

# FFY2021 Homeland Security Grant Program State-Share Application

### SECTION A - Agency Information & Point of Contacts

Agency Name		
Project Manager	Fiscal Manager	
Email Address	Email Address	
Phone #	Phone #	
Mailing Address	Mailing Address	
Fax #	Fax #	
DUNS#	* <i>SAM</i> Expiration Date	
Project Title		
Project Costs	Priority (1,2,3)	
Start Date	End Date	

<sup>\*</sup>You must include a screen shot / printed form from SAM that includes agency name, address, and expiration date. Applications submitted without this will be considered incomplete and may not be considered for award.

#### Submission Instructions:

- One (1) Original application signed by the Authorizing Official (Agency Head) and three (3) hard copies mailed to the State Share Coordinator (DO NOT HAND-DELIVER) post-marked by April 9, 2021
- All electronic application submissions are due no later than 5:00 p.m. on Friday, April 9, 2021.
- Electronic submissions must include either MS Word version or a signed PDF document.
- Attach SAM Registration
- OGR Risk Assessment Form
- ICIP Form only if applying for communication project
- Email application (Word or PDF) to <u>carrie.t.clifton@mass.gov</u>

#### **SECTION B - Project Description**

Please provide a clear and comprehensive project description that includes responses to each of the following 8 areas. Please number your responses. (*maximum 3 pages*):

- 1. Describe the proposed project
- 2. Describe the need for the proposed project and the gap(s) that it will fill
- 3. Describe the expected outcomes of the project and how they will be measured
- 4. Describe this project's coordination with related initiatives within your organization (if applicable)
- 5. How will this project be sustained by the organization in the future?
- 6. Describe how this project will be managed (i.e., key roles and responsibilities, and subject matter expertise required by this project, including at least the project manager and the contracts management structure)
- 7. If applicable, describe the usage plan for equipment
- 8. If applicable, identify the owners of the proposed assets to be procured

<sup>\*</sup>Please note: All projects must take a statewide approach in addressing identified gaps and needs. Projects that primarily address day-to-day operational gaps or issues of individual jurisdictions/agencies will not be considered for funding.

## SECTION B - Project Description Continued

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## SECTION C - Project Continuation/Extension

If this is the continuation of a project previously funded by HSGP funds, please provide the following information (maximum ½ page):

- 1. The total amount of the award, as well as the federal fiscal year and funding stream dedicated to this previously funded project
- 2. A brief summary of past progress

## SECTION D - FFY2021 HSGP State and National Priorities

Describe how the proposed project supports the FFY2021 HSGP State and National Priorities (maximum 1 page).

## **SECTION E - Mission Areas and Core Capabilities**

Identify which Mission Areas and Core Capabilities are addressed through the project. Complete information about Mission Areas and Core Capabilities can be found in the National Preparedness Goal, Second Edition – September 2015 (https://www.fema.gov/media-library/assets/documents/25959).

## SECTION E - State THIRA/SPR

Describe how the proposed project addresses capabilities and gaps identified in the latest State THIRA/SPR (maximum  $\frac{1}{2}$  page).

#### SECTION F - Milestones

List the milestones for this project. Milestones must directly relate to project objectives listed above and include (if applicable) procurements and exercises. Milestones must have an estimated start/end date (in MM/YYYY format) and be listed sequentially (minimum of 5, maximum of 10).

Milestones can begin no sooner than 10/1/2021. All projects must be completed by 6/30/2023.

	Milestone	Task/Activity	Start Date	Completion Date
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

#### SECTION G - Budget Narrative

For each cost category (including personnel) that has an associated funding request for this project, please provide a brief narrative describing what the budget element entails and how the budgeted amount was determined. Also, please describe other sources of funds that will be sought, or that have been secured. Please identify your responses by cost category (maximum 1 page).

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- 2. Organization
- 3. Equipment
- 4. Training
- 5. Exercises
- 6. Construction and Renovation Maintenance
- 7. Management & Administration
- 8. Consultant/Contractor
- 9. Other (please describe)

## SECTION G - Budget Narrative Continued

#### SECTION G – Cost Categories

Please complete the Budget Table below and refer to the FFY 2021 Homeland Security Grant Program (HSGP) Notice of Funding Opportunity for allowable costs.

Planning	\$
Organization	\$
Equipment	\$
Training	\$
Exercises	\$
Construction and Renovation <sup>1</sup>	\$
Maintenance <sup>2</sup>	\$
Management & Administration <sup>3</sup>	\$
Consultant/Contractor	\$
Other (please describe)	\$
Total	\$

#### SECTION G – Budget Detail

Please complete the Budget Detail below, inserting additional rows if needed. For equipment, list the Authorized Equipment List (AEL) Reference number. Not all equipment will be allowable under HSGP (SHSP / UASI) and some will have grant conditions associated with it.

FEMA AEL website: <a href="https://www.fema.gov/authorized-equipment-list">https://www.fema.gov/authorized-equipment-list</a>

Description of Each Proposed		For Equipment,		
Expenditure	AEL # (as applicable)	Fixed or Portable	Quantity	Total Cost
TOTAL				

<sup>&</sup>lt;sup>1</sup> Use of HSGP funds for construction and renovation is generally prohibited; however, it can be allowable only when it is a necessary component of a security system at critical infrastructure facilities.

<sup>&</sup>lt;sup>2</sup> Please refer to DHS Information Bulletin #336 for further detail.

<sup>&</sup>lt;sup>3</sup> Please review HSGP Guidance for specifics on M+A costs.

## 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 (agency head) on behalf of the Agency submitting this application.

#### **Chief Executive Officer**

As the <u>Chief Executive Officer</u> for this agency, I am requesting funds for the Homeland Security State Share 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.

Chief Executive Officer	Name-Printed	
Date		
Signature		
	(This must be signed in blue ink and mailed with your applicate	ion)