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This handbook allows you to complete the application process for applying to the BJA FY 11 Edward Byrne Memorial Justice Assistance Grant (JAG) Program Local Solicitation. At the end of the application process you will have the opportunity to view and print the SF-424 form.

*Type of Submission	<input type="radio"/> Application Construction <input checked="" type="radio"/> Application Non-Construction <input type="radio"/> Preapplication Construction <input type="radio"/> Preapplication Non-Construction
*Type of Application	<div style="display: flex; justify-content: space-between;"> <div data-bbox="873 823 1185 919"> If Revision, select appropriate option If Other, specify </div> <div data-bbox="1185 772 1537 940"> <input type="text" value="New"/> <input type="text" value="Type of Revision"/> <input type="text"/> </div> </div>
*Is application subject to review by state executive order 12372 process?	<input type="radio"/> Yes This preapplication/application was made available to the state executive order 12372 process for review on <input type="text"/> <input type="text"/> <input type="text"/> <input type="radio"/> No Program is not covered by E.O. 12372 <input checked="" type="radio"/> N/A Program has not been selected by state for review

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**BJA FY 11 Edward Byrne Memorial Justice Assistance Grant
(JAG) Program Local Solicitation 2011-H5912-AZ-EJ**



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Verify that the following information filled is correct and fill out any missing information. To save changes, click on the "Save and Continue" button.

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*Is the applicant delinquent on any federal debt	<input type="radio"/> Yes <input checked="" type="radio"/> No
*Employer Identification Number (EIN)	86 - 6000444
*Type of Applicant	County ▼
Type of Applicant (Other):	
*Organizational Unit	Gila County Sheriffs Office
*Legal Name (Legal Jurisdiction Name)	Gila County
*Vendor Address 1	1400 East Ash Street
Vendor Address 2	1100 South Street
*Vendor City	Globe
Vendor County/Parish	Gila
*Vendor State	Arizona ▼
*Vendor ZIP	85502 - 0311 Zip+4 Lookup
Please provide Point of Contact Information for matters involving this application	
*Contact Prefix:	Ms. ▼
Contact Prefix (Other):	
*Contact First Name:	Claudia
Contact Middle Initial:	
*Contact Last Name:	DalMolin
Contact Suffix:	Select a Suffix ▼
Contact Suffix (Other):	
*Contact Title:	Chief Administrator

*Contact Address Line 1:	1400 East Ash Street		
Contact Address Line 2:	1100 South Street		
*Contact City	Globe		
Contact County:	Gila		
*Contact State:	Arizona		
*Contact Zip Code:	85502	-	0311 Zip+4 Lookup
*Contact Phone Number:	928	425	3231 Ext: 8572
Contact Fax Number:	928	425	5674
*Contact E-mail Address:	cdalmoli@co.gila.az.us		Email Help

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*Descriptive Title of Applicant's Project	
Gila County Sheriff's Deputies Overtime in working with the Drug, Gang and Violent crimes task force agents relating to specific drug activities.	
*Areas Affected by Project	
Gila County - Globe, Young, Winkleman, Roosevelt, Payson Arizona	
Proposed Project	
*Start Date	July 01 2011
*End Date	July 30 2013
*Congressional Districts of	
Project	Congressional District 01, AZ Congressional District 02, AZ Congressional District 03, AZ Congressional District 04, AZ
*Estimated Funding	
Federal	\$ 13234 .00
Applicant	\$ 0 .00
State	\$ 0 .00
Local	\$ 0 .00
Other	\$ 0 .00
Program Income	\$ 0 .00
TOTAL	\$ 13234 .00

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Budget and Program Attachments

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This form allows you to upload the Budget Detail Worksheet, Program Narrative and other Program attachments. Click the Attach button to continue.

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Task Force Hours.xlsx	Delete
Click on the Attach Button to upload an attachment	Attach

[Continue](#)

Your files have been successfully attached, but the application has not been submitted to OJP. Please continue with your application.

Task Force ERE and Hours
January 2011 - June 2011

Name:	Hourly Wage	Overtime Hours	Total:	Fica	Medicare	Dep. Ret.	Worker	Health Insurance	Uniform
Sgt. #1	\$27.22	177.00	\$4,817.94	6.20%	1.45%	20.48%	3.75%	595.84 Monthly	\$0.29
Agent: #1	\$21.80	102.00	\$2,223.60	137.86	32.24	\$455.39	83.39	379,848	29,478
Agent: #2	\$21.80	43.50	\$948.30	58.79	13.75	\$194.21	35.56	161,994	12,5715
Agent: #3	\$22.34	31.50	\$703.71	43.63	10.20	\$144.12	26.39	117,306	9,1035
	\$93.16	354.00	\$8,693.55	539.00	120.71	\$1,780.44	326.01	1318,296	102,306
Total: \$13,234.31									



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Assurances and Certifications

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To the best of my knowledge and belief, all data in this application/preapplication is true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.

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Your typed name, in lieu of your signature represents your legal binding acceptance of the terms of this application and your statement of the veracity of the representations made in this application. The document has been duly authorized by the governing body of the applicant and the applicant will comply with the following:

[Budget and Program Attachments](#)

1. [Assurances](#)
2. [Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace requirements.](#)

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If you are an applicant for any Violence Against Women grants, this includes the Certification of Compliance with the Statutory Eligibility Requirements of the Violence Against Women Act.

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*Prefix:	<input type="text" value="Ms."/> <input type="button" value="v"/>
Prefix (Other):	<input type="text"/>
*First Name:	<input type="text" value="Claudia"/>
Middle Initial:	<input type="text"/>
*Last Name:	<input type="text" value="DalMolin"/>
Suffix	<input type="text" value="Suffix:"/> <input type="button" value="v"/>
Suffix (Other):	<input type="text"/>
*Title:	<input type="text" value="Chief Administrator"/>
*Address Line 1:	<input type="text" value="1400 East Ash Street"/>
Address Line 2:	<input type="text" value="1100 South Street"/>
*City:	<input type="text" value="Globe"/>
County:	<input type="text" value="Gila"/>
*State:	<input type="text" value="Arizona"/> <input type="button" value="v"/>
*Zip Code:	<input type="text" value="85502"/> - <input type="text" value="0311"/> Zip+4 Lookup
*Phone:	<input type="text" value="928"/> - <input type="text" value="425"/> - <input type="text" value="3231"/> Ext : <input type="text" value="8572"/>

h1>U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS
OFFICE OF THE CHIEF FINANCIAL OFFICER

CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Acceptance of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying," 2 CFR Part 2867, "DOJ Implementation of OMB Guidance of Nonprocurement Debarment and Suspension," and 28 CFR Part 83, "Government-wide Debarment and Suspension," and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 2 CFR Part 2867, for prospective participants in primary covered transactions, as defined at 2 CFR Section 2867.20(a):

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 83, Subpart F, for grantees, as defined at 28 CFR Sections 83.620 and 83.650:

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug-free awareness program to inform employees about

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk, 810 7th Street, N.W., Washington, D.C. 20531. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED	Applicant Identifier
1. TYPE OF SUBMISSION		3. DATE RECEIVED BY STATE	State Application Identifier
Application Non-Construction		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5. APPLICANT INFORMATION			
Legal Name		Organizational Unit	
Gila County		Gila County Sheriffs Office	
Address		Name and telephone number of the person to be contacted on matters involving this application	
1400 East Ash Street 1100 South Street Globe, Arizona 85502-0311		DalMolin, Claudia (928) 425-3231	
6. EMPLOYER IDENTIFICATION NUMBER (EIN)		7. TYPE OF APPLICANT	
86-6000444		County	
8. TYPE OF APPLICATION		9. NAME OF FEDERAL AGENCY	
New		Bureau of Justice Assistance	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT	
NUMBER: 16.738 CFDA EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE TITLE: GRANT PROGRAM		Gila County Sheriff's Deputies Overtime in working with the Drug, Gang and Violent crimes task force agents relating to specific drug activities.	
12. AREAS AFFECTED BY PROJECT			
Gila County - Globe, Young, Winkleman, Roosevelt, Payson Arizona			
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF	
Start Date: July 01, 2011 End Date: July 30, 2013		a. Applicant b. Project AZ04	
15. ESTIMATED FUNDING		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
Federal	\$13,234	Program has not been selected by state for review	
Applicant	\$0		
State	\$0		
Local	\$0		
Other	\$0		
Program Income	\$0		
TOTAL	\$13,234	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?	
		N	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.			



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Status	Requirement
Complete	Overview
Complete	Applicant Information
Complete	Project Information
Complete	Budget and Program Attachments
Complete	Certified to the Assurances and Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace
Incomplete	Submit Application

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Submit Application

Your application for the BJA FY 11 Edward Byrne Memorial Justice Assistance Grant (JAG) Program Local Solicitation has been successfully submitted. You will no longer be able to edit any information submitted. However, you can log in any time to view the application information.

You will be contacted by the Program Office when your application is processed or any other action is required by you.