

CITY COUNCIL AGENDA ITEM COVER MEMO

Agenda Item Number: _____

Meeting Type: Regular

Meeting Date: Dec 4, 2014

Action Requested By: Fire and Rescue

Agenda Type: Resolution

Subject Matter:

Approval to apply for a grant

Exact Wording for the Agenda:

Resolution authorizing the Mayor to apply for a grant with the US Department of Homeland Security (DHS) regarding the FY 2014 AFG Assistance to Firefighters grant program.

Note: If amendment, Please state title and number of the original

Item to be considered for: Action

Unanimous Consent Required: Yes

Briefly state why the action is required; why it is recommended; what council action will provide, allow and accomplish and; any other information that might be helpful.

This grant application is being submitted for the replacement of our SCBA. This is critical life-safety equipment that will exceed its useful life soon. Our cost of maintenance and repairs is reflective of its age.

Associated Cost: 10% Match \$170,274 Budgeted Item: Not Applicable

MAYOR RECOMMENDS OR CONCURS: Yes

Department Head: *HW McFarland*

Date: Nov 17, 2014

**ROUTING SLIP
CONTRACTS AND AGREEMENTS**

Originating Department: Fire and Rescue

Council Meeting Date: 12/4/2014

Department Contact: Lesley Easter

Phone # 256-427-5053

Contract or Agreement: Agreement

Document Name: 2014 AFG Grant Application

City Obligation Amount: \$170,274.

Total Project Budget:

Uncommitted Account Balance:

Account Number:

TBD

Procurement Agreements

Not Applicable	Not Applicable
-----------------------	-----------------------

Grant-Funded Agreements

Federal Other	Grant Name:	
	DHS 2014 AFG	

Department	Signature	Date
1) Originating	<i>[Signature]</i>	11/17/14
2) Legal	<i>[Signature]</i>	11/19/14
3) Finance <i>RC</i>	<i>[Signature]</i>	11/24/14
4) Originating		
5) Copy Distribution		
a. Mayor's office (1 copies)		
b. Clerk-Treasurer (Original & 2 copies)		

RESOLUTION NO. 14-

WHEREAS, the Department of Homeland Security (hereinafter "DHS"), through the Federal Emergency Management Agency (hereinafter "FEMA"), is offering financial aid under the 2014 AFG (Assistance to Firefighters) Grant program; and

WHEREAS, a grant for Federal financial assistance if awarded will impose certain obligations upon the City of Huntsville in that the there is a 10% match in the amount of \$170,274.

NOW THEREFORE, BE IT RESOLVED by the City Council of Huntsville, Alabama, that the Mayor is authorized to execute the grant application, assurances, and certification documents on behalf of the City of Huntsville with DHS/FEMA's 2014 AFG Grant Program for the purchase of Self-Contained Breathing Apparatus consisting of twenty-six (26) pages attached hereto and identified as "2014 AFG Grant Application"; and

BE IT FURTHER RESOLVED, in the event a grant is awarded, the Mayor of the City of Huntsville is authorized, requested, and directed, on behalf of the City of Huntsville, Alabama, to enter into such grant agreement with the DHS/FEMA, submit any required supporting and collateral materials, and file all reporting as required.

ADOPTED this the 4th Day of December 2014.

President of the City Council
City of Huntsville, Alabama

APPROVED this the 4th Day of December 2014.

Mayor
City of Huntsville, Alabama

2014 AFG Grant Application

Applicant's Acknowledgements

- * I certify the DUNS number in this application is our only DUNS number and we have confirmed it is active in SAM.gov as the correct number.
- * As required per 2 CFR § 25.205, I certify that prior to submission of this application I have checked the DUNS number listed in this application against the SAM.gov website and it is a correct and active at time of submission.
- * I certify that the applicant organization has consulted the appropriate Funding Opportunity Announcement and that all requested activities are programmatically allowable, technically feasible and can be completed within the award's one (1) year Period of Performance (POP).
- * I certify that the applicant organization is aware that this application period is open from 11/03 to 12/05/2014 and will close at 5 PM EST; further that the applicant organization is aware that that once an application is submitted, even if the application period is still open, a submitted application cannot be changed or released back to the applicant for modification.
- * I certify that the applicant organization is aware that it is solely the applicant organization's responsibility to ensure that all activities funded by this award(s), comply with Federal Environmental planning and Historic Preservation (EHP) regulations, laws, and Executive Orders as applicable. The EHP Screening Form designed to initiate and facilitate the EHP Review is available at: <http://www.fema.gov/media-library/assets/documents/30521?id=6906>
- * I certify that the applicant organization is aware that the applicant organization is ultimately responsible for the accuracy of all application information submitted. Regardless of the applicant's intent, the submission of information that is false or misleading may result in actions by FEMA that include, but are not limited to: the submitted application not being considered for award, an existing award being locked pending investigation, or referral to the Office of the Inspector General.

Signed by **Tommy Battle** on **2014-11-18**

President of the City Council
of the City of Huntsville, Alabama
Date: _____

Overview

<p>*Did you attend one of the workshops conducted by an AFG regional fire program specialist?</p> <p>No, I have not attended workshop</p> <p>*Did you participate in a webinar that was conducted by AFG?</p> <p>Yes</p>
<p>*Are you a member, or are you currently involved in the management, of the fire department or nonaffiliated EMS organization or a State Fire Training Academy applying for this grant with this application?</p> <p>Yes, I am a member/officer of this applicant</p>

If you answered "No", please **complete** the information below. If you answered "Yes", please skip the Preparer Information section.

Fields marked with an * are required.

Preparer Information

- * Preparer's Name
- * Address 1
- Address 2
- * City
- * State
- * Zip

[Need help for ZIP+4?](#)

In the space below please list the person your organization has selected to be the primary point of contact (POC) for this grant. This should be a department officer or member of the organization who will see this grant through completion, to include closeout. Reminder: if this person changes at any time during the period of performance please update this information. Please list only phone numbers where we can reach the POC.

Primary Point of Contact

* Title	Public Safety Support Services Manager
Prefix (select one)	Mrs.
* First Name	Lesley
Middle Initial	P
* Last Name	Easter
* Primary Phone(e.g. 123-456-7890)	256-427-5053 Ext. Type work
* Secondary Phone (e.g. 123-456-7890)	256-457-2036 Ext. Type cell
Optional Phone (e.g. 123-456-7890)	Type Select
Fax (e.g. 123-456-7890)	256-427-5261
* Email (e.g. user@xyz.org)	lesley.easter@huntsvilleal.gov

Contact Information

Alternate Contact Information Number 1

* Title Fire Chief
Prefix (select one) Mr.
* First Name Howard
Middle Initial W
* Last Name McFarlen
* Primary Phone 256-427-6767 Ext. Type work
* Secondary Phone 256-508-5994 Ext. Type cell
Optional Phone Type
Fax 256-427-7437
*Email howard.mcfarlen@huntsvilleal.gov

Alternate Contact Information Number 2

* Title Deputy Chief
Prefix (select one) Mr.
* First Name David
Middle Initial
* Last Name McComb
* Primary Phone 256-650-4730 Ext. Type work
* Secondary Phone 256-656-3385 Ext. Type cell
Optional Phone Type
Fax 256-427-4737
*Email david.mccomb@huntsvilleal.gov

Applicant Information

• Organization Name City of Huntsville Huntsville Fire and Rescue
Fire Department/Fire District

• Type of Applicant

• Fire Department/District, Nonaffiliated EMS, and Regional applicants, City
select type of Jurisdiction Served
If "Other", please enter the type of Jurisdiction

SAM.gov (System For Award Management)

• What is the legal name of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction. City of Huntsville, Alabama

• What is the legal business address of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

• Mailing Address 1 P O Box 308

Mailing Address 2

• City Huntsville

• State Alabama

• Zip 35804 - 0308
[Need help for ZIP+4?](#)

Employer

Identification Number
(e.g. 12-3456789)

Note: This information must match your SAM.gov profile. 63-6001296

• Is your organization using the DUNS number of your Jurisdiction? Yes

I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application.
(Required if you select Yes above)

• What is your 9 digit DUNS number? 072093727
(call 1-866-705-5711 to get a DUNS number)

If you were issued a 4 digit number (DUNS plus 4) by your Jurisdiction in addition to your 9 digit number please enter it here.
Note: This is only required if you are using your Jurisdiction's DUNS number and have a separate bank account from your Jurisdiction. Leave the field blank if you are using your Jurisdiction's bank account or have your own DUNS number and bank account separate from your Jurisdiction.

• Is your DUNS Number registered in

[SAM.gov](#) (System for Award Management previously CCR.gov)? **Yes**

I certify that my organization/entity is registered and active at [SAM.gov](#) and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate, current and consistent with my organization's/entity's [SAM.gov](#) record.

Headquarters or Main Station Physical Address

* Physical Address 1 308 Fountain Circle

Physical Address 2

* City Huntsville

* State Alabama

* Zip 35801 - 4240
[Need help for ZIP+4?](#)

Mailing Address

* Mailing Address 1 PO Box 308

Mailing Address 2

* City Huntsville

* State Alabama

* Zip 35804 - 0308
[Need help for ZIP+4?](#)

Bank Account Information

The bank account being used is: (Please select one from right) **Note: If this is selected, a 4 digit DUNS plus 4 is required if you answered "YES" to using the DUNS number of your Jurisdiction.**
Maintained by my Jurisdiction

Note: The following banking information must match your SAM.gov profile.

* Type of bank account Checking

* Bank routing number - 9 digit number on the bottom left hand corner of your check 062000019

* Your account number 0401000039

Additional Information

* For this fiscal year (Federal) is your organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request? **No**

* If awarded, will your organization expend more than \$750,000 in Federal funds during your organization's fiscal year? If "Yes", your organization may be required to undergo an A-133 audit. Reasonable costs incurred for an A-133 audit are an eligible expenditure and should be included in the applicant's proposed budget. Please enter audit costs only once under any "Additional Funding" in the "Request Details" section of the application. **Yes**

* Is the applicant [delinquent on any Federal debt](#)? **No**

If you answered "Yes" to any of the additional questions above, please provide an explanation in the space provided below:

The Federal share of this grant application request will exceed \$750,000

Fire Department/Fire District Department Characteristics (Part i)

- * Is this application being submitted on behalf of a Federal Fire Department or organization contracted by the Federal government which is solely responsible for the suppression of fires on Federal property? **No**
 - * What kind of organization do you represent? **All Paid/Career**
 - If you answered "Combination" above, what is the percentage of career members in your organization? **%**
 - If you answered "Volunteer", "Combination" or "Paid on-call", how many of your volunteer Firefighters are paid members from another career department?
 - * What type of community does your organization serve? **Urban**
 - * Is your Organization considered a Metro Department? **Yes**
 - * What is the square mileage of your first-due response area?
 Primary/First Due Response Area is a geographical area proximate to a fire or rescue facility and normally served by the personnel and apparatus from that facility in the event of a fire or other emergency and does not include daily or seasonal population surges. **210**
 - * What percentage of your primary response area is protected by hydrants? **95 %**
 - * In what county/parish is your organization physically located? If you have more than one station, in what county/parish is your main station located? **Madison**
 - * Does your organization protect critical infrastructure? **Yes**
- If "Yes", please describe the critical infrastructure protected below :
- 7 Colleges and Universities
 - 54 City Schools also used as PODs
 - 21 Private Schools
 - 32 Huntsville Utilities Facilities plus substations and gas mains
 - Huntsville Madison County Solid Waste Disposal Authorities Waste to Energy Plant
 - 64 Huntsville Water Pollution Control Facilities
 - Daycares
 - TVA Substations at Shields Road and Power Lines
 - Public Communications Systems (i.e. Bellsouth, Cellular Towers)
 - North Alabama Gas Distributors
 - Madison County Health Department Facility
 - 8 Hospitals
 - 4 Dialysis Centers
 - 8 Mortuary Facilities
 - Economic and Commercial Key Facilities
 - Rail Transportation Systems
 - High Density Public Places and Events
 - Huntsville International Airport
 - Critical Government Facilities (i.e. Federal Courthouse, NASA, US Postal Facilities, Redstone Arsenal)
 - Critical Government Support Contractor Facilities/Research Parks
 - 911 Center
 - Approximately 200 Municipal Owned Facilities
 - Approximately 20 Nursing Home Facilities
 - Public Safety Communication Towers and Systems

Alabama Department of Transportation Roadways and Facilities

- * How much of your primary response area is for agriculture, wildland, open space, or undeveloped properties? 8 %
- * What percentage of your primary response area is for commercial and industrial purposes? 21 %
- * What percentage of your primary response area is used for residential purposes? 71 %

- * How many occupied structures (commercial, industrial, residential, or institutional) in your primary response area are more than three(3) stories tall? Do not include structures which are not regularly occupied such as silos, towers, steeples, etc. 224
- * What is the permanent resident population of your Primary/First-Due Response Area or jurisdiction served? 180105
- * Do you have a seasonal increase in population? Yes
- If "Yes" what is your seasonal increase in population? 4500
- * How many active firefighters does your department have who perform firefighting duties? 350
- * How many members in your department/organization are trained to the level of EMT-I or EMT-Advanced? 297
- Does your department have a Community Paramedic program? No
- How many personnel are trained to the Community Paramedic level? 0
- * How many stations are operated by your organization? 18
- * Is your department compliant to your local Emergency Management standard for the National Incident Management System (NIMS)? Yes
- * Do you currently report to the National Fire Incident Reporting System (NFIRS)? Yes
Note: You will be required to report to NFIRS for the entire period of the grant.
- If you answered "Yes" above, please enter your FDIN/FDID 04701
- * How many of your active firefighters are trained to the level of Firefighter I? 100 %
(Include all personnel who have attained Firefighter I)
- * How many of your active firefighters are trained to the level of both Firefighter I and Firefighter II? 100 %
- If you answered less than 100% to either question above, are you requesting for training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001? No

If you indicated that less than 100% of your firefighters are trained to the Firefighter II level and you are not asking for training funds to bring everyone to the FF II level in this application, please describe in the box below

your training program and your plans to bring your membership up to Firefighter II.

* What services does your organization provide?

Basic Life Support	Haz-Mat Operational Level Haz-Mat Technical Level	Rescue Operational Level Rescue Technical Level Structural Fire Suppression Wildland Fire Suppression
Emergency Medical Responder	Occasional Fire Prevention Program	

* Please describe your organization and/or community that you serve.

Huntsville is a large urban community in North Alabama encompassing an area of approximately 210 square miles. Recent land annexations have moved our city limits into Limestone County and significantly increased the demands for all city services and infrastructure. 4,310.88 acres have been annexed into Huntsville over the past five years. It is significant to point out that our first due response area is larger than Atlanta which has only 132 square miles.

The recent Department of Defense Base Realignment and Closure BRAC process is estimated to provide 4700 federal jobs at the Redstone Arsenal and an additional 10,000 ancillary jobs. In 2007, the University of Alabama published a report detailing the impact of the BRAC on Huntsville. The findings show we anticipate our population will increase by 14.6 percent from the last census.

Technology, space, and defense industries have a major presence here with the Armys Redstone Arsenal, NASAs Marshall Space Flight Center, and Cummings Research Park. Home to several Fortune 500 companies, Huntsville also offers a broad base of manufacturing, retail and service industries. Huntsvilles agricultural land base is quickly changing to residential and commercial in support of the activities at Redstone Arsenal. There are many new commercial and residential developments underway.

A significant commercial development on Redstone Arsenal is underway. The City of Huntsville has entered into an agreement with Redstone Arsenal whereby 879 acres of federal property have been annexed into Huntsville to allow the provision of public safety services to this commercial development which is in support of national defense. Huntsville Fire and Rescue will provide first response fire and emergency medical response to 340 acres of unsecured area at this newly annexed property. Additionally, we provide mutual aid to all of Redstone Arsenal.

Huntsville Fire and Rescue provides fire suppression, basic life support first response, technical rescue, and life safety education within the City of Huntsville. Huntsville also provides regional hazardous material response as a part of the Alabama Mutual Aid System. Additionally, Huntsville Fire and Rescue has been recently certified as a Regional Training Facility by the Alabama Fire College. We instruct students at a statewide level and have also had attendees from out of state.

With all these positive attributes, Huntsville has been able to maintain a level of stability through this national recession by buckling down our finances. As a result, there are no funds for capital expenditures which is further explained in our need for Federal financial assistance.

Fire Department Characteristics (Part II)

	2013	2012	2011
* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?	3	3	3
* What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?	13	12	20
* What is the total number of line of duty member fatalities in your jurisdiction over the last three calendar years?	0	0	0
* What is the total number of line of duty member injuries in your jurisdiction over the last three calendar years?	1	3	3
* Over the last three years, what was your organization's average operating budget?	2078589	1945385	1881856
* What percentage of your TOTAL budget is dedicated to personnel costs (salary, overtime and fringe benefits)?	90%	90%	90%
* What percentage of your annual operating budget is derived from:	2013	2012	2011
Enter numbers only, percentages must sum up to 100%			
<u>Taxes?</u>	80 %	80 %	80 %
Bond Issues	0 %	0 %	0 %
<u>EMS Billing?</u>	0 %	0 %	0 %
Grants?	1 %	1 %	1 %
Donations?	0 %	0 %	0 %
Fund drives?	0 %	0 %	0 %
<u>Fee for Service?</u>	7 %	7 %	7 %
Other?	12 %	12 %	12 %

If you entered a value into Other field (other than 0), please explain
 Licenses, and Permits, Fines, Money and Property are revenue sources included in the Other category.

Does your organization intend to provide a cost share greater than the required amount?
 (If applying for a Micro Grant, please select "N/A")
 No

If yes, how much additional funding in excess of the required cost share is your organization willing to contribute? Enter the amount in the box to the right.
 \$

Note: This figure will not affect the budget calculations .

* Please describe your organization's need for Federal financial assistance.

The City of Huntsville continues to experience financial stress since the national recession in 2008 and 2009. In 2009, departmental equipment budgets used to fund purchases like the Huntsville Fire & Rescue's breathing apparatus were virtually eliminated and have not been restored since, in favor of maintaining adequate personnel and operational cost budgets. The City's primary source of capital funding, the Capital Improvement Fund, was reduced approximately 25 percent each year, and focused on supporting only critical capital projects. The State of Alabama eliminated its funding of major projects serving the City as the regional employment center, requiring the City to dedicate additional resources to meet these needs, and to restore some level of State matching support. While the City revenue decline during the recession has moderated, revenue growth since has been very limited, primarily supporting personnel and operating needs. The City is highly reliant on activities related to federal

government spending, which is uncertain and has been subject to holds and delays. This has resulted in limited consumer spending, the source of most City revenue, the primary contributor to recurring financial stress and limited availability of capital funds.

* How many vehicles does your organization have in each type or class of vehicle listed below? You must include vehicles that are leased or on long-term loan as well as any vehicles that have been ordered or otherwise currently under contract for purchase or lease by your organization but not yet in your possession. listed below? (Enter numbers only and enter 0 if you do not have any of the vehicles below.)

Type or Class of Vehicle	Number of Front Line Apparatus	Number of Reserve Apparatus	Number of Seated Riding Positions
Engines or Pumpers (pumping capacity of 750 gpm or greater and water capacity of 300 gallons or more): Pumper, Pumper/Tanker, Rescue/Pumper, Foam Pumper, CAFS Pumper, Type I or Type II Engine Urban Interface	19	9	152
Ambulances for transport and/or emergency response:	0	0	0
Tankers or Tenders (pumping capacity of less than 750 gallons per minute (gpm) and water capacity of 1,000 gallons or more):	0	0	0
Aerial Apparatus: Aerial Ladder Truck, Telescoping, Articulating, Ladder Towers, Platform, Tiller Ladder Truck, Quint	5	0	28
Brush/Quick attack (pumping capacity of less than 750 gpm and water carrying capacity of at least 300 gallons): Brush Truck, Patrol Unit (Pickup w/ Skid Unit), Quick Attack Unit, Mini-Pumper, Type III Engine, Type IV Engine, Type V Engine, Type VI Engine, Type VII Engine	0	0	0
Rescue Vehicles: Rescue Squad, Rescue (Light, Medium, Heavy), Technical Rescue Vehicle, Hazardous Materials Unit	10	0	42
Additional Vehicles: EMS Chase Vehicle, Air/Light Unit, Rehab Units, Bomb Unit, Technical Support (Command, Operational Support/Supply), Hose Tender, Salvage Truck, ARFF (Aircraft Rescue Firefighting), Command/Mobile Communications Vehicle	6	0	6

Fire Department Call Volume

	2013	2012	2011
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, Enter 0)			
Structural Fires	311	350	335
False Alarms/Good Intent Calls	5013	4923	5082
Vehicle Fires	108	149	145
Vegetation Fires	137	148	128
EMS-BLS Response Calls	7250	6922	6595
EMS-ALS Response Calls	0	0	0
EMS-BLS Scheduled Transports	0	0	0
EMS-ALS Scheduled Transports	0	0	0
Community Paramedic Response Calls	0	0	0
Vehicle Accidents w/o Extrication	2072	2041	2073
Vehicle Extrications	79	73	51
Other Rescue	94	96	96
Hazardous Condition/Materials Calls	427	404	543
Service Calls	248	214	239
Other Calls and Incidents	299	292	383
Total	16038	15612	15670
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, Enter 0)			
What is the total acreage of all vegetation fires?	17	16	9
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, enter 0)			
In a particular year, how many times does your organization receive Mutual Aid?	2	0	0
In a particular year, how many times does your organization receive Automatic Aid?	0	0	0
In a particular year, how many times does your organization provide Mutual Aid?	115	96	82
In a particular year, how many times does your organization provide Automatic Aid?	3	0	0
Total Mutual / Automatic Aid (please total the responses from the previous two blocks)	120	96	82
Out of the Mutual / Automatic Aid responses, how many were structure fires?	5	6	7

Request Information

1. Select the program for which you are applying. You can apply for as many activities within a program as you need. If you are interested in applying under Vehicle Acquisition or Operations and Safety, **you will need to submit separate applications.**

Program Name

Operations and Safety

2. Will this grant directly benefit more than one organization?

No

3. Enter grant-writing fee associated with the preparation of this request. Enter 0 if there is no fee.

\$0

* 4. Are you requesting a Micro Grant? A Micro Grant is limited to \$25,000 Federal share. Modification to Facilities activity is ineligible for Micro Grants.	No
--	----

Request Details

Fire Department/Fire District Personal Protective Equipment

Item	Number of units	Cost per unit	Total Cost	Action
SCBA with Face Piece - With Cylinder	205	\$ 7,000	\$ 1,435,000	View Details
SCBA with Face Piece - With Cylinder	23	\$ 7,000	\$ 161,000	View Details
Face Pieces	144	\$ 266	\$ 38,304	View Details
SCBA Spare Cylinders	228	\$ 1,047	\$ 238,716	View Details

Request Details

The activities for program **Operations and Safety** are listed in the table below.

Activity	Number of Entries	Total Cost	Additional Funding	Action
Equipment	0	\$ 0	\$ 0	View Details
Modify Facilities	0	\$ 0	\$ 0	View Details
Personal Protective Equipment	4	\$ 1,873,020	\$ 0	View Details View Additional Funding Narratives
Training	0	\$ 0	\$ 0	View Details
Wellness and Fitness Programs	0	\$ 0	\$ 0	View Details
Grant-writing fee associated with the preparation of this request.			\$0	

BudgetBudget Object Class

a. Personnel	\$ 0
b. Fringe Benefits	\$ 0
c. Travel	\$ 0
d. Equipment	\$ 1,873,020
e. Supplies	\$ 0
f. Contractual	\$ 0
g. Construction	\$ 0
h. Other	\$ 0
i. Indirect Charges	\$ 0
j. State Taxes	\$ 0
Federal and Applicant Share	
Federal Share	\$ 1,702,746
Applicant Share	\$ 170,274
Applicant Share of Award (%)	10
* <u>Non-Federal Resources</u> <i>(The combined Non-Federal Resources must equal the Applicant Share of \$ 170,274)</i>	
a. Applicant	\$ 170274
b. State	\$
c. Local	\$
d. Other Sources	\$

If you entered a value in Other Sources other than zero (0), include your explanation below. You can use this space to provide information on the project, cost share match, or if you have an indirect cost agreement with a federal agency.

Total Budget **\$ 1,873,020**

Firefighting PPE - Narrative

*** Section # 1** Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. ***4000 characters**

The Huntsville City Council approved a Resolution on December 4, 2014 committing to this project and obligating the matching funds. Our 2014 AFG grant application request includes equipment only to continue to meet our existing mission. We are requesting funding for a quantity of 228 SCBAs, individual face pieces, and an extra cylinder per SCBA. No funding is being requested for training services. Based upon preliminary quotes, the project budget is 1,873,020 dollars. The Federal share will be 1,702,746 dollars and the City share will be 170,274 dollars.

We polled manufacturer representatives and local distributors to obtain budgetary data. The SCBA we purchase will have integrated Personal Alert Safety System PASS devices, and be Chemical Biological Radiological Nuclear and Explosive Equipment CBRNE compliant to the current edition of the NFPA 1981 standard. The state of Alabama Competitive Bid Laws allow for the utilization of contracts awarded by several cooperatives. We will investigate all procurement options authorized and insure the procurement is administered in accordance with the Alabama Competitive Bid Laws.

Huntsville Fire and Rescues current SCBA was purchased in 2003. This critical life safety equipment is considered obsolete in that it is older than two NFPA cycles and it exceeds 10 years of age. Although we have maintained the equipment regularly, the most recent service performed in September, 2014 reflected the need for replacement. The regular maintenance service cost was 6,488 dollars but the parts and services to perform the needed repairs cost an additional 18,372 dollars. This equipment is becoming unreliable and the down time is affecting the safety of our firefighters and the efficiency of our daily operations.

As our city continues to grow, our department is growing to meet the demands of our community. We recently expanded our services into the newly annexed areas which added two pumpers and one ladder truck. Therefore, we have depleted the SCBAs on our reserve trucks to meet this need. Although our inventory is critically low, we have not replaced them because of the safety factor of having different types of SCBA. Additionally, we have not had the financial resources to replace them all.

Our implementation plan will include training all Firefighters on the use and care of the new SCBA and the refilling of the cylinders. Since we have not requesting funding for training services, we intend to utilize our own training facility and instructors with a train the trainer methodology. We anticipate the training can be conducted and the equipment inventoried and issued within two months after receipt of the equipment. No SCBA will be issued until all personnel are adequately trained.

*** Section # 2** Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. ***4000 characters**

The City of Huntsville needs this grant to replace obsolete equipment. Increasing maintenance cost is a indication of the condition of our equipment. Our SCBA is several editions past the current standards and the dependability is becoming questionable. Our inventory is critically low as many have been taken out of service and we have depleted our reserve trucks to cover the additionally annexed property.

With a 10 percent match, the cost benefit is for the expenditure of 182,400 dollars we will be able to provide the latest technology of SCBA to our Firefighters and significantly improving the safety of our personnel and the citizens we serve. The new SCBAs will still require annual service, however, the cost of repairs should significantly decrease due to the equipment being new and also covered under a factory warranty. Therefore, our operating costs in the area of equipment maintenance costs will decrease.

This new equipment will greatly enhance our fire ground operations and safety. The 2013 NFPA 1981 1982 Standards feature changes that will considerably improve the safety of our Firefighters such as the increased face piece lens durability requirements, voice intelligibility, and the low air alarm increasing from 25 percent to 33 percent of the cylinders operating pressure. The improved visual display of remaining airtime is a major improvement for the safety of our Firefighters.

Huntsville Fire and Rescues Training Division has recently focused on promoting safety. In light of statistics in addition to critique of our RIT teams training exercises, we have determined it is crucial we replace our 30 minute bottles with one hour bottles. In the event of disorientation or entrapment of personnel, the additional safety provided by adding a couple extra pounds of air is life safety insurance we are willing to carry.

The long term value of this new equipment is the improved dependability of our breathing air systems for many years. The added value of additional air provided by the larger bottles combined with all the additional features required by new standard will provide us with state of the art equipment to serve our community. Although our existing mission will remain the same, we will be able to perform with less risk to our firefighters.

Huntsville Fire and Rescue will consider a partial funding award if necessary, however, it is critical we replace all equipment at the same time because the risk of unfamiliar breathing systems is not acceptable. We are hopeful we will be able to accomplish the project with the budget we submitted.

*** Section # 3 Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? *4000 characters**

The City of Huntsville's call volume reflects this equipment will be utilized daily in response to structure fires, confined space, and hazmat incidents. The effect of this award will be significant for all stakeholders.

The effect of this award to the incident commander and safety officer will be a higher level of confidence in the safety of our Firefighters because they will be equipped with the newest technology. Additionally, this new technology will provide the functionality of a personnel accountability system on the fire ground that can be implemented as funding becomes available. Additionally, the larger one hour bottles provide the safety factor of extra air in case of an entrapment and will allow extra time for the RIT team.

The effect of this award to the Firefighter is greatly improved life safety equipment. The health and safety of our Firefighters is our priority. The new standard provides the assurance they are equipped with the latest technology of PPE. The entire SCBA unit, including the facemask, will be rated to withstand extreme temperatures and flashovers. The heads up display will allow Firefighters to manage their time more efficiently and the extra air provided by the one hour bottle will supply an extra margin of safety in the event of disorientation or entrapment. The enhanced voice systems will also improve communications between Firefighters.

The effect of this award to the citizens of Huntsville is that their fire service will be enhanced with tools to facilitate the protection of life and property. Huntsville is at risk for natural hazards, infectious disease, technological and accidental hazards, terrorist and cyber attacks. We are dedicated to contributing to the National Preparedness Goal by insuring we possess the core capabilities to do our part. Therefore, the cost of this new equipment is more than reasonable for the community we serve considering our population, large response area, and risk.

The effect of this award to our budget is that we anticipate a decrease in operating budget because of this new equipment. This equipment will reduce our maintenance and down time will also be greatly reduced. It is unknown if the annual service cost will increase due to the increased complexity of the air pack but we do not expect it to be significant.

In an effort to maximize the benefit of the funding, no funding is being requested for training. As part of the product delivery, our Training Officers will receive the initial manufacturer train the trainer instruction. All personnel will receive this training while on duty by our on duty Training Officers. Job performance tasks will be utilized to evaluate the effectiveness of the training. No air packs will be issued until all personnel are adequately trained. No funding has been requested for training to allow us to maximize the funding going directly into the project.

Assurances and Certifications

FEMA Form SF 424B

You must read and sign these assurances. These documents contain the Federal requirements attached to all Federal grants including the right of the Federal government to review the grant activity. You should read over the documents to become aware of the requirements. The Assurances and Certifications must be read, signed, and submitted as a part of the application.

Note: Fields marked with an * are required.

O.M.B Control Number 4040-0007

Assurances Non-Construction Programs

Note: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or

- financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

Signed by **Lesley Easter** on

Form 20-16C**You must read and sign these assurances.**

Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters and Drug-Free Workplace Requirements.

Note: Fields marked with an * are required.

O.M.B Control Number 1660-0025

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. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 44 CFR Part 17, "Government-wide Debarment and Suspension (Non-procurement) 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 Homeland Security (DHS) determines to award the covered transaction, grant, or cooperative agreement.

1. Lobbying

A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons (entering) into a grant or cooperative agreement over \$100,000, as defined at 44CFR Part 18, 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 extension, continuation, renewal amendment or modification of any Federal grant or cooperative agreement.

(b) If any other funds 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 the sub awards at all tiers (including sub grants, contracts under grants and cooperative agreements and sub contract(s)) and that all sub recipients shall certify and disclose accordingly.

2. Debarment, Suspension and Other Responsibility Matters (Direct Recipient)

A. As required by Executive Order 12549, Debarment and Suspension, and implemented at 44CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-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 civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or perform 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 government 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; and

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 44CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17.615 and 17.620:

(A) The applicant certifies that it 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 to 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 employee 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 the applicable DHS awarding office, i.e. regional office or DHS office.

(f) Taking one of the following actions, against such an employee, 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).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance

Street	City	State	Zip	Action
--------	------	-------	-----	--------

If your place of performance is different from the physical address provided by you in the Applicant Information, press *Add Place of Performance* button above to ensure that the correct place of performance has been specified. You can add multiple addresses by repeating this process multiple times.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for DHS funding. States and State agencies may elect to use a Statewide certification.

Signed by **Lesley Easter** on

FEMA Standard Form LLL

Only complete if applying for a grant for more than \$100,000 and have lobbying activities. See Form 20-16C for lobbying activities definition.

You must read and sign these assurances by providing your password and checking the box at the bottom of this page.

Note: Fields marked with an * are required.

O.M.B Control Number 0348-0046

Standard Form LLL: Disclosure of Lobbying Activities

1. * [Type of Federal Action](#)
2. * [Status of Federal Action](#)
3. * [Report Type](#)

This subsection is for Material Change only

Year

Quarter

Date of last report:

4. * [Name and Address of Reporting Entity:](#)

*Reporting Entity Type

Tier (if known)

*Name

*Street

*City

*State

*Zip

-
[Need help for ZIP+4?](#)

5. If Reporting Entity in No.4 is a Subawardee, enter name and address of Prime:

Name

Street

City

State

Zip

[Need help for ZIP+4?](#)

Congressional District if known

6. * [Federal Department/Agency](#)

7 * [Federal Program Name/Description](#)

CFDA Number if known

8. [Federal Action Number if known:](#)

9. [Award Amount if known:](#) \$

10a. Name and address of Lobbying Registrant: (if individual, Last Name, First Name, MI)

Name

Street

City

State

Zip

10b. Individuals Performing Services: (include address if different from No.10a) (Last Name, First Name, MI)

Name

Street

City

State

Zip

Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signed by **Lesley Easter** on