

## **DIVISION OF GRANTS, LOCAL & STATE ASSISTANCE**

**We are pleased to announce funding availability for the FY 2017 State Homeland Security Program (SHSP)**

**This funding opportunity is made available through the Missouri Department of Public Safety, electronic WebGrants System, accessible on the internet:**

**<https://dpsgrants.dps.mo.gov>**



# Key Dates

<b>March 29, 2017:</b>	Funding opportunity open in WebGrants <a href="https://dpsgrants.dps.mo.gov/">https://dpsgrants.dps.mo.gov/</a>
<b>March 29, 2017:</b>	Application webinar available on DPS website <a href="http://dps.mo.gov/dir/programs/ohs/grantstraining/">http://dps.mo.gov/dir/programs/ohs/grantstraining/</a>
<b>May 12, 2017:</b>	Applications due in WebGrants 5:00 pm CST
<b>June 1–July 31, 2017:</b>	RHSOC regional application review/scoring
<b>September 1, 2017:</b>	Award start date
<b>August 31, 2019:</b>	Award end date

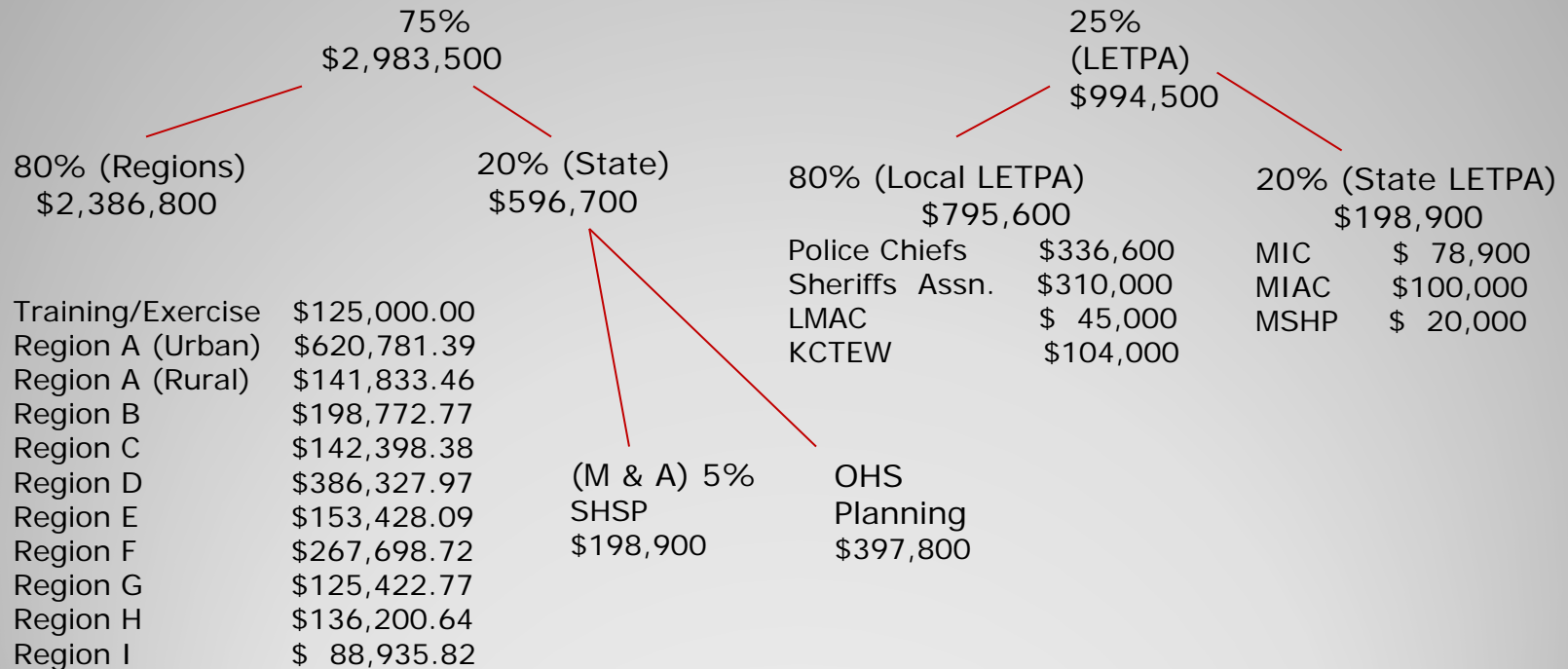
# 2017 Anticipated Funding

The Federal Notice of Funding Opportunity for the Homeland Security Grant Program for 2017 has not yet been released. It is estimated that funding levels will be similar to what was granted in 2016.

**Awards are contingent upon federal funding being received.**

# 2017 Anticipated Funding

SHSP 2016 Award  
\$3,978,000



# Eligible Applicants

- Local units of government
- Quasi-governmental organizations (e.g. RPCs & COGs)
- Nonprofit organizations (e.g. LETPA)

Applicants within the following counties (Jackson, Cass, Platte, Clay, and Ray) need to apply through Mid-America Regional Council <http://www.marc.org/> (816) 474-4240  
marcinfo@marc.org

# Ineligible Applicants

- Entities located within St. Louis UASI
  - Franklin County
  - Jefferson County
  - St. Charles County
  - St. Louis City
  - St. Louis County

For information regarding the application process in these jurisdictions, please contact East-West Gateway Council of Government at (314) 421-4220.

# Application Requirements

- The purpose of the HSGP is to support state and local efforts to prevent terrorism and other catastrophic events and to prepare the Nation for the threats and hazards that pose the greatest risk to the security of the United States.
- HSGP provides funding to implement investments that build, sustain, and deliver the 32 core capabilities essential to achieving the National Preparedness Goal (the Goal) of a secure and resilient Nation.
- <https://www.fema.gov/national-preparedness-goal>

# Application Requirements

- SHSP funding allows for the expansion of eligible maintenance and sustainment costs which must be in:
  - Direct support of existing capabilities
  - Must be an otherwise allowable expenditure under the applicable grant program
  - Must be tied to one of the core capabilities in the five mission areas contained within the National Preparedness Goal, and
  - Shareable through the Emergency Management Assistance Compact



# Application Requirements

- Many activities which support the achievement of target capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for other hazards unrelated to acts of terrorism.
- However, all SHSP funded projects must assist subrecipients in addressing terrorism by achieving target capabilities related to the five mission areas of:
  - Prevention
  - Protection
  - Mitigation
  - Response
  - Recovery

# Application Requirements

- Must consider how to sustain current capability levels and address potential gaps
- **New capabilities should not be built at the expense of maintaining current and critically needed core capabilities**

# Application Requirements

- Use of grant funds for Controlled Equipment must be in compliance with the following:
  - EO 13688 Federal Support for Local Law Enforcement Equipment Acquisition, and the Recommendations Pursuant to Executive Order 13688
  - IB 407a Use of Grant Funds for Controlled Equipment
  - IB 414 Civil Rights Review Process for Controlled Equipment

# Application Requirements

- Controlled Equipment List (IB 407a)
  - Manned Aircraft, Fixed/Rotary Wing
  - Unmanned Aerial Vehicles
  - Armored Vehicles, Wheeled
  - Tactical Vehicles, Wheeled
  - Command and Control Vehicles

# Application Requirements

- Prohibited Equipment List (IB 407a)
  - Tracked armored vehicles
  - Weaponized vehicles/aircraft/vessels
  - Grenade launchers
  - Bayonets
  - Camouflage uniforms
- Not Allowable
  - Explosives and pyrotechnics
  - Breaching apparatus
  - Riot/Crowd control batons and shields
  - Firearms and ammunition (not allowable for the Homeland Security Grant Program)

# Application Requirements

- National Incident Management System Implementation (NIMS)
  - Prior to allocation of any awards, subrecipients must ensure and maintain adoption and implementation of NIMS
- Emergency Operations Plan(EOP)
  - Update at least once every two years, for every agency that currently has one
  - Required to be submitted in 2017
  - Standard, CPG 101 v.2  
[http://www.fema.gov/pdf/about/divisions/npd/CPG\\_101\\_V2.pdf](http://www.fema.gov/pdf/about/divisions/npd/CPG_101_V2.pdf)

# Application Requirements

- Threat and Hazard Identification and Risk Assessment (THIRA) updates
  - Has been streamlined - subrecipients must participate in updating their regional THIRA every three years
  - Next required update is June 1, 2019
  - Regions may continue to submit updates more frequently at their discretion
  - The state will continue to update annually
  - For more information on THIRA:  
<https://www.fema.gov/threat-and-hazard-identification-and-risk-assessment>

# Application Requirements

- Subrecipients must utilize standardized resource management concepts such as:
  - Resource typing, inventorying, organizing, and tracking resources to facilitate the dispatch, deployment and recovery of resources before, during and after an incident
- Subrecipients must coordinate with their stakeholders to examine how they integrate preparedness activities across disciplines, agencies, and levels of government



# Application Requirements

- EHP Review
  - Subrecipients proposing projects that have the potential to impact the environment must participate in the FEMA EHP review process
  - The review process must be completed before funds are released to carry out the proposed project
  - Any projects that make a change to a building or the grounds must complete an EHP. This includes drilling holes into the walls or any ground disturbance

# Application Requirements

- Operational Packages (OPacks)
  - Applicants may elect to pursue operational package (OPack) funding such as:
    - Incident Support Teams (IST), Canine Teams, Mobile Explosive Screening Teams, and Anti-Terrorism Teams
  - Applicants must commit to minimum training standards to be set by the DHS for all Federally funded security positions, and ensure that capabilities are able to be deployable through the Emergency Management Assistance Compact (EMAC)
  - When requesting new OPacks-related projects, applicants must demonstrate the need for developing a new capability at the expense of sustaining existing core capability.

# Application Requirements

- FEMA funds must be used to supplement, not supplant, existing funds that have been appropriated for the same purpose
- Emergency communications activities must comply with FY 2016 SAFECOM guidance
  - <https://www.dhs.gov/sites/default/files/publications/FY%202016%20SAFECOM%20Guidance%20FINAL%20508C.pdf>

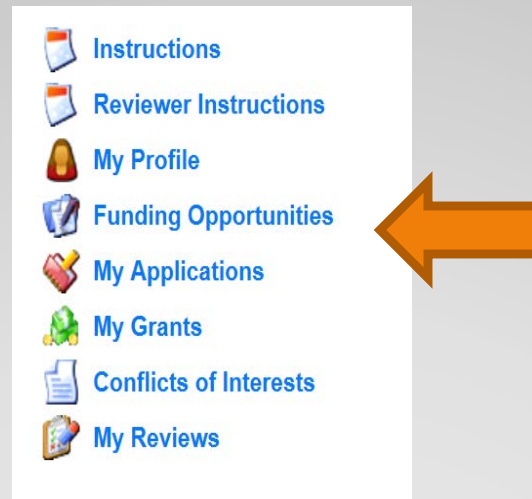
# WebGrants Application

- Go to [dpsgrants.dps.mo.gov](https://dpsgrants.dps.mo.gov)
- Log in or register as a new agency
  - If your agency is already registered in the system someone with access will need to add new users

<p><b>Log In</b></p> <p>User ID:* <input type="text"/></p> <p>Password:* <input type="password"/></p> <p><input type="button" value="Log In"/></p> <p><a href="#">Forgot User Id?</a></p> <p><a href="#">Forgot Password?</a></p>	<p><b>Missouri Department of Public Safety</b></p> <p>New to WebGrants - Missouri Department of Public Safety?</p> <p><a href="#">Register Here</a></p>
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# Application Instructions

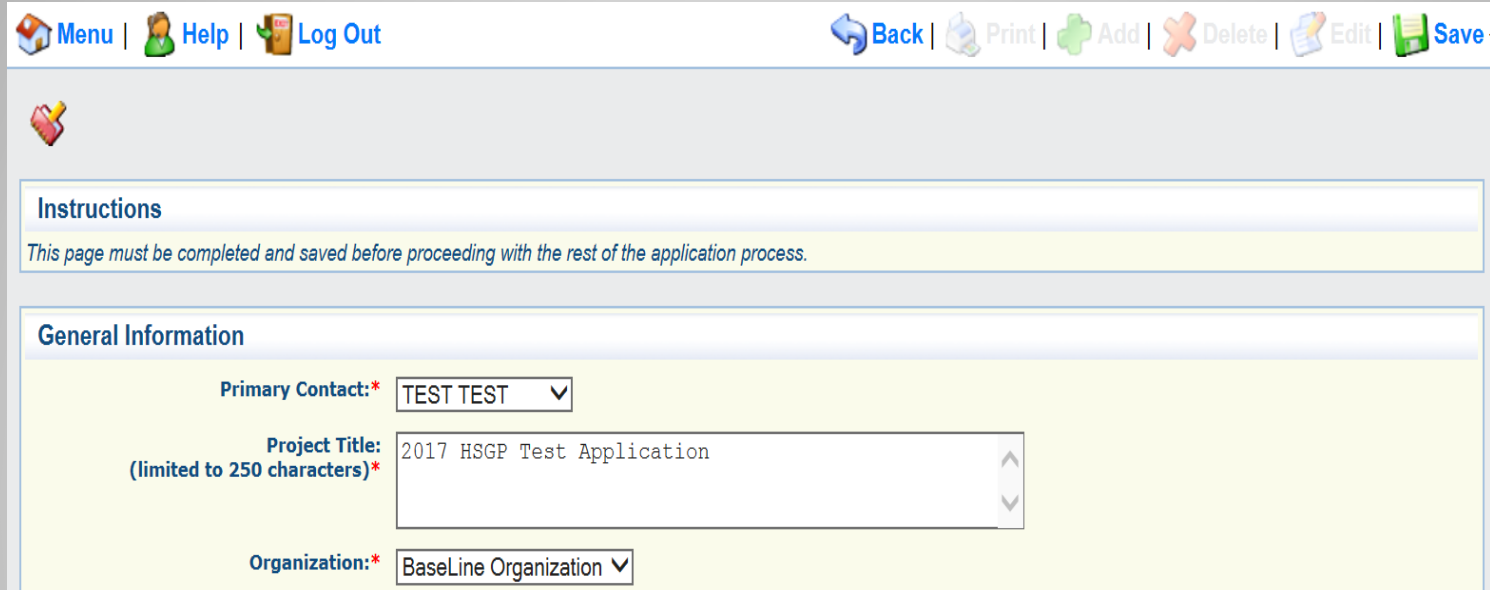
- Click on Funding Opportunities and select the 2017 SHSP funding opportunity for the region you are applying to



- Note:** RPC/COG will submit only one application with both the M&A and the Workplan projects. This will be submitted under the 2017 SHSP M&A and Workplan funding opportunity (Separate opportunity to the 2017 SHSP Regions)
  - Competitive projects submitted by the RPC/COG must be submitted under the regional funding opportunity*

# Application Instructions, Cont.

- After selecting new fill in general information and click save



The screenshot shows a web application interface. At the top is a navigation bar with links: Menu (house icon), Help (person icon), Log Out (logout icon), Back (blue arrow icon), Print (printer icon), Add (green plus icon), Delete (red X icon), Edit (pencil icon), and Save (green floppy disk icon). A large orange arrow points to the Save button. Below the navigation bar is a section titled "Instructions" with a yellow background and the text: "This page must be completed and saved before proceeding with the rest of the application process." Below this is a section titled "General Information" with a yellow background. It contains three fields: "Primary Contact:\*" with a dropdown menu showing "TEST TEST", "Project Title: (limited to 250 characters)\*" with a text input field containing "2017 HSGP Test Application", and "Organization:\*" with a dropdown menu showing "BaseLine Organization".

Menu | Help | Log Out | Back | Print | Add | Delete | Edit | Save

**Instructions**

*This page must be completed and saved before proceeding with the rest of the application process.*

**General Information**

Primary Contact:\* TEST TEST ▼

Project Title:  
(limited to 250 characters)\* 2017 HSGP Test Application

Organization:\* BaseLine Organization ▼

# Application Instructions, Cont.

- Complete each of the 13 forms with all required information then save and mark complete
- **All forms must be marked complete to submit**

Application Forms		Application Details   <a href="#">Submit</a>   <a href="#">Withdraw</a>
Form Name	Complete?	Last Edited
General Information	✓	03/16/2017
Contact Information		
Project Summary		
Grant Project THIRA		
Grant Project Background *Complete only if previously funded with OHS grant funds*		
Project Milestones		
Deployable Resources *Complete only if funding Deployable Resource*		
SHSGP Budget 2017		
Audit Certification Form		
NIMS Compliance		
Self Evaluation Risk Assessment		
Certified Assurances		
Other Attachments		

# Contact Information

- Authorized Official
- Project Director
- Fiscal Officer
- Project Contact Person

## Contact Information

### Authorized Official

Enter the name and address of the individual who has the authority to legally bind the applicant agency.

- City Government - If the applicant agency is a city, the Mayor/City Administrator shall be the Authorized Official.
- County Government - If the applicant agency is a county, the Presiding Commissioner shall be the Authorized Official.
- Non Profit Board - If the applicant agency is a Non Profit Agency, the Board Chairperson shall be the Authorized Official. In addition, please upload copy of 501C3 in the Other Attachments.
- State Government - If the applicant agency is a state department, the Director shall be the Authorized Official.
- Regional Planning Commission (RPC) - If the applicant agency is an RPC, the RPC Executive Director is the Authorized Official.

<b>Authorized Official:*</b>	<input type="text" value="Mayor"/> <small>Title (Mr.Ms.etc)</small>	<input type="text" value="Joe"/> <small>First Name</small>	<input type="text" value="Blow"/> <small>Last Name</small>
<b>Job Title:*</b>	<input type="text" value="Mayor"/>		
<b>Agency:*</b>	<input type="text" value="City of Hope"/>		
<b>Mailing Address:*</b>	<input type="text" value="123 Main St"/>		
<b>Street Address 1:</b>	<input type="text"/>		
<b>Street Address 2:</b>	<input type="text"/>		
<b>* City</b>	<input type="text" value="Home"/> <small>City</small>	<input type="text" value="Missouri"/> <small>State</small>	<input type="text" value="65565"/> <small>Zip Code</small>
<b>Email:*</b>	<input type="text"/>		
<b>Phone:*</b>	<input type="text"/> <small>Office</small>	<input type="text"/> <small>Ext.</small>	<input type="text"/> <small>Cell</small>
<b>Fax:*</b>	<input type="text"/>		



# Project Summary

- The purpose of the project summary is to provide a description of the goal and outcomes the project will achieve
- If an application contains more than one project (not more than one item) you will need to add each project to the Project Summary



# Project Summary-Cont.

**Project Title:\***

**Agency Name:\***


**Region:\***  ▼

**Project Location Zip Code:\***


**Project Activity Type:\***  ▼

**Type of Project:\***  ▼

*Project must start after 09/01/2017.*

**Project Start Date:\***  

*Project must end before 08/31/2019.*

**Project End Date:\***  

**Investment Justification:\***  ▼

**Primary Core Capability:\***  ▼

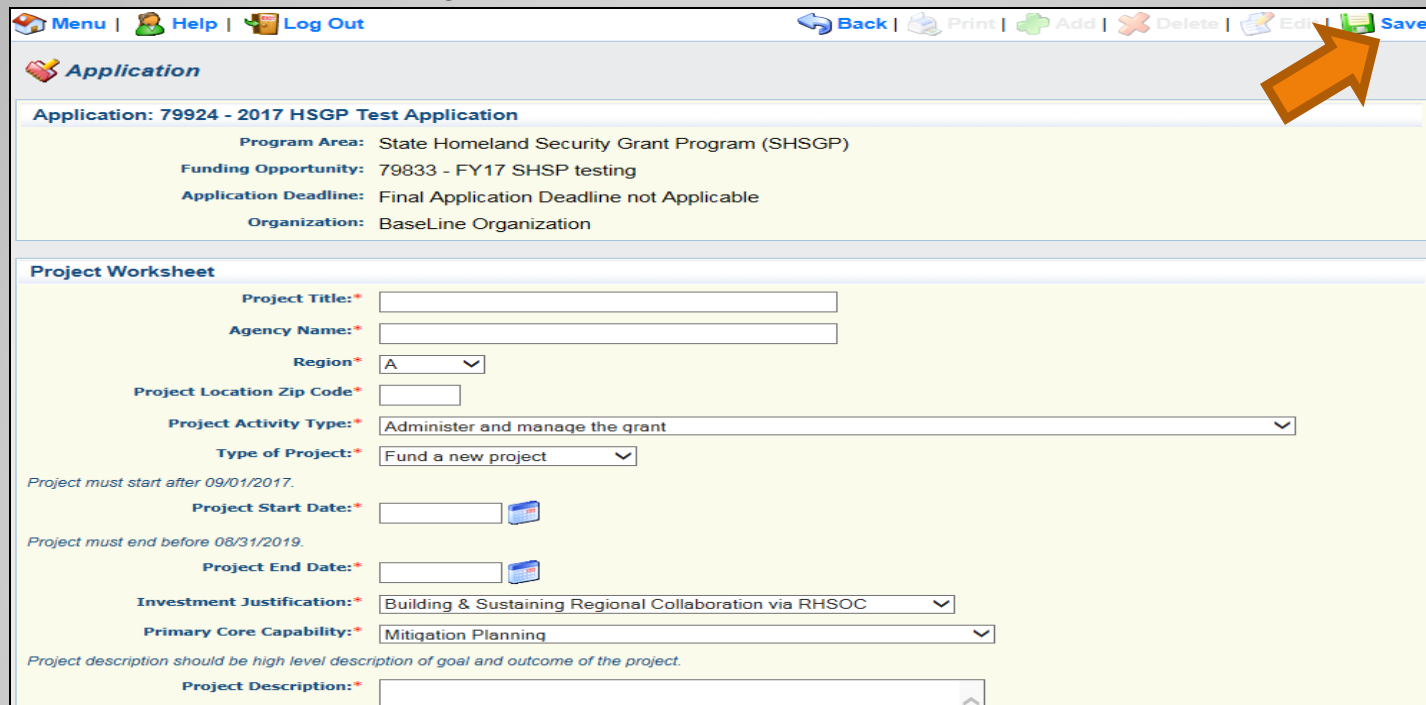
*Project description should be high level description of goal and outcome of the project.*

**Project Description:\***

2000 Character Limit

# Project Summary – Cont.

- Enter all required fields and click save
- This will return you to the previous screen where you can add additional projects



**Application**

Application: 79924 - 2017 HSGP Test Application

Program Area: State Homeland Security Grant Program (SHSGP)

Funding Opportunity: 79833 - FY17 SHSP testing

Application Deadline: Final Application Deadline not Applicable

Organization: BaseLine Organization

**Project Worksheet**

Project Title: \*

Agency Name: \*

Region: A

Project Location Zip Code: \*

Project Activity Type: \* Administer and manage the grant

Type of Project: \* Fund a new project

Project must start after 09/01/2017.

Project Start Date: \*

Project must end before 08/31/2019.

Project End Date: \*

Investment Justification: \* Building & Sustaining Regional Collaboration via RHSOC

Primary Core Capability: \* Mitigation Planning

Project description should be high level description of goal and outcome of the project.

Project Description: \*

# Grant Project THIRA

- A link to the State THIRA is provided in the instructions
- If the application contains more than one project be sure to complete the THIRA form for each project



## Missouri State THIRA

Select Project Title to align THIRA.

**Project Alignment:\***

Test Project ▼

If no project title displays complete the Project Summary of the application first.

Select Core capability(s) from the selected THIRA.

**Core capability(s):\***

Mitigation Threats and Hazard Identification

Prevention Planning

Prevention Public Information and Warning

Prevention Operational Coordination

Prevention Forensics and Attribution

Please press Ctrl + Click to select multiple items

Enter the capability target(s) from selected THIRA.

**Capability Target(s):\***

Prevention

Enter the page and section # of the THIRA the project aligns with.

**THIRA Page &  
Section #s:\***

66, 109A Explosive Devices

# Grant Project THIRA-Cont.

*Explain how the project impacts capability gap(s) from the state/regional THIRA Capability Target selected.*

**Impact:\***

Complete 100 % of tasks identified in desired outcomes.....

*Funding for activities not explicitly focused on terrorism preparedness must demonstrate Dual Use.  
If not explicitly focused on terrorism preparedness, describe Dual Use below.*

**Dual Use:**

If the project is not directly related to terrorism prevention provide a description of both the use that relates and the one that does not.

Dual use are activities which support the achievement of target capabilities related to terrorism preparedness and may simultaneously support enhanced preparedness for other hazards unrelated to acts of terrorism.

# Grant Project Background

- If the project is for sustainment, add the project background for previous years it was funded (3 years preferred)

## Project Background *\*Complete only if proposed project was also funded with prior grant funds\**

*For sustainment projects, what has already been accomplished related to this project?*

*Be sure to refer to exact federal fiscal year (award year) from which funds were used, not the implementation year.*

*If more than one funding year was utilized, repeat this step by clicking "Add" for each year up to three years.*

**Project Alignment:\***

Test Project ▼

*If no project title displays complete the Project Summary of the application first.*

**Federal Fiscal (Award) Year:\***

2016

**Investment Justification:\***

Building & Sustaining Regional Collaboration via RHSOC ▼

*Describe the final accomplishment of this federal grant award.*

**Prior Accomplishments:\***

What was the final accomplishment of the fiscal year the project was funded

# Project Milestones

A milestone is a reference point that marks a major event in a project and is used to monitor the project's progress

The milestones for a project should present a clear sequence of events that will incrementally build up to the completion of the approved project

# Project Milestones Form

## Project Milestones

Complete each milestone by selecting \*Add\* fill in the form and save.  
Complete steps for all milestones of the project.

**Project Alignment\***

If no project title displays complete the Project Summary of the application first.

Enter the milestone to be completed for their project. Each milestone should be entered separately by selecting "Add" at top of the page for up to 10 milestones per project.

**Milestone:\***

250 Character Limit

- Milestone examples can be found in the Project Milestones Form instructions
- Complete steps for each milestone in project
- **Maximum 10 milestones per project**



# Deployable Resources

- A deployable resource is an asset that can be deployed regionally, statewide, or nationally
- An asset could be an Opack, a communications vehicle, a generator, a CERT team etc.

# NIMS Kind & Typing

- Recipients must ensure and maintain adoption and implementation of NIMS. Emergency management and incident response activities require carefully managed resources (personnel, teams, facilities, equipment and/or supplies) to meet incident needs. Utilization of the standardized resource management concepts such as typing, credentialing, and inventorying promote a strong national mutual aid capability needed to support delivery of core capabilities. Additional information on resource management and NIMS resource typing definitions and job titles/position qualifications is on DHS/FEMA's website under <http://www.fema.gov/resource-management-mutual-aid>

# Deployable Resources Form, Cont.

## Deployable Resources \*Complete this section ONLY if funding deployable resource\*

List the name of the deployable resource.

Item Name:\*

Project Alignment:\*

If no project title displays complete the Project Summary of the application first.

Project Resource Type:\*

If the project is for new deployable resources, has the applicant agency attempted coordination of resources?

☐ Yes ☐ No

Describe attempts for coordination of resources:

100 Character Limit

If sustaining deployable Homeland Security resource, describe how the project sustains the resource?

100 Character Limit

Resource Sharable:\* ☐ Yes ☐ No

Special conditions/requirements on sharing:

Example: Specific requirements of equipment, operator, etc.

### NIMS Kind & Typing

FEMA Resource Typing Library Tool is located at <https://rtdt.preptoolkit.org/Public>.

Is resource NIMS Kind & Typed?\* ☐ Yes ☐ No

Kind & Type Information:  
(ID x-xxx-xxxx Name)

Example: ID 3-508-1032 Mass Casualty Support Vehicle

If not Kind & Typed, explain how item further Homeland Security Initiative:

100 Character Limit



# View Resource Typing Definition

RTLT

Home

Browse

Links & Tools

About

Help

ID: 7-508-1076

Name: Generators

Status: Published

Updated: 8/11/2014 9:10:03 PM

Released: 05/26/2005

Category: Public Works

## Core Capabilities

Primary: Infrastructure Systems

Secondary: Mass Care Services

Supporting:

DESCRIPTION			
RESOURCE CATEGORY	Public Works	RESOURCE KIND	Equipment
OVERALL FUNCTION			
	COMPOSITION AND ORDERING SPECIFICATIONS		

RESOURCE TYPES			TYPE 1	TYPE 2	TYPE 3	TYPE 4
COMPONENT	METRIC/MEASURE	CAPABILITY				
Equipment	KW		2000 kW Generator Sound attenuated Trailer mounted (semi tractor) Up to 3015 Amps@ 480 Volts, 3 Phase, 60 Hz Dry weight 89,000 lbs	1500 kW Generator Sound attenuated Trailer mounted (semi tractor) Up to 2260 Amps@ 480 Volts, 3 Phase, 60 Hz Dry weight 59,000 lbs	600 kW Generator; Sound attenuated Trailer mounted (semi tractor) Up to 2080 Amps@ 208 Volts, 3 Phase, 60 Hz / up to 902 Amps@ 480 Volts 3 Phase, 60 Hz Dry weight 37,000 lbs	400 kW Generator Sound attenuated Trailer mounted (pull behind) Multi-voltage distribution panel Up to 1390 Amps @ 208 Volts, 3 Phase, 60 Hz/up to 602 Amps@ 408 Volts 3 Phase, 60 Hz Dry weight 16,800 lbs
			NOTES: Not Specified			
Equipment	Fuel tank capacity		1250 Gallons	1250 Gallons	660 Gallons	470 Gallons
			NOTES: Not Specified			
Equipment	Dimensions		40' Long x 8' Wide x 13' .5" Tall	40' Long x 8' Wide x 13' .5" Tall	40' Long x 8' Wide x 13' .5" Tall	23' Long x 8' Wide x 13' .5" Tall
			NOTES: Not Specified			

# Deployable Resources Form-Cont.

- Item Name is the item(s) that are being purchased with the requested grant funds
- Project alignment, matches to the project for which the item(s) is being purchased
- Project Resource Type will be new or enhance sustainment of the deployable resource (may not be the item, but something the item is a part of)
- If the resource is new, provide information about attempts at coordination with other agencies within the region to see if they have a similar or same resource available to share

# Deployable Resources Form-Cont.

- If the deployable resource is a sustainment item, describe how the item(s) requested for funding will sustain the resource
- If there are requirements for another agency to share the deployable resource, list the requirements

# Deployable Resources Form-Cont.

- Under NIMS Kind & Typing section of the form
  - Is the deployable resource kind & typed
- Kind & Type Information
  - Provide ID number from Federal Website as well as the name <http://www.fema.gov/resource-management-mutual-aid>
- If the deployable resource is not kind and typed, provide a description of why the resource is necessary to further homeland security initiative(s)

# Budget Form

Enter each budget line by selecting 'Add' and completing all required information, then save and add additional lines as needed

- Personnel
- Benefits
- Travel
- Equipment
- Supplies/Operations
- Contractual



# Budget Form – Cont.

## Equipment

Add

All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.

All Equipment purchased has to be an allowable item on the [Authorized Equipment List \(AEL\)](#).

Line Item Code:	Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Cost:	Sustainment:	Is this a Control Item:	Discipline:	Function:	Allowable Activity:	Project Alignment:
-----------------	-----------------	--------	------	------------	-------------	--------------	-------------------------	-------------	-----------	---------------------	--------------------

Menu | Help | Log Out Back | Print | Add | Delete | Edit | Save

**Application**

Application: 79924 - 2017 HSGP Test Application

Program Area: State Homeland Security Grant Program (SHSGP)

Funding Opportunity: 79833 - FY17 SHSP testing

Application Deadline: Final Application Deadline not Applicable

Organization: BaseLine Organization

**Equipment**

All equipment items are defined as tangible property having an acquisition cost of \$1,000 or more, and a useful life of more than one year.

All Equipment purchased has to be an allowable item on the [Authorized Equipment List \(AEL\)](#).

Line Item Code:

OHS Internal use.

Line Item Name:

AEL #:

Qty:

Total Cost:

Sustainment:

Sustainment is costs that are necessary to maintain a current, deployable homeland security asset.

Is this a Control Item:

Discipline:

Select primary discipline benefiting from equipment.

Function:

Select the appropriate function area for this budget line.

Allowable Activity:

Select one primary activity the budget line is benefiting.

Project Alignment:

If no project title displays complete the Project Summary of the application first.

# Budget Form-Cont.

- Provide required justification for all budget lines by clicking 'Edit' at top of the page

Missouri Department of  
**Public Safety**



[Menu](#) | [Help](#) | [Log Out](#) [Back](#) | [Print](#) | [Add](#) | [Delete](#) | [Edit](#) | [Save](#)

 **Application**

Application: 79924 - 2017 HSGP Test Application

**Program Area:** State Homeland Security Grant Program (SHSGP)

**Funding Opportunity:** 79833 - FY17 SHSP testing

**Application Deadline:** Final Application Deadline not Applicable

**Organization:** BaseLine Organization

# Budget Form – Cont.

- The instructions for each budget section provide a description of what information must be provided

## Narrative Justification - Equipment





Detailed narrative justification is required for all budget line(s). This justification should fully explain the need for acquisition. To provide the required justification for a budget line item(s), click 'Edit' at top of page.




Provide separate justifications for each line item being requested. Address why the requested item is necessary for the success of the proposed project. Indicate who will use the item, how the item will be used and where the item will be housed.





Font Family



Font Size



**B** *I* U



   



  

Path: p

Words:0

# Audit Certification

- Utilizing your most recent audit, complete all required fields in the audit details section
  - If your agency does not have an audit, complete this section utilizing your most recent annual financial statement and attach the statement in lieu of the audit
  - \*Note – If your audit covered a period that ended more than 3 years ago, please provide your most recent financial statement for your agency's last fiscal year as well as the audit
- Please upload your Federal Fund Schedule for the period covering your agency's last fiscal year

## Audit Certification-Cont.

- Utilizing most recent audit, annual financial statements, and/or Schedule of Expenditures of Federal Awards (SEFA) complete audit certification section indicating whether the \$750,000 threshold for federal audit has been met per Part 2 CFR 200.501
  - The \$750,000 federal expenditure threshold is met when an agency has **expended** \$750,000 or more in federal funds during their last fiscal year. This information can be found on the agency's most recent audit, annual financial statements, and/or SEFA

# Audit Certification-Cont.

## Audit Details

*To complete this section select 'Edit' at top of page. After completing required information select 'Save'.*

**Date last audit completed:**  
MM/DD/YYYY\* 01/01/2017 

**Dates covered by last audit:**  
MM/DD/YYYY-MM/DD/YYYY\* 01/01/2015 - 12/31/2016

**Last audit performed by:\*** Audit firm

**Phone number of auditor\*** 573-111-1111

*Upload feature is available outside of the edit mode. Save information in form and then upload previous audit file.*

### Upload Last Audit\*

*Upload feature is available outside of the edit mode. Save information in form and then upload previous audit file.*

### Upload Last Federal Funds Schedule\*

**Date of next audit:**  
MM/DD/YYYY\* 01/01/2019 

**Dates to be covered by next audit:**  
MM/DD/YYYY-MM/DD/YYYY\* 1/01/2017 - 12/31/2018

**Next audit will be performed by:\*** Unknown

# Audit Certification-Cont.

- Complete all required fields certifying who completed the Audit Certification section

## Audit Certification

*We have exceeded the federal expenditure threshold of \$750,000 in federal funds during agency's last fiscal year. We will have our Single Audit or Program Specific Audit completed and will submit the audit report within nine (9) months after the end of the audited fiscal year.*

Threshold Exceeded?\* ☐ Yes ☐ No

## Certified By:

*	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	First Name	Last Name	Title	
*	<input type="text"/>	<input type="text"/>	<input type="text" value="Missouri"/>	<input type="text"/>
	Address	City	State	Zip Code
*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Telephone	Ext.	Cell Phone	E-mail Address

# Audit Certification – Cont.

- Forms can be added after the audit information is saved

**Audit Details**

*To complete this section select 'Edit' at top of page. After completing required information select 'Save'.*



**Date last audit completed:** 01/01/2017  
**MM/DD/YYYY\***

**Dates covered by last audit:** 01/01/2015 - 12/31/2016  
**MM/DD/YYYY-MM/DD/YYYY\***



**Last audit performed by:\*** Audit firm

**Phone number of auditor\*** 573-111-1111

*Upload feature is available outside of the edit mode. Save information in form and then upload previous audit file.*

**Upload Last Audit\***  

*Upload feature is available outside of the edit mode. Save information in form and then upload previous audit file.*

**Upload Last Federal Funds Schedule\***  

**Date of next audit:** 01/01/2019  
**MM/DD/YYYY\***

**Dates to be covered by next audit:** 01/01/2017 - 12/31/2018  
**MM/DD/YYYY-MM/DD/YYYY\***

**Next audit will be performed by:\*** Unknown



# NIMS Compliance

- Answer yes or no to the eleven questions
  - i.e. Does the jurisdiction review and revise plans to incorporate NIMS components, principles, and policies
- If you answered no to any of the questions explain in the narrative box the planned activities to strive towards becoming NIMS compliant

# NIMS Form

## National Incident Management System (NIMS)

1. Has the jurisdiction formally adopted, and/or maintained the adoption of the National Incident Management System as its all-hazards incident management system?

1.\* ☐ Yes ☐ No

2. Does the jurisdiction review and revise plans to incorporate NIMS components, principles, and policies?

2.\* ☐ Yes ☐ No

3. Does the jurisdiction promote and/or develop intrastate mutual aid agreements and assistance agreements throughout the State/Territory?

3.\* ☐ Yes ☐ No

4. Does the jurisdiction promote and/or develop interagency mutual aid agreements and assistance agreements throughout the jurisdiction?

4.\* ☐ Yes ☐ No

5. Have NIMS concepts and principles been incorporated into all appropriate jurisdiction training?

5.\* ☐ Yes ☐ No

6. Has the jurisdiction implemented a training program to ensure that the appropriate emergency/incident response personnel, as identified in the NIMS Training Program, receive NIMS training in accordance with their incident management responsibilities?

6.\* ☐ Yes ☐ No

7. Have NIMS concepts and principles been incorporated into all appropriate jurisdiction exercises?

7.\* ☐ Yes ☐ No

8. Has the jurisdiction inventoried its response assets?

8.\* ☐ Yes ☐ No

9. Has the jurisdiction typed its response assets to conform to Tier 1 [NIMS National Resource Typing Definitions](#)?

9.\* ☐ Yes ☐ No

10. Does the jurisdiction have a process to determine availability of response assets in accordance with [Tier 1 NIMS National Resource Typing Definitions](#)?

10.\* ☐ Yes ☐ No

11. I understand my awarded agency must participate in the statewide Kind & Typing initiative. Including development of a deployable assets list that supports the Kind & Typing initiative.

11.\* ☐

### Planned Activities

If answered **No** to any questions 1-10, please explain planned activities during grant period to strive towards being NIMS compliant.

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# Self Evaluation/Risk Assessment

- This form is to gather information the awarding agency will use to conduct a risk assessment of your agency as required by 2 CFR 200.331 (b)

1. Does your agency have prior experience with the same or a similar grant program? ☐ Yes ☐ No

1.a If prior experience with same grant program are the prior accomplishments listed in the Grant Project Background Form within this application? ☐ Yes ☐ No

2. Are there any findings in the most recent audit that pertain to this or a similar grant program? ☐ Yes ☐ No

2. a. If there are findings in the most recent audit please describe findings.

100 Character Limit

3. Does the agency receive any direct Federal awards? ☐ Yes ☐ No

3.a. Are the direct Federal awards listed in Audit Certification Form within this application? ☐ Yes ☐ No

4. Does the agency have new personnel that will be working on this subaward? ☐ Yes ☐ No


4.a. If yes, who are the new staff and what are their positions?

5. Does the agency have new fiscal or time accounting systems? ☐ Yes ☐ No

5.a. If yes, what system has changed?

Risk Assessment Completed By:

Enter name and title.

Date Risk Assessment Completed:  

# Certified Assurances

## Certified Assurances

*To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:*

### SHSGP Certified Assurances


*I am aware that failure to comply with any of the Certified Assurances could result in funds being withheld until such time that I, the recipient, take appropriate action to rectify the incident(s) of non-compliance.*

**I have read and agree to the terms  
and conditions of the grant.\*** ☐ Yes ☐ No

*Your typed name as the applicant authorized official, in lieu of signature, represents your legal binding acceptance of the terms of this application and your statement of the veracity of the representations made in this application.*

**Title:\***

**Authorized Official Name:\***

**Date:\***  

# Submission

- All forms **must be** marked complete in order to submit the application



Application Forms		Application Details	Submit	Withdraw
Form Name		Complete?	Last Edited	
General Information		✓	03/16/2017	
Contact Information		✓	03/16/2017	
Project Summary		✓	03/21/2017	
Grant Project THIRA		✓	03/16/2017	
Grant Project Background *Complete only if previously funded with OHS grant funds*		✓	03/16/2017	
Project Milestones		✓	03/16/2017	
Deployable Resources *Complete only if funding Deployable Resource*		✓	03/21/2017	
Budget		✓	03/21/2017	
Audit Certification Form		✓	03/21/2017	
NIMS Compliance		✓	03/21/2017	
Self Evaluation Risk Assessment		✓	03/21/2017	
Certified Assurances		✓	03/21/2017	
Other Attachments		✓	03/21/2017	

# Application Reviews/Conflict of Interest

- RHSOC application review/scoring
  - June 1 – July 31, 2017
- Conflict of Interest
  - Will no longer be a separate step
  - Will now be asked on the scoring form at the time of review
    - If there is a conflict, WebGrants will not allow the individual to score the application
- OHS administrative review and regional application revisions
  - August 1–31, 2017

# Application Peer Review Questions

1. Does the project align to a THIRA capability Target(s)?
2. Does the project address filling capability gaps from a THIRA capability target?
3. Does the project create a new deployable homeland security resource?
4. Does the project sustain or enhance a deployable resource?
5. Does the project support a deployable asset that is NIMS Kind and Typed?
6. Does the project build regional and/or statewide collaboration?

# Points of Contact

- If you have any questions regarding the application process, please call or email:
- Jeff Barlow, 573-522-6125 [jeff.barlow@dps.mo.gov](mailto:jeff.barlow@dps.mo.gov)
- Joni McCarter, 573-526-9020 [joni.mccarter@dps.mo.gov](mailto:joni.mccarter@dps.mo.gov)
- Michelle Branson, 573-526-9014 [michelle.branson@dps.mo.gov](mailto:michelle.branson@dps.mo.gov)
- Chelsey Call, 573-526-9140 [chelsey.call@dps.mo.gov](mailto:chelsey.call@dps.mo.gov)