

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

FOR THIS SECTION BE SURE TO CHOOSE A PROGRAM

Grant #:

Applicant:

Project Title:

Grant Program:

PROJECT ADMINISTRATIVE PAGE

1. Applicant

Applicant Address:

Mailing Address:
City/State/Zip:

City: State: Zip-4 Code:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Head of Agency:
Title: First Name: Last Name:

Phone #:

E-Mail Address:

Agency's Point of Contact Information:
Title: First Name: Last Name:

Phone #:

Cell Phone #:

E-Mail Address:

2. Organization Type

3. Region or Entity:

Program Initiatives

4a. Initiatives:

4b. Is this LETPA?:

5. Total Dollar Amount Requested:

6. Enter the 2011 - 2014 State Homeland Security Strategy Objectives (EXAMPLE : 1.1.0) and Action Item(s) Numbers (EXAMPLE:1.1.4) that relate to this project. To learn more about the strategy visit this website:

<http://www.azdohs.gov/Grants/SHSS.asp>

5.1.0; Respond to Incidents; 5.1.1, 5.1.2, 5.1.3, 5.1.4. & 5.2.0; 5.2.1.

7. Is this project new or ongoing? If the project is ongoing, identify the corresponding projects and funding amounts for each year as applicable. Also, for the current grant cycle, please identify, if any, requests for funding from other funding sources i.e. EOC, EMPG etc.

Ongoing: FY2010 received \$28,000.00, FY2011 None Received, FY2012 received \$49,700.00 FY2013 received \$23,530.00 . FY2010 & FY2013 were partial amount funded. FY2013 was as a result of turn back monies. No funding received from any other source.

8. Please list the multiple jurisdictions and/or disciplines served by this project. Include POC information for each partnering agency.

This project services the regional areas of, Gila County, Navajo, Coconino, Apache, Pima and Maricopa Counties. It also serves the Town of Payson, San Carlos Tribal Reservation, White Mtn. Apache Reservation, Tonto Apache Tribal Reservation. It has also began to aid and assist the US Border Patrol - BORTSAR Dive Unit. None are direct partners in this project.



STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

PLEASE FILL OUT THE APPLICANT AND PROJECT TITLE BLANKS ONLY

Grant #: []

Applicant: GILA COUNTY SHERIFF'S OFFICE

Project Title: CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH

The following document(s) have been completed and submitted with the application.

Check if Completed

Grant Workbook

- Project Administrative Page (Questions 1-8)
- Project Narrative (Questions 9-11)
- Project Justification (Questions 12-14)
- Core Capabilities (Questions 15 & 16)
- Milestones (Question 17)

Please be sure to only complete the following worksheets that pertain to your project.

- | | |
|--|---|
| <input checked="" type="checkbox"/> -Equipment Budget Narrative | Please check the following boxes if |
| <input checked="" type="checkbox"/> -Equipment Description & Utilization | |
| <input type="checkbox"/> -Training Budget Narrative & Detail Worksheet | <input checked="" type="checkbox"/> -Your agency is NIMS Compliant |
| <input type="checkbox"/> -Exercise Budget Narrative & Detail Worksheet | <input checked="" type="checkbox"/> -Your agency is registered with and participating in E-Verification Program |
| <input type="checkbox"/> -Planning Budget Narrative & Detail Worksheet | |
| <input type="checkbox"/> -Organization Budget Narrative & Detail Worksheet | For more information on E-Verify |
| <input type="checkbox"/> -M&A Budget Narrative & Detail Worksheet | www.uscis.gov/E-Verify |
| <input type="checkbox"/> -Memorandum of Understanding (if applicable) | |

The following tabs **MUST** be completed

- Standard Data Collection Form
- Financial System Survey
- Budget Summary
- Project Summary
- FFATA Summary

The due date for this application is March 3, 2014 at 5:00PM. No late applications will be accepted. No incomplete applications will be accepted. There will be no opportunity for clarifications once the application has been submitted. To submit an application please click on the link below:

<http://www.azdohs.gov/Application2014.asp>

| Central, East and North Regions, Phoenix UASI | West Region and State Agencies | South Region |
|---|---|--|
| Susan Dzbanko (602) 542-1777 sdzbanko@azdohs.gov | Lisa Hansen (602) 542-7014 lhansen@azdohs.gov | Bill Seltzer (602) 542-7044 wseltzer@azdohs.gov |

Grant Timeline

March 3, 2013 no later than 5:00 PM (Arizona Time) - Application due to AZDOHS.

March 4 - March 18, 2014 AZDOHS reviews grant applications.

March 19- April 11, 2014 Applicable applications will be reviewed by Working Groups as necessary. Regional Advisory Councils will provide recommendations to the Director of AZDOHS.

TBD - AZDOHS Applications due to Federal DHS.

On or before September 2014 - Awards will be made to local jurisdictions and state agencies.

Grant Period - Start date will be determined by the date on the official award notice to Arizona. from U.S. DHS. The local jurisdictions grant award period will not exceed 12 months.

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5.1.0; Respond to Incidents; 5.1.1, 5.1.2,5.1.3,5.1.4. & 5.2.0; 5.2.1.

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STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #: [REDACTED]

Applicant: GILA COUNTY SHERIFF'S OFFICE

Project Title: CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH

PROJECT NARRATIVE

9. Provide a summary description (scope of work) for this project as well as a description of the need. Be sure to include how this project will support and enhance jurisdictional capabilities that are directly related to the Initiative identified on the previous tab under item 4. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

Our team responds to water related rescue and recovery incidents in NE AZ. We recover vehicles, bodies, evidence, in contaminated waters, and Swift Water Rescue. We can perform inspections in potable water tanks. This equipment will further our ability to address hazard mitigation, search and rescue, underwater crime scene management, response to critical hazards caused by a catastrophic failure of one or more dams upstream from the Phoenix area which would diminish local response. Our team is multi agency, comprised of personnel from the San Carlos Apache Police, Tonto Basin Fire Dept, US National Park Service, and civilian volunteers. We provide initial and ongoing training to, as well as respond to assist teams from Navajo, Coconino, Apache Counties and US Border Patrol. We are able to respond throughout the state. This equipment will enhance diver safety in contaminated environments, decrease time spent in the water, and improve our rescue capability, and give consistency of equipment.

10. What is the sustainability plan for this project/equipment?

All items are industrial professional grade with routine service and maintenance the equipment should have a service life of ten plus years.

11. Can partial funding be accepted for this project? If so, at what specific dollar amount(s), items, and quantities? Be sure to list the order of priority.

Yes; 1) 15 Dive Computers-\$18,375.00 2) 1 Underwater Metal Detector System-\$5,500.00 3) 1 Trolling Motor-\$1,000.00 4) 5 Modular Buoyancy Compesators-\$5,500.00 5) 5 SCUBA Regulator W/Gas Switching Block-\$3,500.00 6) 5 Harness, Diving Safety Weight Integrated-\$1,000.00 7) 1 Rescue Rope Launching Gun-\$2,000.00

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2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant:

GILA COUNTY SHERIFF'S OFFICE

Project Title:

CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH

PROJECT JUSTIFICATION

12. Explain how this project supports the State Homeland Security Strategy.

To learn more about the State Homeland Security Strategy, refer to the following website:

<http://www.azdohs.gov/Grants/SHSS.asp>

Roosevelt & San Carlos Lks., are in Gila County. These lakes are recreational and agricultural supplying the Phoenix and Tucson metro areas. The equipment is necessary to continue our efforts to mitigate hazards, provide search, rescue, & recovery of evidence in crime scene management. We have been providing initial, advanced, & ongoing diver training in the Public Safety Diver arena for CBRNE response. Agencies from various Sheriff's Offices have come to us for this training as well as the US Customs Border Patrol dive unit from Tucson. This equipment will further abilities to effectively respond to incidents, & provide more advanced training to agencies we serve and new agencies. We continue to maintain a multi-agency team involving members our First Responder Community ie. Fire Dept.'s, National Park Service, Tribal, & Civillians. MOU's are in place with these agencies for use of their personnel integrated into our team. Through Mutual Aid we support area Tribal nations, & Sheriff's Office's.

13. Include how this project fits into one (or more) of the State Initiatives. Please refer to the "PROJECT ADMIN TAB" under Item 4. Provide any additional justification that supports this project. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

This equipment will continue our efforts to protect divers in contaminated environments. In FY2013 we recieved partial funding for critical equipment-Modular BCD system, Integrated Weight Safety Harness, Gas switching blocks, this cycle would finish those item needs. New equipment-Diving computers equips divers with like equipment allowing consistant monitoring, planning, & record keeping by downloading critical dive information in the event of contamination exposure or after dive illness. Underwater Metal Detector System will provide a means of searching an area without inserting divers, pinpointing a target to pursue, minimizing exposure in the search of crime scenes. It is boat towable and diver deployable. This unit is land & underwater usefull serving dual purposes. Trolling Motor-minimize wear and tear on main motor, allowing reliable slow methodical search patterns with Metal Detctor. Rescue Rope Gun-in Swiftwater Rescue the ability to reach a victim without risking injury to Rescue Divers.

14. Describe in detail the goals and objectives of the proposed project. Be sure to address what your organization's current capabilities are, and how the current capabilities of your organization will be impacted or enhanced as a result of this grant. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

The BCD system, Weight Safety Harness, Gas Switching blocks will complete our unit needs for that type of equipment for a 15 pers on team. Current equipment-Dry Suits, Full Face Masks, U/W Radio, Response Trailer with air compressor fill station, responding regionally and statewide to any and all events. Dive Computers will provide standardization. U/W Metal Detector will provide a more effective means of searching for submerged large & small item evidence recovery by use of the modular system ability to change detector heads to match the item and area search criteria. This unit is towable by boat, diver deployable, land & water search capable. Trolling Motor will significantly extend the main motor lifespan on our dive boat by minimizing its use for idle, slow speed operation, while providing a stable consistant slow speed. Rescue Rope Gun will provide a means of rescue in Swiftwater conditions minimizing risk to Rescue Divers it has an effective range of up to 750 ft.

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CORE CAPABILITIES

15. From the 31 Core Capabilities please identify, from the drop down menu, no more than three Core Capabilities supported by this project in priority order. Then enter the proposed amount of funding to be obligated for each Core Capability from this project. To access the Core Capabilities List click on the link below.

<http://www.fema.gov/pdf/prepared/npg.pdf>

<http://www.fema.gov/pdf/prepared/crosswalk.pdf>

| | | | |
|---|---|---------------|---------------------------------------|
| <input type="text" value="Environmental Response/Health and Safety"/> | ▼ | Enter Amount: | <input type="text" value="\$37,375"/> |
| <input type="text" value="Choose Core Capabilities"/> | ▼ | Enter Amount: | <input type="text" value="\$0"/> |
| <input type="text" value="Choose Core Capabilities"/> | ▼ | Enter Amount: | <input type="text" value="\$0"/> |

This amount should equal the total amount being requested for this project.

16. For each Core Capability selected, list the gap number as identified in the State Preparedness Report (SPR) that this project will address (Example gap number: Operational Communications, Equipment, 1- Acquire, maintain and sustain equipment). For each gap listed, provide a description of HOW this project will addresses that gap within your jurisdiction and/or region.

Environmental Response/Health and Safety, Acquire equipment that ensures adequate trained and equipped personnel and resources to respond to an incident, protecting first responders conducting search and rescue operations to remove affected victims from a hazardous environment, and conduct crime scene operations, locate and recover items of contamination in an underwater environment, and other critical hazards. Through acquisition of this equipment we will continue to provide response training to other agency first responder dive teams, provide technical and physical assistance to other homeland security stakeholders. We currently and will continue to support the participation of regional county agencies, and Tribal Nations. We have incorporated area Tribal officers, US National Park Service, Tonto Basin FD into our team. We continue our association with US Border Patrol Tucson Sector Dive Team to facilitate their training, and incorporate their unit in our missions.

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MILESTONES

16. Provide specific milestones for the project during the course of the performance period. Each milestone (up to 4) should provide a clear description of the projected outcome. Note: If this grant is awarded, the milestones, as identified below, are required to be fulfilled as part of the grant requirement. The grant performance period is 12 months and the projected funding cycle is October 2014 - September 2015. Extensions will only be considered under extenuating circumstances, and additional supporting documentation will be required. Do not use any special characters such as a hyphen or apostrophe.

Milestone 1

| Description: | Start Date | End Date |
|--|------------|------------|
| Recieve Grant. Begin Bid Request Process | 10/01/2014 | 12/31/2014 |

Milestone 2

| Description: | Start Date | End Date |
|---|------------|------------|
| Bids recieved and reviewed. Purchase process started. | 01/01/2015 | 03/31/2015 |

Milestone 3

| Description: | Start Date | End Date |
|---|------------|------------|
| Bids awarded. Purchase Authorization obtained, equipment ordered. | 04/01/2015 | 06/30/2015 |

Milestone 4

| Description: | Start Date | End Date |
|--|------------|------------|
| Equipment received, operational training started for new equipment. Equipment issued to team members as appropriate. | 07/01/2015 | 09/30/2015 |

STATE OF ARIZONA
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2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant:

Project Title:

TRAINING - BUDGET NARRATIVE AND BUDGET DETAIL WORKSHEET

All training must be in accordance with and approved by the State Training POC, prior to any contracted services with training provider. Any grant funds used for Communications Unit Training must be in compliance with the Arizona Communications Unit Training Coordination Procedure.

More information can be found at:

<http://www.arizona.gov/communications-unit-training>

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:

<https://www.firstrespondertraining.gov>

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants from your jurisdiction.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area:

Training Level:

| Projected Number of Deliveries (1 or Greater) | Backfill Overtime | Workshops Conferences | Trainers Contractors Consultants | Supplies | Travel | Total |
|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| <input type="text" value="0"/> | <input type="text" value="\$0"/> | |
| Total Cost for All Deliveries | <input type="text" value="\$0"/> |

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue \$500 and 100 exercise manuals \$20/each = \$2,000 Total Supplies = \$2,500)

Section 2

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<https://www.firstrespondertraining.gov>

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|--|-------------------|-----------------------|----------------------------------|----------|--------|-------|
| 0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
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TOTAL TRAINING COSTS \$0 \$0 \$0 \$0 \$0 \$0

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ORGANIZATION - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

Each Organization activity must be explained in detail. Personnel dollar amounts must list fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. (Medicare is NOT a reimbursable cost for personnel Backfill/Overtime). All Equipment associated with Organization must be listed on the "Equipment Budget Narrative" page only. *The character limit for this section is 1,000.*
Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
<http://www.aaz.gov/publications/SAM/SAM-10-022008.pdf>

Provide a description of this Organization activity. Each allowable organization expense category must be listed and how it will be utilized.

| | | |
|--|--|--|
| Overtime for Information, Investigative and Intelligence Sharing Activities <input style="width: 100%;" type="text" value="\$0"/> | Select Operational Expenses Associated with Increased Security Measures at CI Sites as Declared by Federal DHS. <input style="width: 100%;" type="text" value="\$0"/> | New Staff Positions, Contractors, or Consultants for Participation in Information, Intelligence Analysis and Sharing Groups or Fusion Center Activities <input style="width: 100%;" type="text" value="\$0"/> |
|--|--|--|

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| | | |
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TOTAL ORGANIZATION COSTS

TOTAL COSTS

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Grant #:

Applicant:

Project Title:

MANAGEMENT AND ADMINISTRATION - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

M&A COSTS ARE LIMITED TO 5% OF THE TOTAL AMOUNT OF THE PROJECT AWARD.
M&A COSTS ARE NOT APPLICABLE FOR STATE AGENCIES.

Each M&A activity must be explained in detail. Refer to the link below for additional guidance and detailed information on allowable M&A expenses/activities. Personnel dollar amounts must list fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. **(Medicare is NOT a reimbursable cost for personnel Backfill/Overtime).** M&A must be reasonable and prudent. All Equipment associated with Organization must be listed on the "Equipment Budget Narrative" page only. *The character limit for this section is 1,000.*

Management & Administration and Planning Information:
<http://www.azdohs.gov/Documents/Grants/FundingRestrictionsMA.pdf>

Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
<http://www.aac.az.gov/publications/SAAM/SAAM-24-222008.pdf>

costs must be listed: Personnel, Travel, etc. If requesting materials, you must provide a list of all consummable materials requested.

| Backfill Overtime | Personnel Contractors Consultants | Collection Plan Development for DHS Data Calls | Travel Lodging Per Diem | Meeting Expenses | Materials | Recurring Equipment Fees | Total |
|----------------------------------|---|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> |

Provide a description of each M&A expense activity. Each allowable M&A expense category must be listed and provide a brief description of each category. Estimated costs must be listed: Personnel, Travel, etc. If requesting materials, you must provide a list of all consummable materials requested.

| Backfill Overtime | Personnel Contractors Consultants | Collection Plan Development for DHS Data Calls | Travel Lodging Per Diem | Meeting Expenses | Materials | Recurring Equipment Fees | Total |
|----------------------------------|---|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> | <input type="text" value="\$0"/> |

| | | | | | | | | |
|-----------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|--|
| M & A SUBTOTALS: | <input type="text" value="\$0"/> | Total <input type="text" value="\$0"/> |
|-----------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|--|

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #: [REDACTED]

Applicant: GILA COUNTY SHERIFF'S OFFICE

Project Title: CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH

APPLICATION - SUMMARY

| FUNDING CATEGORIES | TOTAL |
|---------------------------|-----------------|
| EQUIPMENT | \$37,375 |
| TRAINING | \$0 |
| EXERCISE | \$0 |
| PLANNING | \$0 |
| ORGANIZATION | \$0 |
| M & A | \$0 |
| APPLICATION TOTAL | \$37,375 |

Grant Number: Application Number:

Arizona Department of Homeland Security
 1700 West Washington Street, Suite 210
 Phoenix, AZ 85007

Project Summary

| | |
|------------------------------------|---|
| Local Unit of Government: | GILA COUNTY SHERIFF'S OFFICE |
| Award Amount: | \$37,375 |
| Project Title: | CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH |
| Project Description: | Our team responds to water related rescue and recovery incidents in NE AZ. We recover vehicles, bodies, evidence, in contaminated waters, and Swift Water Rescue. We can perform inspections in potable water tanks. This equipment will further our ability to address hazard mitigation, search and rescue, underwater crime scene management, response to critical hazards caused by a catastrophic failure of one or more dams upstream from the Phoenix area which would diminish local response. Our team is multi agency, comprised of personnel from the San Carlos Apache Police, Tonto Basin Fire Dept., US National Park Service, and civilian volunteers. We provide initial and ongoing training to, as well as respond to assist teams from Navajo, Coconino, Apache Counties and US Border Patrol. We are able to respond throughout the state. This equipment will enhance diver safety in contaminated environments, decrease time spent in the water, and improve our rescue capability, and give consistency of equipment. |
| Project Type: | Enhance capabilities to respond to all-hazards events |
| Primary Core Capability: | Environmental Response/Health and Safety |
| HSGP Investment Supported: | Strengthen CBRNE Response and Detection |
| HSGP Primary Goal: | Goal 5 - Respond to Incidents |
| HSGP Objective: | Strengthen Arizona's responder personnel capabilities to address Chemical, Biological, Radiological, Nuclear, and Environmental Hazards |
| Phoenix UASI Investment Supported: | Choose Primary Investment Supported |
| Phoenix UASI Primary Goal: | Choose a Phoenix UASI Goal |
| Phoenix UASI Objective: | Choose a Phoenix UASI Objective |
| Funding Source: | SHSGP - STATE HOMELAND SECURITY GRANT PROGRAM |

2014 Budget Summary

Grant Number:

Is this LETPA? No

Application Number:

| Allowable Planning Costs | SHSGP | UASI | Choose Primary Discipline |
|---|-----------------|------------|---------------------------|
| Developing hazard/threat-specific annexes that incorporate the range of prevention, protection, response, and recovery activities | \$0 | \$0 | Click Discipline |
| Developing and implementing homeland security support programs and adopting ongoing DHS National Initiatives | \$0 | \$0 | Click Discipline |
| Developing related terrorism prevention activities | \$0 | \$0 | Click Discipline |
| Developing and enhancing plans and protocols | \$0 | \$0 | Click Discipline |
| Developing or conducting assessments | \$0 | \$0 | Click Discipline |
| Hiring of full- or part-time staff or contract/consultants to assist with planning activities (not for the purpose of hiring public safety personnel fulfilling traditional public safety duties) | \$0 | \$0 | Click Discipline |
| Conferences to facilitate planning activities | \$0 | \$0 | Click Discipline |
| Materials required to conduct planning activities | \$0 | \$0 | Click Discipline |
| Travel/per diem related to planning activities | \$0 | \$0 | Click Discipline |
| Overtime and backfill costs (IAW operational Cost Guidance) | \$0 | \$0 | Click Discipline |
| Planning Totals | \$0 | \$0 | \$0 |
| Allowable Organizational Activities | SHSGP | UASI | Choose Primary Discipline |
| Overtime for information, investigative, and intelligence sharing activities (up to 50 percent of the allocation) | \$0 | \$0 | Click Discipline |
| Reimbursement for select operational expenses associated with increased security measures at critical infrastructure sites incurred during periods of DHS declared alert (up to 50 percent of the allocation) | \$0 | \$0 | Click Discipline |
| Hiring of new staff positions/contractors/consultants for participation in information/intelligence analysis and sharing groups or fusion center activities (up to 50 percent of the allocation) | \$0 | \$0 | Click Discipline |
| Organizational Totals | \$0 | \$0 | \$0 |
| Allowable Equipment Categories | SHSGP | UASI | Choose Primary Discipline |
| 01- Personal Protective Equipment | \$28,375 | \$0 | Law Enforcement |
| 02- Explosive Device Mitigation and Remediation Equipment | \$0 | \$0 | Click Discipline |
| 03- CBRNE Operational Search and Rescue Equipment | \$2,000 | \$0 | Law Enforcement |
| 04- Information Technology | \$0 | \$0 | Click Discipline |
| 05- Cyber Security Enhancement Equipment | \$0 | \$0 | Click Discipline |
| 06- Interoperable Communications Equipment | \$0 | \$0 | Click Discipline |
| 07- Detection | \$5,500 | \$0 | Law Enforcement |
| 08- Decontamination | \$0 | \$0 | Click Discipline |
| 09- Medical | \$0 | \$0 | Click Discipline |
| 10- Power | \$0 | \$0 | Click Discipline |
| 11- CBRNE Reference Materials | \$0 | \$0 | Click Discipline |
| 12- CBRNE Incident Response Vehicles | \$0 | \$0 | Click Discipline |
| 13- Terrorism Incident Prevention Equipment | \$0 | \$0 | Click Discipline |
| 14- Physical Security Enhancement Equipment | \$0 | \$0 | Click Discipline |
| 15- Inspection and Screening Systems | \$0 | \$0 | Click Discipline |
| 16- Agriculture Terrorism Prevention, Response, and Mitigation Equipment | \$0 | \$0 | Click Discipline |
| 17- CBRNE Prevention and Response Watercraft | \$1,500 | \$0 | Law Enforcement |
| 18- CBRNE Aviation Equipment | \$0 | \$0 | Click Discipline |
| 19- CBRNE Logistical Support Equipment | \$0 | \$0 | Click Discipline |
| 20- Intervention Equipment | \$0 | \$0 | Click Discipline |
| 21- Other Authorized Equipment | \$0 | \$0 | Click Discipline |
| Equipment Totals | \$37,375 | \$0 | \$37,375 |
| Allowable Training Costs | SHSGP | UASI | Choose Primary Discipline |
| Overtime and backfill for emergency preparedness | \$0 | \$0 | Click Discipline |
| Training workshops and conferences | \$0 | \$0 | Click Discipline |
| Full- or part-time staff or contractors/consultants | \$0 | \$0 | Click Discipline |
| Travel | \$0 | \$0 | Click Discipline |
| Supplies | \$0 | \$0 | Click Discipline |
| Training Totals | \$0 | \$0 | \$0 |
| Allowable Exercise Related Costs | SHSGP | UASI | Choose Primary Discipline |
| Design, Develop, Conduct and Evaluate an Exercise | \$0 | \$0 | Click Discipline |
| Exercise planning workshop | \$0 | \$0 | Click Discipline |
| Full- or part-time staff or contractors/consultants | \$0 | \$0 | Click Discipline |
| Overtime and backfill costs, including expenses for part-time and volunteer emergency response personnel participating in FEMA exercises | \$0 | \$0 | Click Discipline |
| Implementation of HSEEP | \$0 | \$0 | Click Discipline |
| Travel | \$0 | \$0 | Click Discipline |
| Supplies | \$0 | \$0 | Click Discipline |
| Exercise Totals | \$0 | \$0 | \$0 |
| Allowable Management & Administrative Costs | SHSGP | UASI | Choose Primary Discipline |
| Hiring of full- or part-time staff or contractors/consultants to assist with the management of the respective grant program, application requirements, compliance with reporting and data collection requirements | \$0 | \$0 | Click Discipline |
| Development of operating plans for information collection and processing necessary to respond to FEMA data calls | \$0 | \$0 | Click Discipline |
| Overtime and backfill costs | \$0 | \$0 | Click Discipline |
| Travel | \$0 | \$0 | Click Discipline |
| Meeting related expenses | \$0 | \$0 | Click Discipline |
| Authorized office materials | \$0 | \$0 | Click Discipline |
| Recurring expenses such as those associated with cell phones and faxes during the period of performance of the grant program | \$0 | \$0 | Click Discipline |
| Management & Administrative Totals | \$0 | \$0 | \$0 |
| Grand Totals | \$37,375 | \$0 | \$37,375 |

**Arizona Department of Homeland Security
Financial Systems Survey**

Name of Organization: GILA COUNTY SHERIFF'S OFFICE

Person completing survey: _____

Date: _____ Email: _____

PLEASE ANSWER EVERY QUESTION BY CHECKING THE APPROPRIATE BOX. ATTACH MATERIALS AND DOCUMENT Comments AS REQUIRED.

As stewards of federal and state funds, the Arizona Department of Homeland Security (AZDOHS) prefers to award funds to organizations (regardless of how small or large) that are both capable of achieving project goals/objectives and upholding their responsibility for properly managing funds as they achieve those objectives.

This survey will be used primarily for initial monitoring of the organization. This survey may also be used in evaluating the financial capability of the organization in the award process. Deficiencies should be addressed for corrective action and the organization should consider procuring technical assistance in correcting identified problems.

A. GENERAL INFORMATION

1. Has your organization received a Federal or State Grant within the last two years?

Yes No

2. Has your organization received funding from the Arizona Department of Homeland Security within the past two years? If yes, specify the grant contract numbers (for OSGP awards prior to FFY08 simply state "Stonegarden" in the blank provided): SHSGP 444403-03

Yes No 888303-02

3. Has your organization been audited by an independent Certified Public Accountant within the past two years?

Yes No

4. Has your organization completed an A-133 Single Audit within the past two years?

Yes No

5. Has your organization been granted tax-exempt status by the Internal Revenue Service?

Yes No

6. If you answered YES to question #5 under what section of the IRS code?

501 C (3) 501 C (4) 501 C (5) 501 C (6) Other

7. Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?

Yes No

B. FUNDS MANAGEMENT

8. Which of the following describes your organization's accounting system?

Manual Automated Combination

9. How frequently do you post to the General Ledger?

Daily Weekly Monthly Other

10. Does the accounting system completely and accurately track the receipt and disbursements of funds by each

Yes No

11. Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?

Yes No

12. Are time and effort distribution reports maintained for employees working fully or partially on state or federal grant programs which account for 100% of each employee's time?

Yes No

13. Is your organization familiar with Federal Cost Principles (i.e. OMB Circular A-87, A-122 or A-21)?

Yes No

C. INTERNAL CONTROLS

14. Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?

Yes No

15. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?

Yes No

16. Are all accounting entries and payments supported by source documentation?

Yes No

17. Are cash or in-kind matching funds supported by source documentation?

Yes No

18. Are employee time sheets supported by appropriately approved/signed documents?

Yes No

19. Does the organization maintain policies which include procedures for assuring compliance with applicable Code of Federal Regulations and terms of each grant award?

Yes No

D. PROCUREMENT

20. Does the organization maintain written codes of conduct for employees involved in awarding or administering procurement contracts?

Yes No

21. Does the organization conduct purchases in a manner that encourages open and free competition among vendors?

Yes No

22. Does the organization complete some level of cost or price analysis for every purchase?

Yes No

23. Does the organization maintain files and other source documentation sufficient to detail the history of each purchase?

Yes No

24. Does the organization maintain a system of contract administration to ensure contractor conformance with the terms and conditions of each contract?

Yes No

25. Does the organization maintain written procurement policies and procedures?

Yes No

Grant Number: Application Number:

Arizona Department of Homeland Security

Standard Data Collection Form

A. Agency Information

Project Title (if applicable): CRITICAL INCIDENT RESPONDER SAFETY AND HEALTH

Agency: GILA COUNTY SHERIFF'S OFFICE

Amount Requested: \$37,375

Project Description: Our team responds to water related rescue and recovery incidents in NE AZ. We recover vehicles, bodies, evidence, in contaminated waters, and Swift Water Rescue. We can perform inspections in potable water tanks. This equipment will further our ability to address hazard mitigation, search and rescue, underwater crime scene management, response to critical hazards caused by a catastrophic failure of one or more dams upstream from the Phoenix area which would diminish local response. Our team is multi agency, comprised of personnel from the San Carlos Apache Police, Tonto Basin Fire Dept., US National Park Service, and civilian volunteers. We provide initial and ongoing training to, as well as respond to assist teams from Navajo, Coconino, Apache Counties and US Border Patrol. We are able to respond

Address: PO Box 311

Globe AZ 85501-1465
(City) (State) (Zip code)

County: Gila

Authorized Individual:

Name: Johnny Sanchez
(First Name) (Last Name)

Position / Title: Chief Dep.

Email: jgsanchez@gilacountyaz.gov

Phone: 928-425-4449

Ext. Fax:

Employer Identification Number: 866000444

DUNS Number:

142370761

Agency Classification (This is based on your selection on the Project Administrative Page):

County Have you previously conducted business with the State using this Employer Identification Number? Yes

If No, Please go to the following website to download and complete the State of Arizona Substitute W-9 form. Please be sure to submit this form with your application.

http://gao.az.gov/onlineforms/forms/AZ_subw-9_010713-S&S.pdf

In which Congressional (Federal) District is your agency headquartered? Enter District #: 1

<http://www.azredistricting.org>

In which Legislative (State) District is your agency headquartered? Enter District #: 5

<http://www.azredistricting.org>

Approximately how much FEDERAL funding will your organization expend in your current fiscal year? \$321,817

What is your organization's fiscal year-end date?

MM 06

DD 3030

Does your organization undergo an annual independent audit in accordance with OMB Circular A-133? Yes

Please provide contact information of the audit firm conducting your audit:

Agency: Clifton, Larson, Allen LLP

Address: 20 E. Thomas Rd. Suite 2300

(Address Line 1)

Phoenix AZ 85012-311
(Address Line 2) (City) (State) (Zip code)

Phone Number: 602-266-2248

Fax: 602-266-2907

Arizona Department of Homeland Security

Standard Data Collection Form

B. Contact Information (Please copy this portion as many times as needed.)

Program Agency - Indicates person with primary contact with the Arizona Department of Homeland Security and is directly responsible for ensuring that the program plan is implemented. All future program correspondence will be sent to this person.

Fiscal Agency - Indicates person responsible for financial matters pertaining to this grant.

Collaborator - Indicates all persons/agencies that have been identified as a collaborator, partner, or host site as a requirement of this grant.

Agency Contact Type : **Program Agency**

Agency: **GILA COUNTY SHERIFF'S OFFICE**

Address: **PO BOX 311**
(Address Line 1)

1100 SOUTH ST. **GLOBE** **AZ** **85502**
(Address Line 2) (City) (State) (Zip code)

County: **Gila**

Contact Person: **JOHN** **FRANCE**
(First Name) (Last Name)

Position/Title: **SERGEANT**

Email: **jfrance@gilacountyaz.gov**

Phone Number: **928-701-4440** Ext.

Fax: **928-474-0614**

Agency Contact Type : **Fiscal Agency**

Agency: **GILA COUNTY SHERIFF'S OFFICE**

Address: **PO BOX 311**
(Address Line 1)

1100 SOUTH ST. **GLOBE** **AZ** **85502**
(Address Line 2) (City) (State) (Zip code)

County: **Gila**

Contact Person: **Amber** **Warden**
(First Name) (Last Name)

Position/Title: **Executive Administrative Assistant**

Email: **awarden@gilacountyaz.gov**

Phone Number: **928-402-8584** Ext.

Fax: **928-425-5674**

Agency Contact Type : **Select Contact Type**

Agency:

Address:
(Address Line 1)

(Address Line 2) (City) (State) (Zip code)

County: **Select County**

Contact Person:
(First Name) (Last Name)

Position/Title:

Email:

Phone Number: Ext.

Fax:

Grant Number:

Application Number:

Arizona Department of Homeland Security

FFATA (Federal Funding Accountability and Transparency Act) Reporting Requirements

Name of Entity Receiving Award:

Requested Amount: Awarded Amount: (AZDOHS use only)

Funding Agency:

CFDA Number:

Project Title:

Location: City: State: Congressional District

10-digit Zip+4 (99999-9999):

<http://www.azredistricting.org>

DUNS Number:

1) Is 80% or more of your annual gross revenues from Federal Awards?

2) Do you receive \$25 Million or more annually from Federal Awards?

If you answered YES to BOTH questions, you MUST provide the following:

Names and Total Compensation of Top Five paid executives:

| | | |
|----|---------------------------|---|
| 1: | Name <input type="text"/> | Total Compensation <input type="text"/> |
| 2: | Name <input type="text"/> | Total Compensation <input type="text"/> |
| 3: | Name <input type="text"/> | Total Compensation <input type="text"/> |
| 4: | Name <input type="text"/> | Total Compensation <input type="text"/> |
| 5: | Name <input type="text"/> | Total Compensation <input type="text"/> |

STATE OF ARIZONA
Department of Homeland Security
2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Points of Contact

Address Your State Homeland Security Grant Program Management Questions to the Individuals Listed Below

AZDOHS

Assistant Director of Planning and Preparedness

Lisa Hansen
(602) 542-7014
Lhansen@azdohs.gov

Assistant Director of Finance and Administration

Terry Riordan
(602) 542-7056
Triordan@azdohs.gov

Assistant Director of Community Preparedness

Cheryl Bowen Kennedy
(602) 542-7077
Cbowen@azdohs.gov

Equipment Specialist

Michael Stidham
(602) 542-7041
Mstidham@azdohs.gov

NIMCAST COMPLIANCE (ADEM)

Mariano Gonzalez
(602) 464-6327
Mariano.gonzalez@azdema.gov

REGIONAL STRATEGIC PLANNERS AND FINANCE SPECIALISTS

Central, East, North Regions &

Phoenix UASI

Susan Dzbanko
Senior Strategic Planner
Office: (602) 542-1777
Cell: (602) 319-8837
Sdzbanko@azdohs.gov

West Region &
State Agencies

Lisa Hansen
Asst. Director
Office: (602) 542-7012
Cell: (602) 568-2973
hansen@azdohs.gov

South Region &
OPSG

Bill Seltzer
Strategic Planner
Office: (602) 542-7044
Cell: (602) 568-5806
bseltzer@azdohs.gov

Central Region &

Phoenix UASI

Lois George
Grant & Finance Specialist II
(602) 542-7047
LGeorge@azdohs.gov

State Agencies

Kevin Mancino
Budget Manager
(602) 542-1716
Kmancino@azdohs.gov

East, West & North Regions

Nicole Elmer
Project Specialist
(602) 542-7036
nelmer@azdohs.gov

South Region

Simone Courter
Grant & Finance Specialist I
(602) 542-7037
Scourter@azdohs.gov

ADEM (Training & Exercise)

Homeland Security Training

Coordinator

Kathy Hassett
Office: (602) 464-6264
kathienne.hassett@azdema.gov

Director of Exercise

Jan Lindner
Office: (602) 464-6218
jan.lindner@azdema.gov

Exercise Coordinator

Dan Varner
Office: (602) 464-6444
dan.varner@azdema.gov

Exercise Coordinator

Nichole Fortson
Office: (602) 464-6514
Nichole.fortson@azdema.gov

