form is located under **Attachment D**.

Are you requesting funds f	or intero	perable communicatio	ons and believe you	ir application i	requires SIEC
review and approval?	Yes	No			

	If Yes, did	you comp	olete the ICIP	required form	(Attachment D)? Yes	No
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THIS SIGNATURE PAGE MUST BE SIGNED AND MAILED WITH YOUR HARD COPY APPLICATION

Signature Page

The following must be completed and signed by both Authorizing Officials for the Municipality and Law Enforcement Department submitting this application. Remember to also complete Attachment C (Signatory Authorized Listing Form).

Municipal Authorizing Official

As the Chief Executive Officer of this City or Town, I am authorizing the Police Department to solicit funds for a JAG Law Enforcement Equipment grant from the Executive Office of Public Safety and Security. I have reviewed and approve the content contained in this application being submitted for consideration of a grant award.

Name of City/Town

Authorizing Official Name-Printed______Date_____

Signature

(This must be signed in *blue ink* and mailed with your application)

The following must be completed and signed by the Police Chief/Commissioner on behalf of the Police Department submitting this application. Remember to also complete **Attachment C** (Signatory Authorized Listing Form).

Law Enforcement Authorizing Official

As the Chief/Commissioner of Police for this City or Town, I am requesting funds for a JAG Law Enforcement Equipment grant award from the Executive Office of Public Safety and Security. I have reviewed and approve the content contained in this application being submitted for consideration of funding.

Name of Police Department

Commissioner/Chief of Police Name-Printed______Date_____

Signature

(This must be signed in blue ink and mailed with your application)

Section II. Narrative Template

1. Needs Assessment (2 page limit)

Use the space provided to 1) describe your law enforcement department and/or school district, 2) describe in detail the current law enforcement and/or school district unmet criminal justice or security type needs, 3) describe any negative effect, potential consequences or impact against the department and/or community as a result of not having the items being requested, 4) describe the sources or methods used for assessing the problem, 5) explain why such criminal justice needs stated have not been previously met to justify federal grant funds are needed

Section II. Narrative Template, Continued

2. Project Description (2 page limit)

Describe the equipment and technology to be purchased or upgraded. Include the purpose for purchasing said equipment/goods, where such goods will be utilized and stored, whether installation will be needed, required upkeep or maintenance(if any), training or technical assistance needs, applicable procurement rules (please cite rule if required to secure a vendor) or name of vendor or contractor (if already identified, include reason for selection), expected benefits/outcomes for officers and/or community and any other info that may be helpful to justify the funding request. Describe the expected benefit (outcome) for the law enforcement officer, department and/or school district as a result of receiving a grant award.

Section II. Narrative Template, Continued

3. Implementation Plan, Timeline and Person Responsible *Complete this table as outlined. Be sure to identify the officers (include name and rank) responsible for receiving proposed goods. Include an approximate timeframe as to when the department expects to purchase and receive all goods.*

Equipment/Technology Purchases	Expected Delivery and/or Insallation Date	Expected Order Date	Staff Responsible

Section III. Budget Narrative Summary



Cost Category	Federal Share
Consultants	\$
Contracts	\$
Equipment/Technology	\$
Other	\$
Total	\$

Local Police Department:

Applicants may submit up to a *four* **month operating budget.** Please list all project related costs according to the specified budget category.

Consultants- For each consultant to be hired, enter the name (if known), service to be provided, hourly or daily fee (8-hour day/ \$81.25 per hour), and estimated time on the project. Consultant fees in excess of \$650/day require additional justification and prior approval from EOPSS.

Position (by rank if necessary)	Computation	Cost
	Total Consultant Costs	

Narrative

Be sure to include activities to be completed. Indicate whether applicant's formal written Procurement Policy or the Federal Acquisition Regulations are followed to procure identified consultant.

CONTRACTS: List each contract, along with the rate and quantity.

Name of Contractor	Computation	Cost
Total Consultant Costs		

Narrative

Provide a description of the product or services to be provided by the contractor and an estimate of the cost. Be sure to include purpose for contract as well as activities (if applicable) to be completed. Indicate whether applicant's formal written Procurement Policy or the Federal Acquisition Regulations are followed for this procurement. If not provided above, please use this space to provide an itemized cost breakdown of the amount requested for each contractor listed. **Equipment/Technology** – Tangible, non-expendable property having a useful life of more than one year; cost bases on classification of equipment.

Item	Computation	Cost
	Total Equipment Costs	

Narrative

If the equipment/technology items to be purchased are not already listed in a previous budget category, please use this page to list such costs and describe the items below. Cite applicable procurement rules/laws required in order to purchase the proposed equipment/goods.

Other – Any other costs not listed in previous budget categories. Additional costs (such as supplies) must directly correlate to the equipment and technology items listed in the previous budget categories.

Item	Computation	Cost
	Total Other Requested Costs	
Narrative		
For example, describe any costs listed above equipment or technology to operate. Costs d will not be approved for funding.	and explain why they are needed or required in order irectly not correlated to the equipment or technology	for a particular piece of purchases being requested

Applicants must also complete a Budget Excel Worksheet (refer to Attachment B) and submit with the Application Template.

Section IV. Application Submission Process and Checklist

Hard Copy Application Elements and Required Attachments:

- □ Please use Binder or Paper Clips, *no staples allowed*;
- Completed Application Template (Attachment A) signed and dated by *both* the Municipal Chief Executive Officer (Mayor, City Manager, or Town Administrator) and Police Chief/Commissioner in Blue Ink.
- □ Budget Excel Worksheet (Attachment B) (<u>both</u> the Roll Up and Detail sheets must be included in your application packet).
- Contractor Authorized Signatory Listing Form (Attachment C)
- □ If applicable, an Interoperable Communications Investment Proposal (ICIP) form (Attachment D) must be included with your application packet.
- □ One signed original and three copies of all the application documents.

Electronic Application Elements and Required Attachments:

- **Attachment A**: Completed Application Template
- **Attachment B**: Budget Excel Worksheet Form (Roll Up and Detail sheets)
- □ Please email **Attachment A** as a PDF-not a scanned document, **Attachment B** as an Excel document to <u>eopssbjag@mass.gov</u> no later than 4:00pm on Wednesday, October 17th, 2018.

If you have any questions regarding this application, please email: <u>eopssbjag@mass.gov</u> or call Kevin Stanton at 617-725-3363.

Proposals must be mailed or hand-delivered* to:

The Executive Office of Public Safety and Security Office of Grants and Research Ten Park Plaza, Suite 3720 Boston, MA 02116-3933 Attention: Kevin Stanton

The signed and completed Application Template and required documents must be received by OGR on **Wedneday**, **October 17th**, **2018 by 4:00pm**. If you choose to hand deliver your proposal, please note that a valid form of identification is required to enter the Ten Park Plaza Office Building on the 2nd floor.