# Office of Grants and Research



**AGF Attachment A - Application
for
FFY 2021 State Traffic Safety Information System Improvements Grant, Section 405-c funding**

### See associated Availability of Grant Funds (AGF) for other application requirements, due dates, etc. Complete each field using 11-point type. Final application must not exceed 10 pages. If requesting funding for more than one project, use separate application documents.

**Cover Sheet**

|  |  |
| --- | --- |
| **Applicant Organization Information** | **Authorizing Official** |
| Organization Name: | Name: |
| Project Title: | Title: |
| Address: | Address: |
| City: | State: | City: | State: |
| Zip: | +4: | Zip: | +4: |
| Telephone: | Telephone: |
| Website: | Fax: |
| DUNS Number: | Email: |
| **Fiscal Contact Information** | **Programmatic Contact Information** |
| Name: | Name: |
| Title: | Title: |
| Address: | Address: |
| City: | State: | City: | State: |
| Zip: | +4: | Zip: | +4: |
| Telephone: | Telephone: |
| Email: | Email: |
| **Funding Request** | **Federally Approved Indirect Cost Rate** |
| Total Funding Requested: $ | Does applicant have a federally approved rate? | * Yes ☐ No
 |
| If yes, what is the rate? ***Attach copy.*** |  |
| If no, will applicant be requesting the de minimis rate? | * Yes ☐ No
 |

**Project Title:**

**Project Overview**

a. Project must improve at least one of the following core traffic records systems in Massachusetts: (check all that apply).
\_\_ Crash \_\_ Roadway \_\_ Vehicle \_\_ Driver
\_\_ Injury Surveillance/EMS \_\_ Citation/Adjudication

b. Project must improve at least one of the following performance attributes of one of the above systems: (check all that apply).

\_\_ Accessibility \_\_ Accuracy \_\_ Completeness \_\_ Integration \_\_ Timeliness \_\_ Uniformity

c. Project must address at least one currently unmet recommendation from the Commonwealth’s *2019 Traffic Records Assessment* noted in the AGF – see Section II of AGF. Please list below the recommendation(s).

**Project Description/Needs Assessment (**no more than three pages)

a. Summarize the main purpose and primary benefit(s) of the project in no more than 250 words.

b. Explain the need for the project, in particular how it will address at least one currently unmet recommendation from the Commonwealth’s *2019 Traffic Records Assessment*. Reference any related assessment question(s).

c. Describe key project deliverable(s) and anticipated system/attribute improvement(s).

d. Note if project impacts the core traffic records system or business process of another local, state, and/or federal organization(s) or the MACCS project. If so, please document how and what collaboration to date has occurred. Please include the name of the other organization(s) and point of contact information. Applications for projects dependent upon public sector partner(s) must be supported with a hand-signed letter(s) of support on partner letterhead. Partner CEOs or CIOs must sign such letters.

e. Explain how data in system(s) to be improved will be better shared with other traffic records partners and/or public after the project.

f. If proposing an equipment/software purchase with grant funding, how will it address the project need and why is it necessary for project activity? What is the make/model, who will own it, when will it be purchased, how it will be maintained, and what are the major cost elements involved? Note if the equipment will be used for any other purpose. If so, please indicate the proportional amount of the total cost that could be assigned to this other purpose.

g. If a consultant/contractor will be used, attach background information or provide web address.

h. Confirm project will comply with latest version of *Electronic and Information Technology Accessibility Standards under Section 508 of the Rehabilitation Act of 1973*, at <https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh>, and other related federal requirements as well as (2) *Web Accessibility Standards*, issued by Massachusetts Executive Office of Technology Services and Security and other related state requirements at [www.mass.gov/eotss](http://www.mass.gov/eotss). If not applicable, please explain why.

**Project Timeline**

Provide in the chart below a detailed project timeline with anticipated start date, major milestones, key deliverable(s) due dates, and expected end date. Please highlight below any issue(s) that might cause project delay (i.e., COVID-19 response, extended legal review, acquiring new technology still under development, etc.).

|  |  |
| --- | --- |
| **ACTIVITY** | **DATE** |
| ***For example:*** Start Date | 7/1/21 |
|  |  |
|  |  |

**Project Benchmark and Performance Measure**

a. Describe how the project has **a minimum** of one measurable benchmark and performance measure that relates to a performance attribute of one of the six core traffic records systems.

NOTE: Projects with **at least one** benchmark and performance measure meeting the “quantitative improvement” standard detailed in Section III of the AGF may receive from each reviewer up to five (5) additional points during a Four-Box Analysis and Scoring Tool process.

b. Please describe any other project evaluation effort(s).

**Budget Overview**

Use Attachment B – Budget of the AGF to provide summary and detail project budget information for the Section 405(c) funds requested. Highlight below any non-405(c) funding involved with the project.

If federally approved indirect cost rates and/or fringe benefit cost rates are involved, provide with AGF response appropriate supporting documentation for these rates.

Use section below to provide any additional supporting details about the project budget, such as training costs, overnight travel expenses, etc.

If awarded funding through this AGF and its application, the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of applicant organization) acknowledges and agrees to comply with all requirements of this grant program detailed or referenced in the related AGF, its attachments, and associated forms. The applicant further agrees to complete the associated forms that OGR has released with the AGF and provide these and any necessary safety belt policy to OGR before a grant contract is finalized. The applicant understands that any grant contract will be based on the continuing availability of Section 405(c) funds received from NHTSA to OGR. Should Section 405(c) funding no longer be available to OGR, the applicant understands that no other state or federal funds would be made available as an alternative source of funding under this grant contract by OGR. Applicant is aware supplanting of state or local funds with federal grant funds from this program is prohibited.

Authorized Signatory Name and Title (please print)

Authorized Signature **(hand-written in blue ink)**

Date **(hand-written in blue ink)**

E-mail Address Phone Number

In accordance with *Executive Order 510, Enhancing the Efficiency and Effectiveness of the Executive Department’s Information Technology Systems*, projects submitted by state agencies within the Executive Branch must have signed approval of their respective Secretariat Chief Information Officer below. For organizations not within the Executive Branch, the senior information officer must provide signed approval below.

Authorized Senior Information Officer Name and Title (please print)

Authorized Signature **(hand-written in blue ink)**

Date **(hand-written in blue ink)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

E-Mail Address Phone Number