

Commonwealth of Massachusetts
Executive Office of Public Safety and Security
Office of Grants & Research
Edward J. Byrne Memorial Justice Assistance Grant Program (JAG)

Attachment A
**Application Template for Specialized Equipment Funding
Opportunity**

Section I. Applicant Information

Name of Department: _____

JAG Funding Requested: \$ _____

Name of Authorizing Official: _____
(First and Last Name)

Department Phone: _____ **Email Address:** _____

Department Mailing Address:

Street: _____ **City:** _____ **Zip Code:** _____

County: _____ **Phone:** _____ **Fax:** _____

Grant Contact Name: _____ **Title:** _____

(Note: The person designated as the *Grant Contact* 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 Name: _____ **Title:** _____

Fiscal Contact Mailing Address:

Same as Above ☐

Street: _____ **City:** _____ **Zip Code:** _____

County: _____ **Phone:** _____ **Fax:** _____

E-mail: _____

DUNS Number _____ **Currently registered in SAM** ☐ Yes ☐ No

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

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.

THIS SIGNATURE PAGE MUST BE SIGNED AND MAILED WITH YOUR HARD COPY APPLICATION

Signature Page

The following must be completed and signed by the MPTC Executive Director or Sheriff submitting this application.

Authorizing Official

As the Sheriff or MPTC Executive Director, I am requesting funds for a JAG Specialized 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 Department _____

Authorizing Official 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) Provide a description of the department to benefit from this application, 2) describe in detail the current unmet needs related to body-worn cameras programming and/or tasers, 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 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 how proposed equipment/technology/services purchase(s) directly correlate to the needs assesment provided. 1) Cite any state procurement rules/regulations required in order to purchase the items or services described, 2) describe the expected benefit (outcome) for the correctional officer, department and/or community as a result of receiving a grant award, 3) include any other information that is important and may be relevant for reviewers when evaluating the funding request

3. Implementation Plan, Timeline and Person Responsible

Complete this table as outlined. Be sure to identify the officers/individuals (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.

Major Tasks/Activities to be Conducted (including a bidding process for service contracts and/or equipment purchases)	Anticipated Timeline (start/end date)	Anticipated Outcome	Staff Responsible

Section III: Budget Narrative Summary

The budget narrative shall provide a justification on the basis of each proposed cost category in the budget and how the cost supports the goals and objectives of the proposed project(s). Please describe each cost category, the amount requested for the category, and the purpose of the cost/purchase. All costs must be justified in this section.