# Office of Grants and Research



**AGF Attachment A - Application
for
FFY 2022 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 an 11-point type. The final application must not exceed ten pages. If requesting funding for more than one project, use separate application documents.

**Cover Sheet**

|  |  |
| --- | --- |
| **Applicant Organization** |  **Agency Head Contact** |
| Organization Name: | Name: |
| Project Title: | Title: |
| Address: | Address: |
| City: | State: | City: | State: |
| Zip: | +4: | Zip: | +4: |
| Telephone: | Telephone: |
| Website: | Fax: |
| Unique Entity Identifier (formerly DUNS) Number: | Email: |
|  **Fiscal Contact** |  **Programmatic Contact** |
| 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 (manually round-up figure from Attachment B - Summary): $ | Does the applicant have a federally approved rate? | * Yes ☐ No
 |
| If yes, what is the rate? ***Attach copy.*** |  |
| If no, will the 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**

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

b. Explain the need met by the project, particularly 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 the 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, document how and what collaboration to date has occurred. Include the name of the other organization(s) and point of contact information. Applications for projects dependent upon state or regional-level 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 the system(s) to be improved will be better shared with other traffic records partners and/or the public after the project.

f. If proposing to fund an equipment/software purchase, how will it address project need, and why is it necessary for project implementation? What is the make/model, who will own it, when will it be purchased, how will it be maintained, and the major cost elements involved (include any delivery and installation costs)? If applicable, provide information regarding the current inventory of the requested equipment/software to justify the need further. Note if the equipment will be used for any other purpose. If so, please indicate the proportional amount of the total cost assigned to this additional purpose.

g. If proposing to partially or fully fund a position, how will it be sustained after the grant funding has ended? Note if the position will have work responsibilities beyond the project.

h. If proposing to fund a consultant/contractor, what is the expected procurement plan to secure them?

i. Confirm the project will comply with the 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 tasks, key deliverables dates, and expected end date. Please highlight any issue(s) below that might cause project delay (i.e., extended legal review, acquiring new technology still under development, etc.).

|  |  |
| --- | --- |
| **ACTIVITY** | **DATE(S)** |
| ***For example:*** Start Date | 3/1/2022 |
|  |  |
|  |  |

**Project Benchmark and Performance Measure**

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

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

**Budget**

Use Attachment B - Budget Worksheets to show summary and detail project budget information for the Section 405(c) funds requested.

The total 405(c) funding request on the cover sheet of Attachment A must be a whole number – round-up as necessary the total request figure from Attachment B.

If a federally approved indirect cost rate and/or fringe benefits cost rates are part of the budget, provide with the AGF response appropriate supporting documentation for these rates.

a. Explain any project expense(s) not addressed in earlier application responses (i.e., training, overnight travel, etc.).

b. Explain any non-405(c) funding involved with the project.

c. For non-EOPSS state agency applicants: detail the source and amount of required match.

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. The applicant is aware that supplanting state or local funds with federal grant funds from this program is prohibited.

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Department Official Name and Title **(please print)**

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Signature and date **(hand-signed in blue ink)**

In accordance with *Executive Order 532, 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.

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Senior Information Officer Name and Title **(please print)**

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Signature and Date **(hand-signed in blue ink)**