

Commonwealth of Massachusetts
Executive Office of Public Safety and Security
Office of Grants & Research
Project Safe Neighborhoods

Attachment A

Application Template for Law Enforcement Narcotics Analyzers Grant

Section I. Applicant Template Information

Name of Law Enforcement Agency: _____

PSN Funding Requested: \$ _____

Name of Authorized

Signatory: _____

(First and Last Name)

Authorized Signatory

Phone: _____

Email Address: _____

Law Enforcement Agency 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

Program Summary: Four sentences (250 characters *maximum*), summarizing the goods (equipment and/or technology) to be purchased that address officer safety and/or investigate needs.

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 PSN 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 Chief Executive Officer/Police Chief/Commissioner on behalf of the Law Enforcement Agency submitting this application. Remember to also complete **Attachment C** (Signatory Authorized Listing Form).*

Law Enforcement Authorizing Official

As the Police Chief/Commissioner of this City or Town, I am authorizing the Law Enforcement Agency to solicit funds for a PSN Law Enforcement Narcotics Analyzers 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)*

Section II. Narrative Template

1. Needs Assessment (1 page limit)

Use the space provided to describe 1) the community and law enforcement agency/department to benefit from this application, 2) the current law enforcement unmet equipment and/or technology type needs. Include relevant statistical and/or anecdotal evidence whenever possible to justify the items being requested, 3) the sources or methods used for assessing the problem, 4) why the stated criminal justice needs have not been previously met and how federal funding will meet that need, 5) any negative effect, potential consequences or impact against the agency/department and/or community as a result of not having the items being requested.

Section II. Narrative Template, Continued

2. Project Description (1 page limit)

*Use the space provided to 1) clearly describe the equipment and technology to be purchased or upgraded. Include the purpose, where the goods will be used/stored, who will utilize or be responsible for the upkeep, monitoring and maintaining such goods, etc. Do not assume that the reviewer knows the equipment or technology item being requested or understands the real benefit to law enforcement, 2) discuss how such purchase(s) directly correlate to the needs assessment provided, 3) cite any state or local procurement rules/regulations required in order to purchase the items as described. If known, include information as to the vendor that will be utilized for stated project and/or describe the process utilized to select vendor/contractor, 4) describe the expected benefit (outcome) for the law enforcement department and target city as a result of receiving a grant award, 5) include any other information that is important and may be relevant for reviewers when evaluating request for funding. **If applicable**, please identify how this project supports other federal efforts and/or involves collaboration with state and/or local partners.*

3. Implementation Plan, Timeline and Person Responsible

Complete this table as outlined. Please discuss your management and implementation plan for this award. This should include how you will ensure the effective implementation and oversight of the project, methods of procurement (if not previously mentioned) of any equipment and/or technology, a timeline with key activities and milestones, and identification of key partnerships or stakeholders who will play a role in the implementation of this award

Equipment/ Technology Purchases and Activities	Procurement Milestones/ Dates	Delivery/Completion Date	Staff Responsible

Section III: Budget Narrative Summary

*Applicants may submit an operating budget for up to 6 months. 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 as reflected in the **Budget Excel Worksheet (Attachment B)**. Please describe each cost category, the amount requested for the category, and the detail and purpose of the cost/purchase. All costs must be justified in this section.*