

STATE OF NEVADA MEETING NOTICE AND AGENDA NEVADA COMMISSION ON HOMELAND SECURITY FINANCE COMMITTEE

Name of Organization: Nevada Commission on Homeland Security Finance Committee

(Finance Committee)

Date and Time of Meeting: Tuesday, May 28, 2019 - 8:30 a.m.

Ven	ue Addresses
Carson City Location	Las Vegas Location
Division of Emergency Management	Clark County Fire Administration Building
State Emergency Operations Center	2 nd Floor Conference Room
2478 Fairview Drive	575 E. Flamingo Road
Carson City, NV 89701	Las Vegas, NV 89119

NOTE: Valid photo identification will be required prior to entrance to the Division of Emergency Management building on the Nevada Army National Guard complex in Carson City.

This meeting will be video or teleconferenced between the locations specified above beginning at 8:30 a.m. The Finance Committee may take action on items marked "For Possible Action." Items may be taken out of the order presented on the agenda at the discretion of the chairperson. Items may be combined for consideration by the Finance Committee at the discretion of the chairperson. Items may be pulled or removed from the agenda at any time.

Please Note: Witnesses wishing to have their complete testimony/handouts included in the permanent record of this meeting should provide a written or electronic copy to the Finance Committee administrative support staff. Minutes of the meeting are produced in a summary format and are not verbatim.

- 1. Call to Order and Roll Call Vice-Chair, Sheriff Joseph Lombardo, Las Vegas Metropolitan Police Department (LVMPD).
- 2. Public Comment (Discussion Only) No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. Public comments may be limited to three minutes per person at the discretion of the Chair. Comments will not be restricted based on viewpoint.
- **3. Approval of Minutes** (Discussion/For Possible Action) Vice-Chair, Sheriff Joseph Lombardo, LVMPD. This agenda item will discuss whether or not to approve the minutes of the January 10, 2019, Finance Committee meeting.

- 4. Annual Nomination and Selection of the Finance Committee Chair and Vice-Chair (Discussion/For Possible Action) Vice-Chair, Sheriff Joseph Lombardo, LVMPD. Pursuant to Nevada Revised Statutes (NRS) 239C.170 (1), the Finance Committee members will nominate and vote for a member to serve as the Finance Committee Chair and a second member to serve as the Finance Committee Vice-Chair.
- 5. Request to Reallocate Homeland Security Grant Program (HSGP) Funds (Discussion/For Possible Action) Vice-Chair, Sheriff Joseph Lombardo, LVMPD. This item will address a project change request from the Urban Area Security Initiative (UASI) as follows:
 - **NCHS-153**: City of North Las Vegas Office of Emergency Management (OEM) Mass Casualty Incident Vehicle (MCI) Federal Fiscal Year (FFY) 2017. This is a request to use the vehicle that was purchased with grant funds to be used as OEM Emergency Response and remaining funds of \$21,020.00 to retrofit a different MCI vehicle.
- 6. Review and Update on the Federal Fiscal Year (FFY) 2019 Homeland Security Grant Program (HSGP) Process and Allocations (Discussion Only) Chief Caleb Cage, State Administrative Agent (SAA), Nevada Division of Emergency Management (DEM), and Deputy Chief John Steinbeck, Urban Area Administrator (UAA), Clark County Fire Department (CCFD). The Finance Committee will hear an update on the status of the FFY19 HSGP funding allocations and the process used by the Resilience Commission and the Urban Area Working Group (UAWG) in assembling the proposed FFY19 HSGP grant application.
- 7. Review of Federal Fiscal Year (FFY) 2019 Homeland Security Grant Program (HSGP) State Homeland Security Program (SHSP) and the Urban Area Security Initiative (UASI) Proposal with the Intent to Formulate a Recommendation to the Nevada Commission on Homeland Security (Discussion/For Possible Action) Vice-Chair, Sheriff Joseph Lombardo, LVMPD. The Finance Committee will review and discuss the SHSP and UASI funding recommendations submitted by the Resilience Commission and the Urban Area Working Group (UAWG) for the FFY19 HSGP. Evaluation of all proposals, including additional recommendations of proposal allocations, may be conducted with the intent to vote on a final recommendation for the Nevada Commission on Homeland Security to review. HSGP Project Managers may be required to answer questions pertaining to their proposals. A list of the FFY19 HSGP project submissions is attached in Attachment A.
- 8. Discussion on the Roles and Responsibilities of the Finance Committee (Discussion Only) Chief Caleb Cage, State Administrative Agent (SAA), DEM. The Finance Committee will discuss the current roles and responsibilities assigned to the Finance Committee by the Nevada Commission on Homeland Security in addition to process improvements that may benefit the Homeland Security Grant Program (HSGP) process.

9. Public Comment – (Discussion Only) – No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. Public comments may be limited to three minutes per person at the discretion of the Chair. Comments will not be restricted based on viewpoint.

10. Adjourn – (Discussion/For Possible Action)

This is a public meeting. In conformance with the Nevada Public Meeting Law, this agenda was posted or caused to be posted on or before 9:00 a.m. on May 22, 2019, at the following locations:

Las Vegas Governor's Office, 555 E. Washington Avenue, Las Vegas, NV; Carson City Governor's Office, 101 N. Carson Street, Carson City, NV; NV State Emergency Operations Center, 2478 Fairview Drive, Carson City, NV; Clark County Fire Department, 575 E. Flamingo Road, Las Vegas, NV; and

- Posted to the Nevada Department of Public Safety's Division of Emergency Management and Homeland Security website located at: http://dem.nv.gov/DEM/DEM Public Meeting Information/
- Posted on the state meeting website located at: <u>www.notice.nv.gov</u>

We are pleased to make reasonable accommodations for members of the public who have a disability or access requirements. If special arrangements for the meeting are necessary, or if you need to obtain meeting materials, please notify Karen Hall, Commission Analyst, Division of Emergency Management and Homeland Security, 2478 Fairview Drive, Carson City, Nevada 89701 or (775) 687-0300. 24-hour advance notice is requested. Thank you.

Attachment A

FFY 2019 HSGP PROJECT SUBMISSIONS

STRATEGIC CAPACITY PROJECTS TO BE MAINTAINED

[SHSP-Only, SHSP/UASI Split, AND UASI-Only]

Project ID	Funding Stream	Project Title
А	SHSP	Tahoe Douglas Bomb Squad EOD Robot
В	SHSP	Consolidated Bomb Squad
С	UASI	ARMOR CBRNE Response - Sustainment
D	SHSP	Douglas County CERT Program
Е	SHSP/UASI	Southern Nevada CERT
F	SHSP	NE NV Citizen Corp/CERT
G	SHSP	WCSO Citizen Corps Program
Н	SHSP	Statewide Tribal Citizen Corps Program
J	SHSP	WCSO Cybersecurity Maintain
К	SHSP	Netflow and Intrusion Detection System Monitoring and Analysis
L	UASI	Public Health Analytical FTE
M	SHSP/UASI	Southern Nevada Counter Terrorism Center
N	SHSP	Nevada Threat Analysis Center
0	SHSP	Tribal NIMS
Р	SHSP	Statewide NIMS
Q	SHSP	Statewide Interoperability Coordinator
R	UASI	Emergency Alerting Mass Notification
S	SHSP	Public Information and Warning
T	SHSP	COOP Sustain
U	SHSP	Implementation of Nevada's Statewide Resiliency Strategy
٧	SHSP	Statewide Recovery Plan Implementation Phase 3
W	UASI	Mass Fatality Preparedness and Revise Mass Fatality Management Plan
Х	UASI	Metropolitan Medical Response System (MMRS) - MAINTAIN

FFY 2019 HSGP PROJECT SUBMISSIONS COMPETITIVE PROJECTS

[SHSP-Only, SHSP/UASI Split, AND UASI-Only]

Project ID	Funding Stream	Project Title
- 1	UASI	Cyber Security Services
AA	SHSP	WCSO Northern Nevada Regional Intelligence Center (NNRIC)
BB	UASI	Henderson Multi Use EOC Sustainment - Enterprise Surveillance System
CC	UASI	Southern Nevada Counter Terrorism Center - Fusion Watch
DD	UASI	Radio Site Target Hardening
EE	UASI	LVMPD DOC Dispatch
GG	UASI	LVMPD Wireless Mesh Network and TRV Enhancement
НН	UASI	Bomb Squad Electronic Countermeasures
Ш	SHSP	WCSO Air Purifying Respirators and SCBA
'n	UASI	Metropolitan Medical Response System (MMRS) - NEW
KK	UASI	Las Vegas Urban Area/Clark County Nevada Shelter Project
MM	SHSP	Homeland Security Program Assistant
NN	UASI	Southern Nevada Counter Terrorism Center - Tactical Response Equipment
00	UASI	CBRNE Mobility
PP	UASI	CBRNE Remote Monitor Platform
QQ	UASI	Southern Nevada Incident Management Team
RR	SHSP	Security Skills Professional Development for Information/Cyber Security Professionals
SS	UASI	UNLV Venue Security Enhancements
TT	UASI	Emergency Event Tracking System Maintenance
UU	UASI	Emergency Management Operational Coordination Maintenance
VV	UASI	Clark County Fire MACTAC Training
WW	SHSP/UASI	Statewide NIMS COMPETITIVE
XX	SHSP	NIMS - Communications
YY	SHSP	Stop the Bleed

BBB	UASI [NOT FUNDED]	Henderson Multi Use EOC Sustainment - Enterprise Surveillance System Expansion
CCC	UASI	LVMPD Russell Corridor Camera Project
DDD	UASI [NOT FUNDED]	Southern Nevada Counter Terrorism Center - B
EEE	UASI	Bomb Squad Remote Operations
FFF	UASI	Clark County Rural Fire Stations Repeaters Project
GGG	UASI	Las Vegas Fire Special Operations Communications
ННН	UASI	University Police Services - Interoperable Communication Enhancements
Ш	UASI	CCSD Stop the Bleed
າກ	UASI [NOT FUNDED]	Henderson Regional Hazmat Response Capability Sustainment – HAZMAT Truck Camera
KKK	UASI	LVMPD Tactical Response / MACTAC - B
LLL	UASI [NOT FUNDED]	LVMPD Wireless Mesh Network and TRV Enhancement – B
000	UASI [NOT FUNDED]	Virgin Valley SNACC
PPP	UASI	Mass Fatality Preparedness and Revise Mass Fatality Management Plan [SPLIT OUT FROM PROJ W]

FFY 2019 HSGP PROJECT SUBMISSIONS WITHDRAWN PROJECTS [SHSP-Only AND UASI-Only]

Project ID	Funding Stream	Project Title
Υ	SHSP	Cyber Tool Tracking System
Z	UASI	ARMOR CBRNE Response - New Competitive
LL	SHSP	Electronic Access and Identity Verification System
FF	UASI	LVMPD TASS TRV
AAA	UASI	ARMOR CBRNE Response - New Competitive
MMM	UASI	School-based Emergency Medical Response: Bleeding Control Stations (EMR B-ConS)
NNN	UASI	UNLV Explosive Detecting Canine Units

	Minutes Nevada C	ommission On Homelar	nd Security
	Finance C	Committee Meeting	
	DATE	January 10, 2019	
	TIME	9:00 a.m.	
		Division of Emergency Managem	ent
Attendance	LOCATION	State Emergency Operation Cent	ter
Attendance	LOCATION	2478 Fairview Drive	
		Carson City, Nevada 89701	
	METHOD	Teleconference	
	RECORDER	Karen Hall	
Committee Members	Present	Legislative & Ex-Officio Members, Staff, And Others	Present
Stacey Giomi – Chair	Х	Caleb Cage	Abs
Joseph Lombardo - Vice Chair	X	Samantha Ladich	X
Michael Brown	Х		
Dan Hourihan	Abs	Karen Hall - DEM	Х
Greg Herrera	X	Meagan Werth-Ranson - DEM	Χ
Christopher Lake	X		
Carolyn Levering	Abs		
Erin Lynch	X		
Stan Smith	X		
Bill Welch	X		

1. Call to Order and Roll Call

Chair Stacey Giomi, Nevada Health Centers, called the meeting to order. Meagan Werth-Ranson, Division of Emergency Management and Homeland Security (DEM/HS) performed roll call. Quorum was established for the meeting.

2. Public Comment

Chair Giomi opened discussion for public comment. No comment presented in either venue.

3. Approval of Minutes

Chair Giomi called for a motion to approve the draft minutes from the June 13, 2018, Finance Committee meeting. Motion was presented by Mike Brown, R&R Partners, and a second was provided by Dr. Chris Lake, Nevada Hospital Association. All were in favor with no opposition. Motion passed unanimously.

4. Request to Reallocate Homeland Security Grant Program (HSGP) Funds

Chair Giomi opened discussion on the requests for deobligated funding and project change requests from the State Homeland Security Program (SHSP) and Urban Area Security Initiative (UASI). In the interest of brevity, Chair Giomi confirmed with the Committee members that historical pretext as to how these projects came to the

Finance Committee was waived in lieu of moving straight to individual project discussions. A summary of the agenda discussion is as follows:

- Chair Giomi inquired on whether project representatives would be present at this meeting to field any questions regarding their respective projects. It was confirmed that project representatives were given the opportunity to attend the meeting.
- Stan Smith, Boyd Gaming, inquired if the deobligated Federal Fiscal Year (FFY) 2016 funding requests represented projects that required completion by the grant deadline. Sonja Williams, DEM/HS confirmed that the projects would have to be complete by the end of July 2019.
- NCHS-141: Carson City Sheriff's Office Mobile Operation Center [SHSP] Federal Fiscal Year (FFY) 2016: Request for deobligated funds in the amount of \$16,416.53 for equipment to be used for a Mobile Operation Center.
 - No representatives were present to speak to this project. Chair Giomi expressed that this project did not appear to have any time-related concerns in this off-the-shelf project. Sheriff Lombardo, Las Vegas Metropolitan Police Department (LVMPD) motioned to approve the project, with Mike Brown seconding the motion. All were in favor with no opposition. Motion passed unanimously.
 - NCHS-142: Pyramid Lake Paiute Tribe Community Emergency Response Team (CERT) Equipment [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$27,000.00 for CERT Equipment.
 - No representatives were present to speak to this project. Sheriff Lombardo indicated that he did not see any issues with this project. Chair Giomi spoke to DEM's pre-screening of these projects and the Resilience Commission's review as well. Sheriff Lombardo motioned to approve the project, with Erin Lynch, Nevada Department of Health and Human Services, seconding the motion. All were in favor with no opposition. Motion passed unanimously.
 - NCHS-143: Storey County Community Emergency Response Team (CERT) Equipment [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$4,291.00 for CERT Equipment.
 - No representatives were present to speak to this project. Sheriff Lombardo sought clarification on the type of radios requested. Mike Brown motioned to approve the project, with Sheriff Lombardo seconding the motion. All were in favor with no opposition. Motion passed unanimously.
 - NCHS-144: Tahoe Douglas Bomb Squad Specialized Explosive Breaching Class [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$30,000.00 for a specialized class.
 - Sheriff Lombardo and Chair Giomi presented concern on clarifying what the cost of the class listed represented, with Sonja Williams, DEM/HS, indicating that the \$30,000 cost applied to the class itself with multiagency representation. Bill Welch, Nevada Hospital Association, asked for clarification on whether this cost was for the entire class or student-

- based. Dr. Lake motioned to approve the project, with Mike Brown seconding the motion. All were in favor with no opposition. Motion passed unanimously.
- NCHS-145: Clark County Emergency Operation Plan (EOP) Annex [SHSP] -Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$37,450.00 for development of an EOP annex.
 - Karen Taylor, Clark County Fire Department (CCFD), spoke to the specifics of this project as a result of after-action initiatives following the 1-October event to update the Emergency Operations Plan (EOP). Additional funding was required to update the annexes that go with the EOP. Chair Giomi expressed concern on the time limitations for this project in developing annexes for populated counties in five months. Ms. Taylor indicated that the county can get the bid requirement completed in the time allotted, and Sonja Williams indicated that the Federal deadline is August 31, 2019. DEM could potentially ask for an extension. Additional concern was presented by Chair Giomi on the completion of this project within the timeframe allotted and any repercussions should that not happen. Ms. Williams indicated that deliverables are due by the end of the grant performance period, and if not completed, that could pose a problem. Ms. Williams instructed Ms. Taylor that she would have to include that information with this project. Ms. Taylor indicated that they could work with the specific contractor to ensure completion. Dr. Lake emphasized that projects were vetted by the Resilience Commission, and DEM had addressed many of the concerns presented today. Mike Brown motioned to approve the project as presented, with Dr. Lake seconding the motion. All were in favor with no opposition. Motion passed unanimously.
- NCHS-146: Clark County Develop Threat and Hazard Identification and Risk Assessment (THIRA) [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$93,000.00 for THIRA development funds.
 - Karen Taylor, CCFD indicated that the THIRA for 2018 was completed for Clark County, and this project will be the start for the 2019 THIRA. This is half of the funding that's required for normal costs associated with the THIRA process. Clark County, in joint effort with DEM, will start the 2019 THIRA with this funding, and then the State, using HSGP funding for National Incident Management System (NIMS) projects, will apply for funding to complete the 2019 THIRA. Erin Lynch, Nevada Department of Health and Human Services, inquired if this was a delayed project or rather a project that was starting early. Per Ms. Taylor, this project is starting early based on the new changes to the THIRA process. Ms. Lynch motioned to approve the project as presented, with Chair Giomi seconding the motion. All were in favor with no opposition. Motion passed unanimously.
- Dr. Lake requested the consolidation in discussion of projects NCHS-147, NCHS-148, NCHS-149, and NCHS-152. Chair Giomi indicated he could do that, but would like to hear projects individually and provide a combined motion on the projects. Discussion ensued on those projects in that order.

- NCHS-147: Las Vegas Metropolitan Police Department Tactical Vehicle Event Planning [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$31,814.00 for a special events tactical vehicle.
 - Captain James Seebock, LVMPD, provided the Committee an overview of this project. No questions presented.
- NCHS-148: Las Vegas Metropolitan Police Department Tactical Vehicle, Technical and Surveillance Section (TASS) [SHSP] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$151,900.00 for a tactical response vehicle; and
- NCHS-149: Las Vegas Metropolitan Police Department Tactical Vehicle, Technical and Surveillance Section (TASS) [UASI] - Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$148,075.47 for a tactical response vehicle.
 - Chair Giomi spoke to these two projects being the same with funding source differences only. The projects were addressed together. Captain Seebock spoke to being confident on this project's completion within the allotted time frame. Bids are already established, and the project is just waiting on approval. Rachel Skidmore, LVMPD, spoke to historical activities related to this project and work done with DEM to ensure that this project, and NCHS-149, can be completed within the allowable timelines. Ms. Skidmore indicated that the associated vendors on this project are aware of the expedited timeline for deliverables.
- NCHS-152: Las Vegas Metropolitan Police Department Fusion Center [UASI] Federal Fiscal Year (FFY) 2017. This is a project change request to move \$68,457.65 from the Coplink line item to a new line item for TrapWire software
 - o Captain James Seebock, LVMPD, briefed the Committee on this project and the essential need for this software as an enhancement to the "See Something, Say Something" program. Sheriff Lombardo inquired if this project had been put forth to the Urban Area Working Group (UAWG) with Kelli Anderson, DEM, indicating that it had already been approved. There is concern that with this project, as with the others, that there will be a delay in the process due to the federal shutdown. This project, and all other projects reviewed today, has been preloaded in the federal portal for consideration as to not delay the process once approved. Rachel Skidmore indicated that this project will indeed be heard by the UAWG next Thursday.

Chair Giomi motioned to approve NCHS-147, NCHS-148, NCHS-149, and NCHS-152 as individual projects with the condition that such approval for NCHS-152 is contingent on final approval of the UAWG. Bill Welch seconded the motion and asked for procedural clarification to ensure the projects noted outside of NCHS-152 would not be affected in moving forward should NCHS-152 not pass approval by the UAWG. Chair Giomi indicated his intention was that all projects stand alone and any subsequent disapproval of NCHS-152 would apply to only that project.

- NCHS-150: Las Vegas Fire Rescue Bomb Squad Exploitation Tools [UASI]
 Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$52,889.00 for bomb squad exploitation tools.
 - Chair Giomi presented concerned about the project timeline missing on this project documentation. Kelli Anderson indicated that the information was likely left out due to uncertainty on when the grant would be issued. Ms. Anderson did indicate that based on the shutdown, she can request another 90 days on this grant, and is comfortable that the project can be completed in that timeframe. Karen Taylor said that this is just a replacement of equipment that they currently have due to aging. Mike Brown motioned to approve the project as presented, with Chair Giomi seconding the motion. All were in favor with no opposition. Motion passed unanimously.
- NCHS-151: Clark County Fire Skid Unit [UASI] Federal Fiscal Year (FFY) 2016. This is a request for deobligated funds in the amount of \$7,500.00 for a fire skid unit.
 - Karen Taylor, CCFD, briefed the Committee on the project. Discussion ensued on the functionality of skid units. Sheriff Lombardo motioned to approve the project as presented, with Mike Brown seconding the motion. All were in favor with no opposition. Motion passed unanimously.

5. Public Comment

Chair Giomi opened discussion for public comment. Sheriff Lombardo inquired on the status of the Finance Committee with the recent gubernatorial administration change. Chair Giomi indicated that in speaking with DEM staff, there is no indication currently that the Finance Committee process or makeup will change. Karen Hall, DEM/HS indicated that the codified Finance Committee and Nevada Commission on Homeland Security functions were separate from the newly developed Resilience Commission, and that DEM has been in contact with the Governor's office to establish a meeting soon to address the HSGP process and any necessary Finance Committee recommendations. Samantha Ladich, Senior Deputy Attorney General confirmed that there have been no current changes to the codified structure. Kelli Anderson clarified that there is the potential for more deobligation requests to start coming forth in March 2019, and that DEM is currently working to launch the HSGP process in anticipation of grant guidance release.

6. Adjourn

Chair Giomi called for a motion to adjourn the meeting. A motion to adjourn was presented by Sheriff Lombardo, and a second was provided by Mike Brown. All were in favor with no opposition. Meeting adjourned.

Division of Emergency Management 2478 Fairview Drive Carson City, Nevada 89701 (775) 687-0300 Fax (775) 687-0323



5/1/2019	-
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	roject Change Req	uest		
Subgrantee Agency: City of North Las Ve Address: 4040 Losee Road, No PROJECT NAME: NLV OEM Vehicle an	orth Las Vegas, NV 89030		Change Request #: Funding Year:	2 FY2017
Project Manager: Travis Anderson Fiscal Agent: Virgina Herrera	Phone: 70	e 2-633-1105 2-633-1460 x	Grant Fund Stream: Funding Job #:	UASI 97.067.17-3100
CHANGE REQUESTED				
The following change, amendment, or adjustment to the above	re subgrant, is requested (check one or m	orej:	Note: The subgrantee must p	rovide a written
Project Period Extension Budget Revision Briefly describe the nature and reason for the chance request:	Change in Scope of Work	х	explanation of what the reque why any shift (increase or dec categories is necessary.	stad changes are new

North Las Veges would like to request a change of scope of work for this project to utilize the vehicle that was purchased with this funding to be used for OEM Emergency Response. We supplies purchased from this grant will be available to respond to any incident within the urban area.

CHANGE TO BUDGET BY CATEGORY

Category		Funds Awarded rrent Budget)	Requested Budget	Not Change	Change Request Required Support Documentation (See Instruction Tab)
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Exercise		-		0.00	
Planning				0.00	
Indirect				0.00	
COLUMN TOTALS	5	70,000.00			

Signature - Proje	is request is correct and complete and that all requests are for the pushpioved projects. BOTH SIGNATURES REQUIRED.	5-1-19 Date
oving Agency Use: Signature - File	cal Agent	5/01/19
Approved or Denied:	Reason If Denied:	Date
Approving Agency:		

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HOMELAND SECURITY GRANT PROGRAM (HSGP)
FFY 2017
LINE ITEM DETAIL BUDGET

	Agency	City of North Las Vegas	Project Manager Name & Contact #	Travis Anderson. Emergency Mana 633-1102	Travis Anderson. Emergency Manager (702) 633-1102	Grant Manager Name & Contact#	 Virginia Herrera, Financii (702) 633-1460 Ext 3644 	Virgină Herrer, Financial Accountant II (702) 633-1460 Ext 3644	Countrier II						
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5 35,034.25 \$ 15,871.57 \$ 19,094.18 \$ 70,000.00	22		NIA												
35,034,25 \$ 15,871,57 \$ 19,094,18 \$ 70,000,000	GAN	Organization Sub-Total	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLA	ASEEXPLAINE		TIONS AND DEL DEED	0000	· · ·						10 10	
S 35,034.25 \$ 15,071.57 \$ 19,094.18 \$ 70,000.00									o constitue	TEMS LISTED W	ILL BE COMPLETE	IN THE			
\$ 35,034.25 \$ 15,871.57 \$ 19,094.18 \$ 70,000.00	1	CATEBORY	EQUIPMENT DEFAIL DESCRIPTION	Purchase Type	Province Funding Type	GUANTITY	UNIT COST	TOTAL		Secondary Core Creabilly	AEL Rule	Funding	Total Budget		
\$ 35,004.25 \$ 15,871.57 \$ 19,084.18 \$ 70,000.00		Equipment	DESCRETION DE LOUGHER ACTIVITES MUST BE DETAILED OUT (GENERAL TERAS AND PROPERATION WILL NOT BE ACCEPTED BASED TOON NON-COMPLANCES SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY Must have an ARL												
\$ 35,034.25 \$ 15,071.57 \$ 15,034.18 \$ 71,000.00	80		Ford F150 4x4 Crow; 5.0L VB. Trailor Tow Pkg		Other	1.60	35 034 26				-	T	CONTRA	1	18
\$ 15,871.87 \$ 19,094.18 \$ 70,000.00	g		Vehicle Up-fit for Emerg. Equipment Mounts		Other			1	Г	_	12VE-00-SPEC	T	35,034.25	(503.25)	3 34,531.00
\$ 19,094.18	2		Existing vehicle retroft and MCI vehicle Establishment Up.fr costs		Other		19,011,01	1	1	_	IZVE-00-SPEC		15,871.57	\$ (1,422.57) \$	\$ 14,449.00
\$ 70,000.00		EQUIPMENT			rederat	100	19,084.18				IZVE-00-SPEC		19,094.18	\$ 1,925.82 \$	21,020.00
	IIPME	NT COST NARRA	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	OWINIA WATER	TANK THE DOCUMENT			20,000.00		1			70 000 00		20 1991 00
M.V. OEM will be conducted with venture and with venture and with venture with venture with venture with venture and venture and venture with venture and venture	OF	4 will purchase a ve	thicle from a local vendor through the competitive bidding pro-	Clibs or exhibing go	Verminent operand, A	ILV OEM will then coons	ES NARRATIVE	WILL BE USED T	O ENSURE ITEN	IS LISTED WILL	BE COMPLETED IN	100	200		Lancour

TAINING COST MARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE. PLEASE EXCILANCE TO CONTINUE TO MAY COST MARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE. PLEASE EXCILANCE NATIONAL DESCRIPTION PROVIDENT TOPIAL DESCRIPTION PROVIDEN	CATEGORY TRAIN	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	With the State Tracking	is This Request on the TEPW7	QUANTITY	UNITICOST	Primary Con- Capab ty	Secondary Core Capability	TOTAL	AEL Ref	Total Budget		
TWA TWA TWA TWA THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETE School Back Third. Strategy (NO TRAVEL IN TRAVEL IN TRAVEL IN THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETE Support the SPR, THIRA, Strategy (NO TRAVEL IN TRAVEL IN TRAVEL IN THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETE STRATEGY (NO TRAVEL IN THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETE STRATEGY (NO TRAVEL IN THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETE STRATEGY (NO TRAVEL IN THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE TEMS LISTED WILL BE COMPLETED.	All Training in this the State/UASI Tr. PEMA/DHS Cours Stratogy (NO TRA Course # in Descri	category must be coordinated with lining Officer, Training Must have a #. Must Support SPR, THIRA, PEL IN THIS CATEGORY) add plion			Officer7										W.
TWE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE SERVICE DETAIL DESCRIPTION Funding Shape of the SPR, THIRA, Straingry (NO TRAVEL B) Support the SPR, THIRA, Straingry (NO TRAVEL B) NA RECUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE STATE STATE	NIA						-	-							
EXERCISE DETAIL DESCRIPTION EXERCISE DETAIL DESCRIPTION Purchage With the Second Coordinated with the School Coordinated with the Standard With the Standa	à										100		40		40
EXERCISE DETAIL DESCRIPTION Purchase Type All Exercises must be ISEE compliant and coordinated with the Support Difference on the Telegraphy Core Secondary All Exercises must be ISEE compliant and coordinated with the Strategy (NO PRAYEL IN Type) Conclusion with the Strategy (NO PRAYEL IN This CATEGORY) NA NA INTERECTIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE.	TIVE REGUIRED FOR	EACH LINE ITEM ABOVE - PLEASE I	EXPLAINE IN DET	AIL THE PO	SITIONS AND	DELIVERABLES.	MARRATIVE WIL	L BE USED TO	ENSURE ITEMS	S LISTED WILL BE	COMPLETED IN T	HE GRANT	***		
A ALEANCHES MUST be TSEPE CONTINUED BY THE ALEAN OF THE ALEAN OF TAIL THE POSITIONS AND DELIVERABLES. MARRATIVE WILL BE USED TO ENSURE (TEMS LISTED WILL BE COMPLETE		SE DETAL DESCRIPTION	Purchase Type	Pravious Funding Type	Coordinated with the State Exercise	is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Rof #	Total Budget		
NA DE ATIVE RECUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. HARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE	All Exercises mus coordinated with t Support the SPR, THIS CATEGORY)	to HSEEP compliant and he State/UASI Exercise Officer, Must THIRA, Strategy (NO TRAVEL IN													
D- ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE	NA														
ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETE	۵										,		-		40
	ATIVE REQUIRED FO	EACH LINE ITEM ABOVE - PLEASE !	EXPLAINE IN DE	ALL THE PO	SITIONS AND	DELIVERABLES	NARRATIVE WI	IL BE USED TO	ENSURE ITEMS	S LISTED WILL BE	COMPLETED IN T	70		,	59
													Total Original Budget		
All budgets of desire an email annexus from the financial and/or annexus measurement.	A Company	The state of the s											\$ 70,000.00 \$	3	\$ 70,000.00

I was just recently moved from operations to emergency management and was handed this project. I believe with my operations background there is a much better way to be effective in our deployment of a MCI response/vehicle.

Here is an explanation for the change request.

- 1. New EM vehicle will be assigned to Emergency Manager per original project.
- 2. The existing vehicle that was suppose to be retrofitted will be used as an emergency response vehicle for the office of emergency management.
- 3. We believe a better option for an MCI response vehicle will be an apparatus that we currently have sitting at one of our stations. This vehicle was purchased in 2005 as a command/hazmat response apparatus. We do not have a hazmat team and our City's Mobile Command Center is the vehicle of choice to run incident command out of. As a result, this 2005 vehicle is not being used as we would like.
- 4. Our request is to take the remaining funds, which would have outfitted the existing EM vehicle, and utilize it to up-fit this other vehicle with MCI supplies which will be much more effective, especially after the lessons learned from 1 October.

Thank you for your consideration,

Travis

Travis Anderson
Deputy Fire Chief
North Las Vegas Fire Department
4040 Losee Road
North Las Vegas, Nevada 89030
Office (702) 633-1102 | Fax (702) 399-8730
andersont@cityofnorthlasvegas.com

Change Request for the Nevada Commission on Homeland Security (NCHS) Finance Committee and NCHS Approval Updated 5/16/2019

No de Como de la Como	one O	Su. Santes	Gon None	00 00 00 00 00 00 00 00 00 00 00 00 00	\$ 60 Miles	4 4 40 40 40 40 40 40 40 40 40 40 40 40	100 100 100 100 100 100 100 100 100 100	Osour	Comingo 1 Powissio	9, 110 2000 2000	2 90,00 60 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	80,00,00 80,00,00	Votros through CAWG	New
NCHS - 153	5/1/2019	City of North Las Vegas	9706717-UASI	NLV MCI Vehicle	NCHS - 153 This is a request to use the vehicle that was purchased with grant funds to be used as OEM Emergency Response and remaining funds of \$21,020.00 to retrofit a different MCI vehicle		\$ 21,020.00		Yes				Yes	

FFY19 HSGP - HOMELAND SECURITY	GRANT PROGRAM SPREADSHEET
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	ISGP - H Current as		SECURITY GRANT PROG	RAM SPRE	ADSHEET							RESLIENCE C	COMMISSION					URBAN AREA WOR	KING GROUP 2019			l		
Ranking	Ranking ing	king			HSGP PROJECT TYPE	NCHS FFY16-1	8 FEMA CORE CAPABILITY			SHSP Resubmission Requests	Net Difference between RC #1 Final SHSP and thi Resubmission	SHSP Reduction during RC #1	Additional SHSP Reduction at RC #2	SHSP Updated Request #2 (T+V+W))	nal Allocations for SHSP	, UASI Resubmission Requests	Net Difference between UAWG #1 and	UASI Reduction or Addition at UAWG #2	Additional UASI Reduction at UAWG #2	UASI Updated Request #2 (AC+AE+AF)	Final Allocations for the UASI	TOTAL UPDATED REQUESTS SHSP/UASI		
yject Lett	(Comms)	PROJECT CATEGORY	FFY19 HSGP SUBMITTED PROJECTS	NCHS FFY19 STRATEGIC CAPACITY	SUPPORTING FFY19 STRATEGIC CAPACITY	(IF PROJECT TYI CHOSEN IS OTHER)	PE ASSOCIATED WITH FFY19 STRATEGIC	AGENCY NAME	PROJECT MANAGER(S) PROJECT MANAGER(S) Nano Prof. (NP)	To DEM 4/30/19	(T Minus S)	Enter \$ (If reduction, use	Enter \$ (If reduction, use	RC #2 5/14/19	RC #2 5/14/19	To DEM 4/26/19 [UASI ONLY] ; To DEM 4/30/19 [Resubs]	(AC-AB)	Enter \$ (If reduction, use	Enter \$ (If reduction, use	UAWG #2 5/8/19	UAWG #2 5/8/19	AS OF 5/8/19	SHSP FINAL FFY19 ALLOCATION	UASI FINAL FFY19 FINAL FFY19 PROJECT TOTAL
MAINTAINE	D CAPACIT	Y PROJECTS O	INI Y			J STILLIN	CAPACITY			10 DEM 4/30/19	(Tivilius 3)	minus before amount)	minus before amount)	RC #2 3/14/15	NC #2 3/14/15	[Resubs]	(AC-AB)	minus before amount)	minus before amount)	DAWG #2 Stdr19	UAWG #2 3/d/19	A3 01 3/8/19		
Proj ID OCDC Rank		ASI Maint / New	Project Name	NCHS FFY19 Strateg Capacity	gic Project Type	NCHS FFY16-18 Co	Core Capability Associated with	AGENCY NAME	Project Mgr L.T.S. NP	To DEM 4/30/19	Net Difference	SHSP Reduction RC #2	SHSP Addl Reduct RC #2	SHSP Updated RC #2	SHSP Final	To DEM 4/30/19	Net Difference	UASI Reduction UAWG2	UASI Addl Reduct UAWG2	UASI Updated UAWG #2	UASI Final	Total Proj Alloc	Total SHSP Total	Total UASI Total FFY18 Grand Total
A	NR N	IR MAINTAIN	Tahoe Douglas Bomb Squad EOD Robot	CBRNE	TDBS [CBRN,E]		Interdic & Disrupt	Tahoe Douglas Fire Protection District	Todd Moss and Jim	\$ 200,999.00	\$ -			\$ 200,999.00 \$	200,999.00		\$ -			\$ -	\$ -	\$ 200,999.00	\$ 200,999.00	\$ - \$ 200,999.00
В	NR N	IR MAINTAIN	Consolidated Bomb Squad	CBRNE	Consol Bomb Squad [CBRN,E]		Op Coordination	Washaa County Shariff's	s Robert Bowlin and Noah Boyer	\$ 103,399.00	\$ -			\$ 103,399.00 \$	103,399.00		\$ -			\$ -	\$ -	\$ 103,399.00	\$ 103,399.00	\$ - \$ 103,399.00
С	NR N	IR MAINTAIN	ARMOR CBRNE Response - Sustainment	CBRNE	LV ARMOR [CBRN,E]	Intel & Info Sharing	On-Scene Sec, Prot, LE	LVMPD ARMOR	Roger Haskins		\$ -			\$ - \$	-	\$ 100,000.00	\$ -			\$ 100,000.00	\$ 100,000.00	\$ 100,000.00	\$ -	\$ 100,000.00 \$ 100,000.00
D	NR N	IR MAINTAIN	Douglas County CERT Program	Citizen Corps	Douglas County [Citizen Corps]	Griaring	Op Coordination	Douglas County Emergency Managemen	Tod Carlini and Dave	\$ 20,250.00	\$ -			\$ 20,250.00 \$	20,250.00		\$ -			\$ -	\$ -	\$ 20,250.00	\$ 20,250.00	\$ - \$ 20,250.00
E	NR N	IR MAINTAIN	Southern Nevada CERT	Citizen Corps	CLV [Citizen Corps]	1	Op Coordination	City of Las Vegas	Mary Camin and	\$ 52,759.00	\$ -			\$ 52,759.00 \$	52,759.00	\$ 248,740.00	\$ -			\$ 248,740.00	\$ 248,740.00	\$ 301,499.00	\$ 52,759.00	\$ 248,740.00 \$ 301,499.00
F	NR N	IR MAINTAIN	NE NV Citizen Corp/CERT	Citizen Corps	Elko [Citizen Corps	1	Community Resil	Elko County Sheriff's Office	Carolyn Levering Mary Ann Laffoon and Annette Kerr	\$ 78,975.25	\$ 0.01			\$ 78,975.25 \$	78,975.25		\$ -			\$ -	\$ -	\$ 78,975.25	\$ 78,975.25	\$ - \$ 78,975.25
G	NR N	IR MAINTAIN	WCSO Citizen Corps Program	Citizen Corps	Washoe [Citizen		Community	Washoe County Sheriff's	s Brooke Howard and	\$ 84,135.00	\$ -			\$ 84,135.00 \$	84,135.00		\$ -			\$ -	\$ -	\$ 84,135.00	\$ 84,135.00	
н	NR N		Statewide Tribal Citizen Corps Program	Citizen Corps	Corps] Statewide Tribal	Op Coordinatio	Community	Office State of NV, DPS DEM	Michael Perry Jim Walker and Jackie	\$ 10,579.02				\$ 10,579.02 \$	10,579.02		s -			s -	s -	\$ 10,579.02	\$ 10,579.02	
J 3	NR N	IR MAINTAIN	WCSO Cybersecurity Maintain	Cybersecurity	[Citizen Corps]		Cybersecurity	Washoe County Sheriff's	Conway S Max Brokaw	\$ 42,035.00				\$ 42,035.00 \$	42,035.00		s -			s -	s -	\$ 42,035.00	\$ 42,035.00	
K 1		IR MAINTAIN	Netflow and Intrusion Detection System	Cybersecurity	[Cyber] Threat ID [Cyber]		Cybersecurity	Office Nevada Secretary of	Wayne Thorley and	\$ 89,280.00				\$ 89,280.00 \$	89,280.00		\$ -			\$ -	\$ -	\$ 89,280.00	\$ 89,280.00	
	NR N	IR MAINTAIN	Monitoring and Analysis Public Health Analytical FTE	Fusion Centers		Op Coordinatio	Intel & Info	State Southern Nevada Health	Craig Kozenieski Steve Kramer and Jeff	ψ 00,200.00	s -			s - s	-	\$ 98,276.94	*	\$ (5,000.94)		\$ 93,276.00	\$ 93,276.00			\$ 93,276.00 \$ 93,276.00
м		IR MAINTAIN	Southern Nevada Counter Terrorism Center			Intel & Info	"" Sharing Intel & Info	District Southern Nevada	Quinn Chris Tomaino and	\$ 637,200.00	s .			\$ 637,200.00 \$	637,200.00			(0,000.34)		\$ 601,353.57		\$ 1,238,553.57	\$ 637,200.00	
N.		IR MAINTAIN	Nevada Threat Analysis Center	Fusion Centers		Sharing Intel & Info	Sharing Screen, Search,	Counter Terrorism Center Nevada Department of	er Rachel Skidmore Andrew Rasor	\$ 712,541.72					712,541.72	\$ 001,333.37	¢ -			¢ 001,333.37	\$ -	\$ 712,541.72	\$ 712,541.72	
N		IR MAINTAIN	Tribal NIMS	NIMS		Sharing On Coordination	Detect On Coordination	Investigations									\$ -			5	5 -			
					Tribal [NIMS] State of NV DEM			State of NV, DPS DEM		\$ 92,700.00				\$ 92,700.00 \$	92,700.00		*			5 -	5 -	\$ 92,700.00	\$ 92,700.00	\$ - \$ 92,700.00
Р .		IR MAINTAIN	Statewide NIMS	NIMS	[NIMS]		Operational	State of NV, DPS DEM			\$ (213,202.30))		\$ 501,928.00 \$	501,928.00	5 -	\$ (50,000.00)			T	\$ -	\$ 501,928.00	\$ 501,928.00	
Q		IR MAINTAIN	Statewide Interoperability Coordinator	Op Comms	SWIC [Op Comms]	Op Comms	Comms Public Info &	State of NV, DPS DEM		\$ 35,540.00				\$ 35,540.00 \$	35,540.00		-			*	\$ -	\$ 35,540.00	\$ 35,540.00	\$ - \$ 35,540.00
R		IR MAINTAIN		PI & Warning	EAS [PI&Warn]	Public Info &	Warn Public Info &	City of Las Vegas	Carolyn Levering	\$ -	\$ (22,785.00))		s - s	-	\$ 91,135.00	\$ 22,785.00	\$ (20,000.00)		\$ 71,135.00			\$ -	\$ 71,135.00 \$ 71,135.00
S	NR N		· ·	PI & Warning	EAS [PI&Warn]	Warn	Warn	State of NV, DPS DEM	Gail Powell	\$ 215,700.00					215,700.00		\$ -			\$ -	\$ -	\$ 215,700.00	\$ 215,700.00	
Т		IR MAINTAIN	COOP Sustain Implementation of Nevada's Statewide	Planning	COOP [Planning] State of NV DEM		Op Coordination	Washoe County OEM/H	S Aaron Kenneston Kelli Anderson and	\$ 125,000.00				\$ 125,000.00 \$	125,000.00		\$ -			\$ -	\$ -	\$ 125,000.00	\$ 125,000.00	\$ - \$ 125,000.00
U	NR N	IR MAINTAIN	Resiliency Strategy	Planning	[NIMS] NV Dis Rec Frame		Planning	State of NV, DPS DEM	Sonja Williams Suz Coyote and Kelli	\$ 49,600.00				\$ 49,600.00 \$	49,600.00		\$ -			\$ -	\$ -	\$ 49,600.00	\$ 49,600.00	\$ - \$ 49,600.00
V	NR N	IR MAINTAIN	Statewide Recovery Plan Implementation Phase 3	Recovery	[Recovery]		Planning	State of NV, DPS DEM Clark County Office of	Anderson	\$ 27,250.00	\$ -			\$ 27,250.00 \$	27,250.00		\$ -			\$ -	\$ -	\$ 27,250.00	\$ 27,250.00	\$ - \$ 27,250.00
w	NR N	IR MAINTAIN	Mass Fatality Preparedness and Revise Mas Fatality Management Plan	Recovery	NV Dis Rec Frame [Recovery]	Op Coordinatio	Fatality Mgt Svcs	the Coroner/Medical Examiner	John Fudenberg and David Mills		\$ -			\$ - S	-	\$ 65,000.00	\$ 11,000.00	\$ (11,000.00)		\$ 54,000.00	\$ 54,000.00	\$ 54,000.00	\$ -	\$ 54,000.00 \$ 54,000.00
х	NR N	IR MAINTAIN	Metropolitan Medical Response System (MMRS) - MAINTAIN		OTHER	Op Coordinatio	Mass Care Svcs	and Rescue	Chris Sproule and Craig Cooper		\$ -			\$ - \$	-	\$ 131,285.00				\$ 131,285.00				\$ 131,285.00 \$ 131,285.00
NEW PROJ	ECTS ONLY	Y - (New Project	s, New Enhancements, Past Funded) COMPETITIVE	<u> </u>			BALANCE FOR	MAINTAINED PROJECTS ONLY	\$ 3,079,870.99	\$ (235,987.29) \$ -	\$ -	\$ 3,079,870.99	3,079,870.99	\$ 1,335,790.51	\$ (16,215.00)	\$ (36,000.94)	\$ -	\$ 1,299,789.57	\$ 1,299,789.57	\$ 4,379,660.56	\$ 3,079,870.99	\$ 1,299,789.57 \$ 4,379,660.56
I 1	N		Cyber Security Services	Cybersecurity	Threat ID [Cyber]	Cybersecurity	Interdic & Disrupt	Southern Nevada Health	Jason Frame and Steve Kramer		\$ -			\$ - \$	-	\$ 87,000.00	\$ -			\$ 87,000.00	\$ 87,000.00	\$ 87,000.00	\$ -	\$ 87,000.00 \$ 87,000.00
AA	4 N	IR NEW	WCSO Northern Nevada Regional Intelligence Center (NNRIC)		OTHER	Intel & Info	Intel & Info Sharing	Washoe County Sheriff's Office		\$ 53,358.55	\$ -			\$ 53,358.55 \$	53,358.55		\$ -			\$ -	\$ -	\$ 53,358.55	\$ 53,358.55	\$ - \$ 53,358.55
ВВ	N	IR NEW	Henderson Multi Use EOC Sustainment - Enterprise Surveillance System		OTHER	Sharing Intel & Info	Intel & Info Sharing	City of Henderson	Troy Westover, Ryan Turner		\$ -			\$ - \$		\$ 503,543.00	\$ -			\$ 503,543.00	\$ 503,543.00	\$ 503,543.00	\$ -	\$ 503,543.00 \$ 503,543.00
сс	N	IR NEW	Southern Nevada Counter Terrorism Center Fusion Watch	- Fusion Centers	SNCTC [Fusion]	Sharing Intel & Info	Intel & Info Sharing	Las Vegas Metropolitan Police Department			\$ -			s - s	-	\$ 127,890.52	\$ -			\$ 127,890.52	\$ 127,890.52	\$ 127,890.52	\$ -	\$ 127,890.52 \$ 127,890.52
DD	N	IR NEW	Radio Site Target Hardening		OTHER	Sharing Op Comms	Snaring	Las Vegas Metropolitan	Brad Cupp and Rachel		\$ -			s - s	-	\$ 50,000.00				\$ 50,000.00			\$ -	\$ 50,000.00 \$ 50,000.00
EE	3 N	IR NEW	LVMPD DOC Dispatch		OTHER	Op Comms		Police Department Las Vegas Metropolitan			\$ -			s - s		\$ 14,370.40				\$ 14,370.40			\$ -	
GG	5 N	IR NEW	LVMPD Wireless Mesh Network and TRV		SNCTC [Fusion]	Op Comms		Police Department Las Vegas Metropolitan			\$ -			s - s		\$ 676,400.00	\$ 72,000.00	\$ (72,000.00)		\$ 604,400.00	\$ 604,400.00	\$ 604,400.00	\$ -	\$ 604,400.00 \$ 604,400.00
НН	N	IR NEW	Enhancement Bomb Squad Electronic Countermeasures	CBRNE	LV Bomb Squad		on Op Coordination	Police Department Las Vegas Fire and	Skidmore Richard Brooks and		s -			s - s		\$ 210,510.00		\$ (140,340.00)		\$ 70,170.00			\$ -	\$ 70,170.00 \$ 70,170.00
п	6 N	IR NEW	WCSO Air Purifying Respirators and SCBA		[CBRN,E]	Op Coordinatio		h Washoe County Sheriff's	Steven Poe S Phil Jones	\$ 190,160.00	s -			\$ 190,160.00 \$			\$ -	(***,**********************************			\$ -	\$ 190,160.00	\$ 190,160.00	
		IR NEW	Metropolitan Medical Response System		OTHER		n Mass Care Svcs	Office City of Las Vegas Fire	Chris Sproule and	ψ 100,100.00	s .			\$		\$ 243,500.00				\$ 243,500.00				\$ 243,500.00 \$ 243,500.00
33			(MMRS) - NEW Las Vegas Urban Area/Clark County Nevada	a	OTHER			and Rescue	Craig Cooper		•									\$ 148,175.00			•	
MM		IR NEW	Shelter Project					Clark County OEM	Misty Richardson	04.450.00	6 /010.00			- 3	04.450.00	\$ 148,175.00							e 04.450.00	\$ 148,175.00 \$ 148,175.00
IMIM	5 N	IR NEW	Homeland Security Program Assistant Southern Nevada Counter Terrorism Center	-	OTHER			Washoe County OEM/H Las Vegas Metropolitan		\$ 91,158.00	\$ (842.00)		\$ 91,158.00 \$	91,158.00		\$ -			*	\$ -	\$ 91,158.00	\$ 91,158.00	\$ - \$ 91,158.00
NN	N	IR NEW	Tactical Response Equipment		OTHER	Op Coordinatio		Police Department Las Vegas Fire and	Rachel Skidmore Karl Rosette and Craig		-			s - s	-	\$ 44,943.60				\$ 44,943.60			\$ -	¥ 11,01000
00	N	IR NEW	CBRNE Mobility		OTHER	Op Coordinatio		Rescue Las Vegas Fire and	Cooper Karl Rosette and Craig		> -			» - \$	-	\$ 70,600.00				\$ 70,600.00			a -	\$ 70,600.00 \$ 70,600.00
PP	N	IR NEW	CBRNE Remote Monitor Platform		OTHER	Op Coordinatio		Rescue	Cooper		5 -			\$ - \$	-	\$ 150,000.00				\$ 150,000.00			-	\$ 150,000.00 \$ 150,000.00
QQ	4 N	IR NEW	Southern Nevada Incident Management Tea Security Skills Professional Development for		Educ & Aware	Op Coordinatio		Clark County OEM Nevada Office of	Larry Haydu Robert Dehnhardt and		\$ -			\$ - \$		\$ 174,412.00				\$ 174,412.00				\$ 174,412.00 \$ 174,412.00
RR 2	2 N	IR NEW	Information/Cyber Security Professionals	Cybersecurity	[Cyber]		Cybersecurity	Information Security	Shaun Rahmeyer	\$ 229,140.00	\$ -			\$ 229,140.00 \$	229,140.00		\$ -			\$ -	\$ -	\$ 229,140.00	\$ 229,140.00	\$ - \$ 229,140.00

										Resilience #2 - 05/14/19			UAWG #3 - 5/8/19			
Ranking Silving Ning		NCHS FEY19	HSGP PROJECT TYPE SUPPORTING FFY19	NCHS FFY16-18	FEMA CORE CAPABILITY			SHSP Resubmission Requests	Net Difference between RC #1 Final SHSP and this Resubmission	SHSP Reduction during RC #1 Additional SHSP SHSP Updated Requestion at RC #2 SHSP Updated Requestion at RC #2	t Final Allocations for SHSP UASI Resubmission Requests	Net Difference between UAWG #1 and resubmission	UASI Reduction or Addition at UAWG #2 Additional UASI Reduction at UAWG #2 UASI Updated Request # (AC+AE+AF)	2 Final Allocations for the UASI TOTAL UPDATE REQUESTS SHSP.		
S NR NEV	UNLV Venue Security Enhancements	Planning	OTHER	UE DOO IFOT TWO	ASSOCIATED	UNLV Police Services, Southern Command	Adam Garcia and Richard Dohme	Neton (T). State	\$ -	s -	\$ - \$ 135,967.45 \$	-	\$ 135,967.45	\$ 135,967.45 \$ 135,967	SHSP FINAL FFY19 45 \$ - \$	135,967.45 \$ 135,967.4
T NR NEW-P	Emergency Event Tracking System				Intel & Info	Clark County OEM	Arlene Chapman,		s -	s -	\$ - \$ 60,000.00 \$	s -	\$ 60,000.00	\$ 60,000.00 \$ 60,000	00 \$ - \$	60,000.00 \$ 60,000.0
U NR NEW-P	Emergency Management Operational				Sharing Intel & Info	Clark County OEM	Steve Kramer Arlene Chapman		e		\$ - \$ 72,000.00 \$		\$ 72,000.00			
	Coordination Maintenance				Sharing	Clark County Fire			ş -	3 -						
V NR NEV		Op Comms	01-1		Op Coordination	Department	Jon Wiercinski		\$ -	\$ -	\$ - \$ 17,060.00 \$	-	\$ 17,060.00	\$ 17,060.00 \$ 17,060	.00 \$ - \$	17,060.00 \$ 17,060.
N 3 NR NEW-P	AST Statewide NIMS COMPETITIVE	NIMS	State of NV DEM [NIMS]	Op Coordination	Op Coordination	State of NV, DPS DEM	Kelli Baratti	\$ 166,655.00	\$ 166,655.00	\$ 166,655.0	\$ 166,655.00 \$ 50,000.00 \$	50,000.00	\$ 50,000.00	\$ 50,000.00 \$ 216,655	.00 \$ 166,655.00 \$	50,000.00 \$ 216,655.
1 1 NR NEW-P	AST NIMS - Communications	Not Applicable	State of NV DEM [NIMS]	Op Comms	Operational Comms	State of NV, DPS DEM	Melissa Friend	\$ 12,400.00	\$ 12,400.00	\$ 12,400.0	\$ 12,400.00	-	\$ -	\$ - \$ 12,400	.00 \$ 12,400.00 \$	- \$ 12,400.
NR NEV	Stop the Bleed	Not Applicable	OTHER	Op Coordination	Mass Care Svcs	State of NV, DPS DEM	Jay Giovacchini	\$ 50,882.46		\$ 50,882.4	\$ 50,882.46	-	\$ -	\$ - \$ 50,882	.46 \$ 50,882.46 \$	- \$ 50,882.
					BALANCE FO	OR NEW / NEW-PAST PR	OJECTS [COMPETITIVE	\$ 793,754.01	\$ 178,213.00	\$ - \$ - \$ 793,754.0	\$ 793,754.01 \$ 2,836,371.97	\$ 125,000.00	\$ (212,340.00) \$ - \$ 2,624,031.97	\$ 2,624,031.97 \$ 3,417,785	98 \$ 793,754.01 \$	2,624,031.97 \$ 3,417,785.
ONLY SUBMISSIONS (For ad	ditional UASI dollars made available only) - Henderson Multi Use EOC Sustainment -	Not Applicable	OTHER	Intel & Info	On Coordination	City of Handerson	Troy Westover, Ryan				e e 200 445 00 6	200 445 00	£ (424 FF7 F0) £ (424 FF7 F0) €		- s - s	- s
	Enterprise Surveillance System Expansion			Sharing Intel & Info	Intel & Info	City of Henderson Las Vegas Metropolitan	Turner Brad Cupp and Rachel		\$ -	\$ -	\$ - \$ 269,115.00 \$		\$ (134,557.50) \$ (134,557.50) \$ -	\$ - \$, , , , , , , , , , , , , , , , , , ,	
4 NEW U			SNCTC [Fusion]	Sharing	Sharing	Police Department	Skidmore		\$ -	\$ -	\$ - \$ 195,200.00 \$	\$ 195,200.00	\$ 195,200.00	\$ 195,200.00 \$ 195,200	00 \$ - \$	195,200.00 \$ 195,200.
NF NEW L	ASI Southern Nevada Counter Terrorism Center B	Fusion Centers	SNCTC [Fusion]	Intel & Info Sharing	Intel & Info Sharing	Las Vegas Metropolitan Police Department	Chris Tomaino and Rachel Skidmore		\$ -	\$ -	\$ - \$ 208,060.52 \$	\$ 208,060.52	\$ (208,060.52) \$ -	\$ - \$	- \$ - \$	- \$
5 2 NEW U	ASI Bomb Squad Remote Operations	CBRNE	LV Bomb Squad [CBRN,E]	Op Comms	Op Coordination	Las Vegas Fire and Rescue	Richard Brooks, Steven Poe		\$ -	\$ -	\$ - \$ 71,559.00 \$	71,559.00	\$ 71,559.00	\$ 71,559.00 \$ 71,559	00 \$ - \$	71,559.00 \$ 71,559
1 3 NEW U	Clark County Rural Fire Stations Repeaters Project	Op Comms	OTHER	Op Comms		Clark County Fire Department	Larry Haydu		\$ -	\$ -	\$ - \$ 30,000.00	30,000.00	\$ 30,000.00	\$ 30,000.00 \$ 30,000	.00 \$ - \$	30,000.00 \$ 30,000
4 5 NEW L	Las Vegas Fire Special Operations Communications	CBRNE	OTHER	Op Comms		Las Vegas Fire and Rescue	Karl Rosette, Craig Cooper		\$ -	\$ -	\$ - \$ 53,000.00 \$	53,000.00	\$ 53,000.00	\$ 53,000.00 \$ 53,000	.00 \$ - \$	53,000.00 \$ 53,000
3 7 NEW U	University Police Services - Interoperable Communication Enhancements	Op Comms		Op Comms	Operational Comms	University Police Services, Southern	Adam Garcia, Ryan Dovle		\$ -	\$ -	\$ - \$ 199,873.42 \$	\$ 199,873.42	\$ (140,873.42) \$ 59,000.00	\$ 59,000.00 \$ 59,000	.00 \$ - \$	59,000.00 \$ 59,000
1 NEW U			OTHER	Op Coordination	Mass Care Svcs	Clark County School District PD	Michael Wilson		\$ -	\$ -	\$ - \$ 186,600.00 \$	\$ 186,600.00	\$ 4,669.46 \$ 191,269.46	\$ 191,269.46 \$ 191,269	.46 \$ - \$	191,269.46 \$ 191,269
NF NEW U	Henderson Regional Hazmat Response	CBRNE	OTHER	Op Coordination	Threats &	City of Henderson	Richard Johnson,		٩ .		\$ - \$ 76,226.64 \$	76,226.64	\$ (76,226.64)		- s - s	- «
	Camera		OTHER		Hazards ID	Las Vegas Metropolitan	Ryan Turner Justin VanNest and		•					, , , , , , , , , , , , , , , , , , ,	,	245 450 00 6 245 450
	I VMPD Wireless Mesh Network and TRV	Not Applicable		Op Coordination		Police Department Las Vegas Metropolitan	Rachel Skidmore Brad Cupp and Rachel		5 -	5 -	\$ - \$ 215,150.00 \$		\$ 215,150.00	\$ 215,150.00 \$ 215,150	30 \$ - \$	215,150.00 \$ 215,150
NF NEW U	Enhancement - B	Not Applicable	SNCTC [Fusion]	Op Coordination		Police Department	Skidmore		\$ -	\$ -	\$ - \$ 72,000.00 \$	72,000.00	\$ (72,000.00) \$ -	\$ - \$	- \$ - \$	- \$
2 NF NEW L	ASI Virgin Valley SNACC Mass Fatality Preparedness and Revise Mas	Not Applicable	SWIC [Op Comms]			Mesquite Fire and Rescue Clark County Office of	Spencer Lewis, Sonja Robinson		\$ -	\$ -	\$ - \$ 460,000.00 \$	\$ 460,000.00	\$ (460,000.00)	\$ - \$	- \$ - \$	- \$
8 NEW L		Recovery	NV Dis Rec Frame [Recovery]	Op Coordination	Fatality Mgt Svcs	the Coroner/Medical Examiner	John Fudenberg and David Mills		\$ -	\$ -	\$ - \$ 11,000.00	11,000.00	\$ 11,000.00	\$ 11,000.00 \$ 11,000	.00 \$ - \$	11,000.00 \$ 11,000
						BALANC	CE FOR NEW UASI ONLY		\$ - SHSP Net Difference from	\$ - \$ - \$ -	\$ - \$ 2,047,784.58	IASI Not Difference from		\$ 826,178.46 \$ 826,178	46 \$ - \$	826,178.46 \$ 826,178
								To DEM 4/30/19	Original Sub	SHSP Reduction RC #2 SHSP Addl Reduct RC #2 SHSP Updated RC #		Original Sub	UASI Reduction UAWG2 SHSP AddI Reduct UASI Updated UAWG # UAWG2			
			10	TAL PROJECT S		INED PROJECTS ONLY [\$ 3,873,625.00 \$ 6,219,947.06 \$	\$ 2,156,569.58	\$ (1,335,389.56) \$ (134,557.50) \$ 4,750,000.00 \$ (36,000.94) \$ - \$ 1,299,789.57		00 \$ 3,873,625.00 \$	4,750,000.00 \$ 8,623,625
							/ [From New Section Only						\$ (212,340.00) \$ - \$ 2,624,031.97			
					NEW UASI O	NLY PROJECTS [From re	eopening of UASI Projects E SHSP FUNDING FFY19				\$ 2,047,784.58 \$	\$ 2,047,784.58	\$ (134,557.50) \$ 826,178.46	\$ 826,178.46		
							LE UASI FUNDING FFY19				\$ 4,750,000.00			\$ 4,750,000.00		
				BALA		FT AFTER MAINTAINED F					\$ 793,754.01 \$ 3,414,209.49 \$ - \$ 577,837.52			\$ 3,450,210.43 \$ 826,178.46		
						T AFTER ADDITIONAL U					\$ (1,469,947.06)			\$ -		
RAWN PROJECTS						Nevada Department of										
	AWN Cyber Tool Tracking System ARMOR CBRNE Response - New	Cybersecurity	Threat ID [Cyber]	Cybersecurity Intel & Info	Cybersecurity On-Scene Sec,	Administration		\$ 50,000.00	\$ -	\$ (50,000.00) \$ -	\$ -	-	\$ -	\$ - \$	- \$ - \$	- \$
WITHOR	Competitive	CBRNE	[CBRN.F]	Sharing	Prot. LF	BOR of NSGH obo UNR	Roger Haskins Todd Renwick and	6 000 704 00	\$ -	\$ - \$ - \$	\$ - \$ - \$	-	\$ - \$ - \$ -	\$ -	_	
WITHOR	AWN System LVMPD TASS TRV			Op Coordination Op Comms	Veili	Las Vegas Metropolitan	Brad Cupp and Rachel	\$ 229,734.99	\$ (229,734.99) \$	s - s - s -	\$ - \$ - \$		\$ - \$ - \$ - \$ - \$ - \$	s -		
WITHDR	ARMOR CBRNE Response - New	CBRNE	LV ARMOR	Intel & Info	On-Scene Sec,	Police Department NV DPS/Investigations	Skidmore Patrick Halligan		\$ -	\$	\$ - \$ 400,000.00 \$	400,000.00	\$ (400,000.00)	\$ - \$	- s - s	- \$
WITHDR	Competitive	e: Recovery	[CBRN,E] NV Dis Rec Frame [Recovery]			Division ARMOR Washoe County School District	-		\$ -	\$ -	\$ - \$ 128,798.40 \$		\$ (128,798.40) \$ -	s -		
WITHDR	AWN UNLV Explosive Detecting Canine Units	CBRNE	OTHER			University Police Services, Southern	Adam Garcia, Richard Dohme		\$ -	\$	\$ - \$ 37,000.00	37,000.00	\$ (37,000.00)	s - s	- s - s	- \$
							TOTAL WITHDRAWN F		\$ (229,734.99)		6 0 070 005 00			\$ 4.750,000,00 FFY19 Project		5,223,611.11 \$ 12,113,824
	*Available SHSP Fundin	9		\$ 3,873,625.00	\$		TOTAL REC	\$ 3,873,625.00 \$ 3,873,625.00			\$ 3,873,625.00 \$ 6,219,947.06 \$ 3,873,625.00			Submissions FFY19 SHSP & L	φ 3,073,023.00 φ	4,750,000.00 \$ 8,623,625 4,750,000.00 \$ 8,623,625
	*Available UASI Funding	g		\$ 4,750,000.00							\$ 4,750,000.00		\$ 4,750,000.00	\$ 4,750,000.00 Difference	s - s	- \$ -
	Total Projected FFY19 Requests Minus Ava Reduction Totals)	anable Funding (And						\$ -			\$ - \$ (1,469,947.06)			\$ -	GRAND TOT	AL OF FINAL ALLOCATIONS

FFY19 HSGP VOTING RECORD RESILIENCE COMMISSION 5/14/19

FFY19 HSGP PROJECT ID	FFY19 HSGP Project Name	Caleb Cage					Felix Castagnola Bart Chambers	James Chrisley	Cassandra Darrough	Craig dePolo	Michael Dietrich		Jeanne Freeman		Mike Heidemann			Jeremy Hynds	Kacey KC	Aaron Kenneston		Mary Ann Laffoon		_		ssow ppo1	Shaun Rahmeyer	Andy Rasor	Carlito Rayos	Misty Robinson	Rachel Skidmore	Corey Solferion	Malinda Southard	Chris Tomaino	_	Stephanie Woodard	Points Recd	Inverse Rank
Х	NIMS - Communications	6	4	1 2	2 ′	1		1		5		1		2			1			4	1	1 -	1 1	2	2	1		3	3	4	2	1	1	1	1	1	52	1
RR	Security Skills Professional Development for Information/Cyber Security Professionals	3	6	4	1 3	3		3	2	2	1	3	2	3	2	2	3	5		6	6	6 2	2 5	6	4	2		1	5	2	5	2	2	4	2	2	98	2
WW	Statewide NIMS COMPETITIVE	5	5	3 (6 2	2		4	3	6	4	2	3	1	3	3	2	2		3	2	2 !	5 4	. 3	5	5		4	1	3	6	6	4	2	4	4 1	07	3
AA	WCSO Northern Nevada Regional Intelligence Center (NNRIC)	2	1	2 :	3 4	4		6	5	1	2	4	6	5	5	4	5	3		2	3	4 3	3 3	4	1	6		2	2	5	3	3	5	6	3	3 1	13	4
MM	Homeland Security Program Assistant	1	3	5	5 5	5		2	4	4	5	5	5	6	4	6	4	4		1	5	3 4	1 2	1	6	4		5	4	1	4	5	3	3	5	6 1	26	5
П	WCSO Air Purifying Respirators and SCBA	4	2	6 4	4 6	6		5	6	3	6	6	4	4	6	5	6	6		5	4	5 6	6 6	5	3	3		6	6	6	1	4	6	5	6	5 1	155	6

FFY 2019 HSGP PROJECT SUBMISSIONS STRATEGIC CAPACITY PROJECTS TO BE MAINTAINED [SHSP-Only, SHSP/UASI Split, AND UASI-Only]

Project ID	Funding Stream	Project Title
Α	SHSP	Tahoe Douglas Bomb Squad EOD Robot
В	SHSP	Consolidated Bomb Squad
С	UASI	ARMOR CBRNE Response - Sustainment
D	SHSP	Douglas County CERT Program
E	SHSP/UASI	Southern Nevada CERT
F	SHSP	NE NV Citizen Corp/CERT
G	SHSP	WCSO Citizen Corps Program
Н	SHSP	Statewide Tribal Citizen Corps Program
J	SHSP	WCSO Cybersecurity Maintain
К	SHSP	Netflow and Intrusion Detection System Monitoring and Analysis
L	UASI	Public Health Analytical FTE
М	SHSP/UASI	Southern Nevada Counter Terrorism Center
N	SHSP	Nevada Threat Analysis Center
0	SHSP	Tribal NIMS
Р	SHSP	Statewide NIMS
Q	SHSP	Statewide Interoperability Coordinator
R	UASI	Emergency Alerting Mass Notification
S	SHSP	Public Information and Warning
T	SHSP	COOP Sustain
U	SHSP	Implementation of Nevada's Statewide Resiliency Strategy
V	SHSP	Statewide Recovery Plan Implementation Phase 3
W	UASI	Mass Fatality Preparedness and Revise Mass Fatality Management Plan
Х	UASI	Metropolitan Medical Response System (MMRS) - MAINTAIN

N	evada Homeland Security	y Grai	nt Program (H	HSGP) RESUBMISSION	PROJECT ID:	A
P	roject Proposal for FFY19	HSGI	P Funding De	scription	Date Submitted	4/17/19
1)	PROJECT TITLE:	Tahoe	Douglas Bomb Sq	uad EOD Robot		
2)	PROPOSING/LEAD AGENCY:	Tahoe	Douglas Fire Prote	ection District		
3)	Project Manager Name/Title:	Todd N	Moss BC/Command	der		
	Project Manager Contact Info:	Phone:	(775) 220-9363	Email: Tmoss@tahoefire.com		
4)	Addl Project Manager Name/Title:	Jim Ar	ntti Assistant Chief			
	Addl Project Manager Contact Info:	Phone:	(775) 588-3591	Email: Jantti@tahoefire.com		
5)	Finance/Grant Contact Name/Title:	Carrie	Nolting			
	Finance/Grant Contact Info:	Phone:	(775) 588-3591	Email: cnolting@tahoefire.com		

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Tahoe Douglas Bomb Squad is applying for grant funds to replace one EOD robot, the Andros Mini II (Mini). The Mini purchased with HSGP funds in 2005 and was our first robot. After 14 years and being a front line robot, the Mini has limited capabilities and technology compared to robots seen today. The manufacture has stopped making parts for the Mini and the platform is not supported anymore. The proposed robot has the latest in technology/user interface, faster speeds, automated stair climbing, upgraded batteries, and 360 rotating arm and gripper. These new robotic features will maintain and enhance our response capabilities, while increasing the bomb technicians safety through reliability. We will be housing and using the robot in the Tahoe Douglas Area of Responsibility (AOR). We will use the robot in training and on mutual responses with the Northern Nevada Bomb Technician Task Force (NNBTTF). The NNBTTF consists of Tahoe Douglas Bomb Squad, Consolidated Bomb Squad, and Elko Bomb Squad. The Tahoe Douglas Bomb Squad is identified under the CBRN-E aligned project for FFY19 Strategic Capacity.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: Tahoe Douglas Bomb Squad (CBRN,E)

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: INTERDICTION AND DISRUPTION [Mission Areas - PREV/PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Bomb squads are one of the unique first responders that protect critical infrastructure to include soft targets such as hotels and public places in addition to public transportation. This investment ensures the continued mission reliability in our AOR and the State of Nevada; maintaining statewide interoperability, standardization of practices and equipment to maintain a unified and coordinated operational structure. Most of all, it ensures public safety preparedness by improving the capabilities of the state's bomb squads to prepare, deter, prevent and respond to criminal and terrorist deployment of improvised explosive devices.

۷e۱	vada Homeland Sec	curity Grant Prog	ram (HSGP) RESUBMISS	ION	PROJECT ID:	A
Pro	ject Proposal for Fl	FY19 HSGP Fundi	ing Description		Date Submitted	4/17/19
PRO	JECT TITLE REFERENCE	E: Tahoe Douglas	Bomb Squad EOD Robot			
0)	PROCUREMENT - Indic	ate the method of pr	rocurement associated with thi	is proj	iect:	
	Request for Proposal	Provide a brief explai	nation on your method of procuremer	nt - FIEI	LD IS LIMITED TO VISIE	BLE TEXT BOX
	Sole SourceInternal	This will be a sole sour specific to Tahoe Doug maintenance training.	rce procurement as the Remotec roglas Bomb Squad operations. We h	botic a nave in	and communication pl vested funds into Re	atform is motec
1)		ATION - Describe how,	and by whom, the Proposed Proje		•	scribe
	Bomb Squad Commande	r Todd Moss will coordir	nate the procurement of the equipme	ent.		
FIELD IS LIMITED TO VISIBLE TEXT BOX						
2)	section is for you to tell		the participating agency(s) and juri ing the money for your project - I Political Jurisdiction (City, County, State, etc.)			ncy]
	12(a) Tahoe Douglas Fire	e Protection District	Douglas County	Todd	Moss	
	12 (b)					
	12 (c)					
3)	SUSTAINMENT - Identif	fy any continuing financi	al obligation created by the Project,	and pi	roposed funding solut	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX	Tahoe Douglas Fire Depa budget.	artment will sustain and ı	maintain the equipment purchased b	by this	grant through our Sp	ecial Service
4)	STATEWIDE and/or UA your convenience. This am		ect's funding percentage makeup of S	itatewi	de -vs- UASI is noted b	elow for

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID:
Project Proposal for FFY19 HSGP Funding Description Date Submitted Date Submitted 4/17/19 PROJECT TITLE REFERENCE: Tahoe Douglas Bomb Squad EOD Robot

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Bomb Squad Robot		\$ 200,999.00	\$ 200,999.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

Date Submitted 4/17/19

PROJECT TITLE REFERENCE:

Tahoe Douglas Bomb Squad EOD Robot

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	BOCC Award Acceptance	09/01/19	10/31/19	1
3	Purchase equipment	10/31/19	03/31/20	5
4	Obtain equipment, training, and place into service	06/15/20	09/15/20	3
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO NO Explain below.
	Supports Nevada's bomb squads IED response, detection, and disruption capabilities
e Ze	
ox size	
visible text box	
9/c	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
	By maintaining our operational structure and process which enhances the Nevada Bomb Squads interoperability capabilities as a FEMA Type I Bomb Squad
are limitied to	
are lin	
ູ່ບູ	
and	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO O Explain below.
"a",	This project cannot be reduced without severely reducing the robotic capabilities
Fields	
ĬΪ	

-	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	A
oject Proposal for FFY19	HSGP Funding Description	Date Submitted	4/17/19
OJECT TITLE REFERENCE:	Tahoe Douglas Bomb Squad EOD Robot		
d. Can this project continue w	ithout funding? YES 🔵 NO 💿 Explain below.		
e. Does this project provide a There are only four public safety large scale incidents.	tion District does not have the funds to purchase a robot of	this caliber.	
e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	xplain below.	
There are only four public safety large scale incidents.	bomb squads in Nevada. We have the training and ability	for statewide interope	erability in
THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 T	THIRA Survey. <u>CHOO</u>	SE ONE:
YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) S	urvey
NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR)	A) Survey
ADDITIONAL COMMENTARY limited to the visible text box	l - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field is
The top three Core Capability T	argets for Operational Coordination are:		
	tional and integrated communications among appropriate edd States in accordance with established protocols.	ntities to prevent initia	al or follow-or
Establish and maintain partner coordination.	ership structures among Protection elements to support net	working, planning, an	d
Establish protocols to integral coordination with Federal agence.	te mitigation data elements in support of operations within acies.	all states and territorie	es and in
It is believed that this grant prop	osal is in alignment with this Core Capability.		
state funding to employ this ass current level of training and equ	nd the other members of NNBTTF are all part time bomb sq et. All funding is the responsibility of the host agency. Gra ipment to defend against the emerging threat of foreign and hb squads risk falling behind in technology and interoperab	nt funds are critical to d domestic terrorism.	maintain ou

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	TEM DETAIL I	SUDGET					
	Agency Name	Tahoe Douglas Fire Protection District	Project Manager Name & Contact #	Todd Moss		Grant Manager Name & Contact #	Carrie Noltin	ng 775-588-3	591		A
	IJ TITLE:	Tahoe Douglas Bomb Squad EOD Robo	ot								
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
3								\$ -			+
4								\$ -			+
	Personnel Sub-Total							¢			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9		·							-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			ļ
17 18									-			
19									-			
20									<u> </u>			
21												+
22									-			1
23									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	•			
28						-				
29							-			
30							-			
31							-			
32							-			
33					<u> </u>		-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					i	-	\$			
37							\$ -			
38			•				\$ -			
39			•		•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40	EOD Robot	This is a EOD Robot capable of communications, video survellence, Suspicious package interrogation, and IED defeat	Maintain	SHSP	1.00	200,999.00	\$ 200,999.00	CBRNE - Tahoe Douglas Bomb Squad	Interdiction and Disruption	03OE-07-ROBT Robots	SHSP
41							\$ -				
42							\$ -				
44							\$ - \$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 200,999.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The equipment to be purchased in this line item will be one (1) complete robotic system. The robotic system will consist of the following: VEHICLE CHASIS - 4 BB2590 Batteries with charger,- Internal 1 W COFDM Radio, - 4 Quick-change tracked articulators, - Quick Release 6 degree of freedom arm, - Arm & Articulator, position feedback with presets,- White & IR LED Lighting, - 4 cameras, - Color and IR surveillance camera with PTZ, - Color front drive camera, - Color gripper camera, a Thermal imager assembly for assembly for assembly and the presentation of the companies of the control position of the

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60											\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total			
					Request	\$ 200,	,999.00	

Project A

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Tahoe Douglas Bomb Squad EOD Robot		
Funding Source:	SHSP	SHSP Funding Request:	\$200,999.00
(SHSP, UASI, SHSP/UASI Split)	21121	UASI Funding Request:	\$0

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This project will be a regional, statewide, and national resource. As a FEMA Type I bomb squad in Nevada, we have the capability to respond to multiple EOD or WMD incidents within our area of responsibility. We also have the same or greater capabilities statewide with the Nevada State Bomb Task Force agreement. All public safety bomb squads are trained at the FBI Hazardous Device School in Huntsville, AL. Our contiguous training and accreditation could allow us to respond nationally to large scale incidents, if needed.

How have you collaborated with other agencies to maximize the resource's capacity?

Along with being in the Nevada State Bomb Task Force, we also work closely with our local SWAT teams to provide our robotic platform for hostage/barricaded subject surveillance and communication, remote explosive breaching, and hazardous materials environmental monitoring.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

There is no offset dedicated by Tahoe Douglas Fire Protection for this project, as it is a one-time equipment purchase. Tahoe Douglas Fire Protection District is responsible for costs of continuous training and maintenance for the equipment.

Project A

Is there a plan for increasing offset by your jurisdiction to support this project in the future?				
No. Tahoe Douglas Fire Protection District is currently directing available funds towards a new EOD building over the next 10 years.				
Please provide a five year funding summary for your project.				

Nevada Homeland Security	PROJECT ID:	В			
Project Proposal for FFY19 HSGP Funding Description			Date Submitted	4/24/19	
1) PROJECT TITLE:	Consolidated Bomb Squad				
2) PROPOSING/LEAD AGENCY:	Washoe County Sheriff's Office				
3) Project Manager Name/Title:	Seargeant Robert Bowlin				
Project Manager Contact Info:	Phone: (775) 846-5680	Email: rbowlin@washoecounty.us	S		
4) Addl Project Manager Name/Title:	Deputy Noah Boyer				
Addl Project Manager Contact Info:	Phone: (775) 785-6217	Email: nboyer@washoecounty.u	S		
5) Finance/Grant Contact Name/Title:	Laura Daniels				
Finance/Grant Contact Info:	Phone: (775) 328-3013	Email: Idaniels@washoecounty.u	ıs		

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Consolidated Bomb Squad based in Reno, Nevada covers an area of responsibility of over 27,500 square miles consisting of Humboldt, Pershing, Churchill, Storey and the second most populated county in the state. Washoe County, The Consolidated Bomb Squad is part of a Federal Task Force that responds to all of Northern Nevada to include small county areas in California.

Our project outcome is to maintain and improve our operational effectiveness of dismounted and tactical bomb squad integration by 33 % as well as operate in a CBRNE environment on supplied air or SCBA. Additionally this will address safety concerns by replacing outdated SCBA equipment currently used by the Consolidated Bomb Squad which encompasses Washoe County Sheriff's Office, Reno Police Department, and Sparks Police Department.

This equipment will assist with the protection, mitigation, prosecution, and recovery efforts for citizens, property and the environmental concerns in our service area. The Consolidated Bomb Squad is respectfully requesting funds to purchase an Explosive Ordinance Disposal equipment that will be utilized by all critical stakeholders within the consolidated bomb squad, to include Washoe County Sheriff's Office, Reno Police Department and Sparks Police Department.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

HSGP Project Type Supporting Strategic Capacity: Consolidated Bomb Squad (Washoe, Reno, Sparks) [CBRN,E]

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The EOD equipment would allow the Consolidated Bomb Squad to establish and maintain a unified operational coordination of critical stakeholders, identified as the third priority of NCHS during fiscal year 2019. Due to the significant geographic area of over 27,500 square miles we serve in northern Nevada, operational coordination is paramount to successfully serving both urban and rural communities with our specialized expertise. Due to the typical unknown nature of what type of potential explosive device or package that must be addressed, we require EOD tools and equipment to gather intelligence and to maintain our operational readiness to evaluate and render safe, if necessary an explosive package or device.

a Homeland Secu	ırity Grant Pro	ogram (HSGP) <mark>RESUBMISSI</mark> O	ON PROJECT II	D: B	
Proposal for FF	/19 HSGP Fun	ding Description	Date Submitt	ed 4/24/19	
TITLE REFERENCE:	Consolidated	Bomb Squad			
OCUREMENT - Indica	te the method of	procurement associated with this	project:		
Request for Proposal Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:					
Sole Source	Equipment purchase	es will be completed using the Washoe	County Grants Purch	asing Guidelines	
Internal					
PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what we project will be accomplished.					
					etion is for you to tell u Agency
a) Washoe County She	riffs Office	Washoe County	Robert Bowlin		
0)					
c)					
STAINMENT - Identify	any continuing finar	ncial obligation created by the Project, a	nd proposed funding	solution	
		associated with the equipment will be t Consolidated Bomb Squad.	he responsibility of th	e Washoe County	
r convenience. This amou		roject's funding percentage makeup of Sto eld '15g - PROJECT TOTALS' on Page #3	itewide -vs- UASI is no	ted below for	
	0%	0%		0%	

(SHSP)

(UASI)

Fields are limitied to visible text box size

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: В **Project Proposal for FFY19 HSGP Funding Description** Date Submitted 4/24/19 PROJECT TITLE REFERENCE: Consolidated Bomb Squad

15)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	ific. Identify (LV-UASI	<i>UASI and State</i> State-wide	cost. SubTotal
	Planning efforts include identifying ways to split the cost associated with the equipment between the three agencies. This would include agreements with the technology services departments to update and maintain computer equipment and radios assigned to the Consolidated Bomb Squad.			\$ 0.00
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
box size	The Consolidated Bomb Squad is an accredited squad through U.S. Department of Justice. The Washoe County Sheriff's Office, Reno Police Department and Sparks Police Department have partnered together to create this team. The Sergeant assigned to the squad acts as the supervisor/commander providing leadership and program direction.			\$ 0.00
ext	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Fields are limitied to visible text box size	Acquisition of the following: Three (3) self-contained breathing apparatus, three(3) cylinders and three (3) face masks, one(1) breathing apparatus face shield for EOD Ten Bomb Suit, one (1) pair large trouser expansions, one (1) pair X-Large trouser expansions, one (1) digital radiography system and x-ray source generator, one (1) sweet of IED electronic diagnostic, one (1) tactical disruptor, one (1) tripwire illumination, one (1) hard case and one (1) soft case, one (1) ballistic shield, two (2) rugged tablet/computers to serve as mobile dispatch terminal and x-ray system storage.		\$ 103,399.00	\$ 103,399.00
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			State-wide	SubTotal
Fields are	Provided training to the Bomb Squad members is available through the U.S. Department of Justice, all recertification is free to our agencies to include advanced training offered at the Redstone Arsenal Facility run by the FBI.		State-wide	\$ 0.00
Fields are	Department of Justice, all recertification is free to our agencies to include advanced	LV-UASI	State-wide	
Fields are	Department of Justice, all recertification is free to our agencies to include advanced training offered at the Redstone Arsenal Facility run by the FBI.			\$ 0.00
Fields are	Department of Justice, all recertification is free to our agencies to include advanced training offered at the Redstone Arsenal Facility run by the FBI. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop			\$ 0.00
Fields are	Department of Justice, all recertification is free to our agencies to include advanced training offered at the Redstone Arsenal Facility run by the FBI. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and future trainings needed.	LV-UASI	State-wide	\$ 0.00 SubTotal \$ 0.00
Fields are	Department of Justice, all recertification is free to our agencies to include advanced training offered at the Redstone Arsenal Facility run by the FBI. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and future trainings needed. 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] The Bomb Squad staffs five (5) bomb technicians part time and one (1) full time, and one (1) Federal Bureau of Investigation Special Agent bomb technician (SABT).	LV-UASI	State-wide	\$ 0.00 SubTotal \$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: B

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Consolidated Bomb Squad

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE LIMITED TO TEXT BOX SIZE			То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funds accepted by Washoe County Board of County Commissioners.	09/01/19	12/31/19	3
3	Competitive quote process	01/01/20	03/31/20	3
4	Order equipment	04/01/20	05/30/20	2
5	Build time	06/01/20	09/30/20	3
6	Train on new equipment and implementation	10/01/20	11/01/20	1
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The Consolidated Bomb Squad is responsible for responding to explosive devices and suspicious packages and rendering safe these devices. Explosive devices have been favored by terrorist groups to cause large areas of geographic damage as well as significant death tolls and casualties to further their terrorist ideology. Explosives have been possessed or used in the greater Northern Nevada area by persons associated with sovereign citizens or terrorist groups.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

The requested equipment will be used to maintain the Consolidated Bomb Squad's ability to complete render safe procedures for the citizens of the State of Nevada. This equipment will allow us to maintain our CBRNE capabilities and improve upon our tactical integration and dismounted operations.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The computers can be reduced or removed and other sources of funding will be sought or revisited in future grant opportunities.

Neva	ada I	Homeland Securit	y Grant Program (HSGP) RESUB	MISSION	PROJECT ID:	В
Proj	ect F	Proposal for FFY19	HSGP Funding Description		Date Submitted	4/24/19
PROJ	ECT T	TITLE REFERENCE:	Consolidated Bomb Squad			
	d.	Can this project continue w	ithout funding? YES NO Explain below	w.		
Fields "d" and "e" are limitied to visible text box size			tion and county budget cuts, purchase of equi chase this equipment without the assistance o			ed. Washoe
imitie	e.	Does this project provide a	MEASUREABLE statewide benefit? YES	O NO O E	rplain below.	
Fields "d" and "e" are			member of the Northern Nevada Bomb Squada and assist in RSP and post blast investigation		vith this affiliation we	are able to
10\	TUID	A COMPLETION Disco		n a th a 2010 T	TUDA Comos CUO	SE ONE:
18)	THIK	A COIVIPLETION - Pieas	e indicate the participation level in completi	ng tne 201 8 1	HIKA Survey. <u>CHOO</u>	<u>SE ONE</u> :
		YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identif	ication Risk A	ssessment (THIRA) Si	urvey
		NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Ide	entification Ri	sk Assessment (THIR)	A) Survey
19)		TIONAL COMMENTAR od to the visible text box	l - Please indicate any additional project co	mmentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	IEM DETAIL	BUDGET					
	Agency Name	Washoe County Sheriff's Office	Project Manager Name & Contact #			Grant Manager Name & Contact #	Laura Daniels: 775-3	28-3013			В
	IJ TITLE:	Consolidated Bomb Squad									
		One Budget Per Funding Stream									
		SHSP	SHSP								
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
3				 				\$ -		 	+
4								\$ -			<u> </u>
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		 Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11												J
12									-			
13									-			
14									-			<u> </u>
15									-			<u> </u>
16 17									-			
18												+
19												+
20									-			+
21									-			
22									-			†
23									-			†
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET										

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE), NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	=			
28						-	-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		SCBA Harness and Bottle	Maintain	SHSP	3.00	4,133.00		CBRNE - Consolidated Bomb Squad Washoe Reno Sparks		01AR-01-SCBA SCBA, CBRN	SHSP
41		Bomb Suit Enhancements - Visor and Trouser Expansions	Maintain	SHSP	1.00	4.000.00		CBRNE - Consolidated Bomb Squad Washoe Reno	Operational	02PE-02-CLTH Clothing, Operational and Specialized/Protectiv e Gear IED/EOD	
42		DR X-ray Systems and Source	Maintain	SHSP	1.00	65,000,00	\$ 65,000.00	CBRNE - Consolidated Bomb Squad Washoe Reno Sparks	Operational	02EX-01-XRAP X- Ray Equipment, Portable or Transportable	SHSP
43		Tactical Bomb Tech Response Kit	Maintain	SHSP	1.00	13,000.00		CBRNE - Consolidated Bomb Squad Washoe Reno	Operational	02EX-02-TLPB Tools, Bomb Disabling	SHSP
44		Mobile Dispatch Terminal Computers	Maintain	SHSP	2.00	4,500.00		CBRNE - Consolidated Bomb Squad Washoe Reno	Operational	04AP-01-CADS System, Dispatch, Computer Aided	SHSP
45						.,250.00	\$ -	-,		para	
46	EQUIPMENT Sub-Total				 		\$ 103,399,00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

^{40 -} Three SCBA Harnesses and Three SCBA bottles that are capable of use EOD Ten bomb suit. 41 – One EOD Ten Breathing Apparatus Face Shield. One set of Large Trouser Expansions and one set of X-Large Trouser Expansions.

42 – Digital radiography x-ray system canable of wireless transmission with receiver and x-ray generation source that is canable with DR system. 43 – One tactical homb tech kit that contains IFD electronic diagnostic equipment tactical disruptor. trinwire illuminator, hallistic shield and hard and soft case.

transportation. 44- Two rugged computers compatible with mobile dispatch terminal requirements and ability to operate with x-ray systems.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
50		curement / See 2nd tab to determine whether ect requires EHP Screening									6	
51	your pro	ect requires EriF Screening									\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60			·								\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Bi	udget Total		
					Re	equest	\$ 103,399.00	

Project B

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Consolidated Bomb S	Squad	
Funding Source:	SHSP	SHSP Funding Request:	\$103,399.00
(SHSP, UASI, SHSP/UASI Split)	SHOF	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Consolidated Bomb Squad based in Reno, Nevada covers an area of responsibility of over 27,500 square miles consisting of Humboldt, Pershing, Churchill, Storey and the second most populated county in the state, Washoe County. The Consolidated Bomb Squad is part of a Federal Task Force that responds to all of Northern Nevada to include small county areas in California.

Our project outcome is to maintain and improve our operational effectiveness of dismounted and tactical bomb squad integration by 33 % as well as operate in a CBRNE environment on supplied air or SCBA. Additionally this will address safety concerns by replacing outdated SCBA equipment currently used by the Consolidated Bomb Squad which encompasses Washoe County Sheriff's Office, Reno Police Department, and Sparks Police Department. This equipment will assist with the protection, mitigation, prosecution, and recovery efforts for citizens, property and the environmental concerns in our service area. The Consolidated Bomb Squad is respectfully requesting funds to purchase an Explosive Ordinance Disposal equipment that will be utilized by all critical stakeholders within the consolidated bomb squad, to include Washoe County Sheriff's Office, Reno Police Department and Sparks Police Department.

How have you collaborated with other agencies to maximize the resource's capacity?

Along with being in the Northern Nevada Bomb Squad Taskforce and the Nevada State Bomb Task Force, we also work closely with our local SWAT teams to provide our robotic platform for hostage/barricaded subject surveillance and communication, remote explosive breaching, and hazardous materials environmental monitoring.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

General funds are used for the day to day operation of this division. The elimination of funding would critically damage the capability to respond to incidents, requiring other support entities to assist.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

No. due to recovery costs from local natural disasters, addressing safety issues within the detention facility and the opiate addiction crisis the Consolidated Bomb Squad will not see an increases in funds to support or sustainment

Please provide a five year funding summary for your project.

The Consolidated Bomb Squad's 2019 Homeland Security Grant Program proposal has five key areas / categories of bomb squad equipment. These categories are equipment that was acquired from Homeland Security Grant Program funds previously.

- 1. Self-Contained Breathing Apparatus
 - a. We have broken this into 3 phases 2019,2021, and 2022. This replacement will allow us another 15 years of operation.
- 2. Bomb Suit / Bomb Technician personal protective equipment
 - a. We have broken this into 2 phases 2019 and 2021. This replacement will allow us to operate our bomb suits with SCBAs for the lifespan of the bomb suit (5 year +)
- 3. X- Ray systems
 - a. We have started the replacement process in 2018 with the acquisition of a Scan-x system. The remainder of our x-ray systems replacement are planned for 2024
- 4. Tactical Bomb Technician / Manual entry tools / equipment
 - a. The replacement of Manual entry tools and equipment is ever evolving. We attempt to make these tools last as long as possible but due to wear and tear and unpredictable circumstances we are unable to speculate an anticipated replacement date
- 5. Computers / Research Equipment
 - a. We are attempting to make the replacement of these computers' agency funded in the feature.

2020

Sustain / Maintain: Replacement of first out response vehicle acquired from HSPG in 2006/2007 - \$100,000 to \$150,000

New proposal: Second first out vehicle to support off road, special event and initial response to believed explosive hazard or suspicious or actual explosive devices - \$100,000

Total 2020 request - \$200,000 to \$250,000

2021

Sustain / Maintain: Continued replacement of Self-Contained Breathing Apparatus (phase 2 of 3) - \$17,400

Sustain / Maintain: Replacement of BA visor / Bomb suit SCBA adaptation - \$4000 **New proposal:** Expansion of Tactical Bomb Technician program / equipment - \$3,600

Total 2021 request - \$25,000

2022

Sustain / Maintain: Continued replacement of Self-Contained Breathing Apparatus (phase 3 of 3) - \$10.000

New proposal: Expansion of Tactical Bomb Technician program / equipment (NVG)- \$30,000

Total 2022 request - \$40,000

Project B

2023

Sustain / Maintain: Replacement of the Remote Tech Wolverine Robot platform - \$300,000

Total 2023 request - \$300,000

2024

Sustain / Maintain: Replacement of the open vision platform - \$80,000

Total 2024 request - \$80,000

Total five-year request for the Consolidated Bomb Squad for Sustain / Maintain and New Proposals – \$695,000

The Consolidated Bomb Squad along with the Tahoe Douglas Bomb Squad, Elko Police Department Bomb Squad, and the Las Vegas Fire and Rescue Bomb Squad have come together and are pursuing the formation of the Nevada State Bomb Squad Taskforce. Many goals have been set for the formation of this taskforce, one of the key goals of this group is to work together in developing priorities amongst the bomb squads and supporting those squads that are in higher need of equipment and Homeland Security Grant Program funds

Nev	ada Home	eland Security	HSGP) RESUBMISSION	PROJECT ID:	С					
Proj	ect Propo	sal for FFY19	HSGF	P Funding De	scription	Date Submitted				
1) PR	OJECT TITL	.E:	ARMO	R CBRNE Respor	nse - Sustainment					
2) PR	ROPOSING/L	EAD AGENCY:	LVMPI	O ARMOR						
3) Pro	oject Manage	r Name/Title:								
Pro	oject Manage	r Contact Info:	Email: R5774H@LVMPD.COM							
4) Ad	dl Project Mar	nager Name/Title:								
Ad	dl Project Mana	ager Contact Info:	Phone:		Email:					
5) Fin	ance/Grant C	ontact Name/Title:	Angela	Walker						
Fin	ance/Grant Co	ntact Info:	Phone:	(702) 828-8210	Email: a15306w@lvmpd.com					
6) CLASSIFICATION - Check the primary intention of the Proposed Project:										
	NEW* Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.									

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX**.

The purpose of this grant application is to sustain and maintain the ability to provide operational capability enabling intelligence collection and surveillance capabilities to the ARMOR operators within the Las Vegas Urban Area (LVMPD, HPD, and NLVPD). The technology support requested is specifically designed for operations on events and providing for CBRNE technology, monitoring and exploitation of potentially hazardous devices and structures.

The warranties and high technology equipment employed by the ARMOR unit is utilized with a variety of tools for detection and identification of CBRNE threats compounded with the availability of communications capability to the Incident Commander. By maintaining the efficiency and effectiveness of this capability, ARMOR will maintain the deployment capability to a multi-threat environment to provide real-time intelligence and information to Incident Commanders and support agencies. The warranties will be projected to ensure the technological capability of the Mobile ARIS, SAMpacks, RMX, Gemini, TruDefender and MX908 depending on allocation of funding available and requirements.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: Las Vegas ARMOR [CBRN,E]

If OTHER, please choose FFY16-18 NCHS Priority: INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]

Core Capability aligned with Maintained Project: FORENSICS AND ATTRIBUTION [Mission Area - PREV]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Within the Core Capability of Intelligence and Information Sharing, the description of the capability is to, "Provide timely, accurate, and actionable information resulting from the planning, direction, collection, exploitation, processing, analysis, production, dissemination, evaluation, and feedback of available information concerning threats to the United States, its people, property, or interests; the development, proliferation, or use of WMDs; or any other matter bearing on U.S. national or homeland security...."

The technological ability of the ARMOR Unit to provide the rapid and accurate detection, identification, and informational dissemination in the response, mitigation, and investigation of CBRNE threats and terrorism events is crucial to the effective and efficient response from local, state, and federal entities. As a multi-agency, state-asset, CBRNE unit, ARMOR provides numerous front-line intelligence collection, exploitation, processing, and analysis capabilities in the area of CBRNE response, identification, and mitigation.

◉

ACA	ada Homeland Sec	urity Grant	Program (HSGP) RESUBMISSI	ION P	PROJECT ID:	C
Pro	ject Proposal for FF	Y19 HSGP F	Funding Description	D	ate Submitted	
RO	JECT TITLE REFERENCE	: ARMOR	CBRNE Response - Sustainment			
0)	PROCUREMENT - Indica	ite the method	d of procurement associated with this	is projec	t:	
	Request for Proposal	Provide a brie	f explanation on your method of procuremen	nt - FIELD	IS LIMITED TO VISIL	BLE TEXT BOX:
	Sole Source		s, sustainment, and maintenance of the requipurchases from the vendor currently utilized			
	Internal		re proper operation.	tu by Arri	WOR for the techni	ology utilized
)			e how, and by whom, the Proposed Projec		•	scribe
			e accomplished, identifying who (i.e. staff, contracto	-	•	
			MPD/ARMOR will employ Federal Purchasing Grant Funded purchases set to be enacted			rement of
FIELD IS LIMITED TO VISIBLE TEXT BOX	performance and specifica ARMOR project managers	tions. Bids from . Upon selection	a for the bidding by potential vendors based a competing vendors will be received and even of vendor with most acceptable bid for prisupport services outlined in the proposal in a	valuated icing and	by the LVMPD put performance guic	rchasing and lelines, we wi
)	section is for you to tell to		entify the participating agency(s) and juris receiving the money for your project - If Political Jurisdiction (City, County, State, etc.)	f it's you		ncy]
	12(a) LVMPD		Clark County	Roger F		•
	12(b)					
	12(c)					
)	SUSTAINMENT - Identify	any continuing	financial obligation created by the Project,	and prop	oosed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX	The warranties for the tech of the tanks requested is 1		nas consistently been achieved through UA	ASI fundir	ng. The usable life	expectancie
FIELD IS LIMITED						

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description PROJECT ID: C Date Submitted PROJECT TITLE REFERENCE: ARMOR CBRNE Response - Sustainment

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
The purchase of SCBA tanks represent a phased approach to replacing SCBA tanks in inventory that have reached their end of service. The tanks being replaced have been in service for 15 years and can no longer be hydrostatted to ensure operation. ARMOR has 60 tanks that will all expire from service by 2024. The warranties would provide service, maintenance and calibration for a wide range of CBRNE equipment and ensure effective and efficient operation.	\$ 100,000.00		\$ 100,000.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: C
Date Submitted

PROJECT TITLE REFERENCE:

ARMOR CBRNE Response - Sustainment

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Prepare Bidding criteria and receive responses per Federal Guidelines	09/01/19	12/01/19	3
3	Vendor and Equipment selection based upon response	12/01/19	02/01/20	3
4	Purchasing contracts and securing with vendors	02/01/20	08/01/20	6
5	Receive and Implementation	08/01/20	12/01/20	4
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

As the multi-agency Law Enforcement section for the CBRNE Response of Southern NV, the ARMOR Section responds and investigates all CBRNE related-events that are criminal in nature within Clark County. The capability of the ARMOR section will have a direct correlation upon the ability of CBRNE counter-terrorism operations, investigations, and response in the state of NV.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

As a multi-agency, multi-discipline, state-response entity which supports agencies throughout the Las Vegas Urban Area, the furtherance of quick and accurate CBRNE location, detection, and identification is crucial to the Intelligence and Information Sharing Core Capability of the state. In providing the necessary information and intelligence to the federal, state, local, and private stakeholders, ARMOR can provide timely intelligence and Information sharing of the diverse and technologically-advanced response and identification capability in concerted effort for the mitigation of hazards.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The funds would be utilized to warranty several pieces of equipment and reduction in funding would reduce items covered.

Neva	ada Homeland Security	PROJECT ID:	С	
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	
PROJ	ECT TITLE REFERENCE:	ARMOR CBRNE Response - Sustainment		
	d. Can this project continue w	ithout funding? YES NO 💿 Explain below.		
Fields "d" and "e" are limitied to visible text box size	capability of high-technology AR Homeland Security Grant Progra	onally been achieved through the UASI grant system in ord MOR equipment. The SCBA tanks sought to be replaced warm Phase II. They have reached their end of usable service have sufficient funding to purchase these items.	vere purchased in 20	004 under the
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.	
Fields "d" and "e" are li	investigation, and analysis to the responded to requests for assist available resources of the local a	g-recognized regional asset providing service for response. Southern NV Region, state-wide events, and adjoining are ance from numerous agencies throughout the Southern NV agencies. LVMPD has a history of assisting multiple jurisdict nical support in the area of CBRNE response, investigations	as. In recent years, Region which exceetions throughout the	ARMOR has ed the region as
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018 T	HIRA Survey. CHOC	SE ONE:
	YES - Agency HAS partice	ipated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) S	Gurvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any additional project commentary yo	u feel may be impo	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

LINE ITEM DETAIL BUDGET													
	Agency Name	LVMPD/ARMOR						# Angela Walker 702-828-8210					
	IJ TITLE:	ARMOR CBRNE Response - Sustainme	nt										
		One Budget Per Funding Stream											
		UASI											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -				_	
2								\$ -				 	
4								\$ -				 	
	Personnel Sub-Total							\$ -					
PERSONN	IEL COST NADDATIVE DECLIIDED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	ELIVEDABLES	NADDATIVE WILL	BE LISED TO ENGLIDE ITEMS LIS	STED WILL BE COM	IDI ETED IN THE	CDANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITSIDE THE ITEM	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9		·							-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			ļ
17 18									-			
19									-			
20									<u> </u>			
21												+
22									-			1
23									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-				
29							-			
30							-			
31							-			
32							-			
33			·				-			
34							-			
35					<u> </u>					
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		·				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		SCBA Tanks	Maintain	Other Grant Funds	20.00	1,250.00	\$ 25,000.00		On-scene Security and Protection	01AR-01-SCBA	UASI
41		Warranties	Maintain	UASI			\$ -	CBRNE - LVMPD ARMOR	Intelligence and Information Sharing	21GN-00-MAIN	UASI
42		ARIS			2.00	5,910.00	\$ 11,820.00				
43		Sam Packs			8.00	2,500.00					
44		MX908			3.00	6,500.00					
45 46		Thermo Scientific Chemical identifiers (General)			1.00	23,680.00					-
46						+	\$ -	 			
48							\$ -	<u> </u>			
49							\$ -	t			
	EQUIPMENT Sub-Total						\$ 100,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The purchase of SCBA tanks represent a phased approach to replacing SCBA tanks in inventory that have reached their end of service. The tanks being replaced have been in service for 15 years and can no longer be hydrostatted to ensure operation. ARMOR has 60 tanks that will all expire from service be 2024. The warranties would provide service, maintenance and calibration for a wide range of CBRNE equipment and ensure effective and efficient operation. The warranties shown are projected based upon current available pricing and will require negotiation and prioritization. Adjustments may be made dependednt on need and cost analysis.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60										\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

1							
					Budget Total		
1					Request	\$ 100,000.0	0

Project C

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	FFY 2019 ARMOR CBI	FFY 2019 ARMOR CBRNE Response - Sustainment						
Funding Source:	UASI	SHSP Funding Request:						
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	\$100,000					

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The ARMOR Task Force is a multiple discipline, multiple agency, task force that provides emergency CBRNE responses to all of Southern Nevada. ARMOR works with all federal, state, and local emergency services agencies throughout Southern Nevada.

How have you collaborated with other agencies to maximize the resource's capacity?

The ARMOR Task Force has routine and regular communication with the Las Vegas Fire Rescue CBRNE Battalion Chief, Henderson Fire Department Haz-Mat, the Las Vegas Fire Rescue Bomb Squad Commander, and other regional agencies involved in WMD/CBRNE events to discuss upcoming grant related projects. These communications have the goal of best utilizing upcoming grant monies to coincide with projects that will best serve our collaborative CBRNE mission throughout Southern Nevada. Additionally, ARMOR has been in contact with the State of Nevada Department of Investigations and the City of Henderson as they are active members of the task force to pre-plan for financial funding of potential upcoming projects.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The member agencies of the ARMOR Section provide manpower, training, equipment, and other resources to support the WMD/CBRNE mission. The financial responsibility for the high technology capabilities involved in WMD/CBRNE detection, identification, and mitigation in comparison to the limited personnel of the task force requires the assistance of community grant funding.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

The ARMOR Task Force continues to seek out additional agencies to provide both and personnel, equipment, and funding to complete the WMD/CBRNE mission for the Las Vegas Urban Area.

Project C

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Sustainment: An estimates \$75,000 - \$100,000 annually for the sustainment of CBRNE equipment warranties. In order to properly maintain and calibrate our inventory of CBRNE related electronic testing equipment warranties are necessary to fund this required maintenance. This equipment requires regular manufacture updates and repairs. This work is necessary as this equipment and its service history could be called into question during court proceedings on criminal CBRNE cases. The efficiency and effectiveness of the equipment directly correlates to the ability of ARMOR to fulfill their mission.

Second Sustainment: \$25,000 per year for the next two years for air tanks. ARMOR is in the process of purchasing Avon self-contained breathing apparatus (SCBA) air tanks. Air tanks are used for down-range CBRNE operations when dangerous chemicals or low oxygen levels will put ARMOR operators at risk of injury or death. The usable service life of the tanks is fifteen years. The current, grant funded, tanks will expire soon. We are utilizing a phased approach to replace the expiring tanks. The phased approach will ensure that we are not reliant on a single fiscal year purchase. This will help other UASI applicants by distributing the financial burden over a three year period and reduce the impact if funding is not achieved on any given year. The ARMOR PPE (Personal Protective Equipment) program supports agencies and responders throughout the Las Vegas Urban Area.

Ν	evada Homeland Security	/ Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	D					
P	roject Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19					
1)	PROJECT TITLE:	Douglas County CERT P	rogram							
2)	PROPOSING/LEAD AGENCY:	Douglas County Emerger	ncy Management							
3)	Project Manager Name/Title:	Tod F. Carlini, District Chief/Douglas County Emergency Manager								
	Project Manager Contact Info:	Phone: (775) 782-9048	hone: (775) 782-9048 Email: tcarlini@eastforkfire.org							
4)	Addl Project Manager Name/Title:	Dave Fogerson, Deputy 0	Chief/Deputy Emergency Manage	r						
	Addl Project Manager Contact Info:	Phone: (775) 782-9096	Email: dfogerson@eastforkfire.or	rg						
5)	Finance/Grant Contact Name/Title:	Joseph Langkilde, CPA, [District Accountant							
	Finance/Grant Contact Info:	Email: jlangkilde@eastforkfire.or	g							

6) **CLASSIFICATION** - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW MUCH [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Douglas County Emergency Management and our LEPC desires to maintain our Citizen Corp CERT Program serving our community. Our CERT consists of one coordinator, 4 team leaders and 76 members. These members respond to assist emergency management with sheltering, mass care, EOC set up, public education to improve community resiliency and emergency incident rehabilitation for our public safety responders. Our community covers over 700 square miles for our direct services. Some of these areas, including Lake Tahoe and Southern Douglas County, are areas of isolation during our major emergencies. Our CERT program provides additional assistance to public safety responders in these areas of isolation. Through arrangements with Quad County partners, our CERT is available for emergency incident rehab in all jurisdictions.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: CITIZEN CORPS HSGP Project Type Supporting Strategic Capacity: Douglas County [CITIZEN CORP] If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project aligns with the strategic capacity of operational coordination by working within a unified and coordinated operational structure and process that appropriately integrated all critical stakeholders, local volunteer programs, community organizations and businesses, supporting the execution of core capabilities in all five phases of emergency management. This project increases community resilience by increasing the numbers of community members, businesses and organizations within Douglas County, the surrounding counties and the State of Nevada.

ROJE (a) P (c) P (Request for Proposal Sole Source Internal PROJECT IMPLEMENTA In rough order the process by who Douglas County Emergen provisions of training to Comanagement, and rehabil CERT coordinator. Addition to a collaboration effort be a collaboration effort be section is for you to tell	Provide a brief explana Procurements for this p TION - Describe how, and the project will be accompled to Management, working ERT volunteers. Program itation of emergency services and the project will be accompled to the project w	•	ct will be implemented. Exercise or expension of the control of th	Describe coordinate the ergency shelte he part-time sed. This will cowards. [This ency]
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FIELD IS LIMITED TO VISIBLE TEXT BOX 12	provisions of training to C management, and rehabil CERT coordinator. Addition be a collaboration effort be a collaboratio	ERT volunteers. Program itation of emergency servonally, these capacities we tween local stakeholders are the control of the c	development and training for greatices personnel will be accomplished ill be included in the Douglas Courts, response organizations, the school schoo	ater responsibilities for emed with current staff and the ty EOP and will be exercited district and LEPC. Sdiction(s) proposed for a fit's you, put in your against a staff and the type of type	ergency shelte ne part-time sed. This will awards. [This ency]
12 12	section is for you to tell	us WHO will be receivin	ng the money for your project - I	f it's you, put in your ago	ency]
		nergency Management	Douglas County Nevada	Tod F Carlini, Douglas C Emergency Manager	ounty
	.2(b)				
12					
	.2(c)				
3) S	SUSTAINMENT - Identify	any continuing financial	obligation created by the Project,	and proposed funding sol	ution
ğ e		unding comes from a con	ruitment and retention efforts, inclubination of public/private sources		
4) S			rt's funding norsentage makeum of S	tatewide -vs- UASI is noted	below for

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: D

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Douglas County CERT Program

15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
Provide funding for approved printed materials, advertising and promotional items. Sub-grantee understands all printed materials must be pre-approved from DEM.		\$ 1,000.00	\$ 1,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
Maintenance and administrative costs incurred in direct support of grant.		\$ 500.00	\$ 500.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
Provided funding for equipment and supplies for current and new CERT members and CERT operations. This includes the individual CERT kits for new members (supplies) and a portable generator (equipment) for our South County evacuation/shelter trailer that is managed by CERT.		\$ 4,350.00	\$ 4,350.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
, ·			
Provide funding for the contract engagement of a part-time CERT Coordinator at a cost of \$1000.00 per month. Provide funding for the annual cost of current and new CERT members workers compensation insurance and background checks for new members.		\$ 14,400.00	\$ 14,400.0
Provide funding for the contract engagement of a part-time CERT Coordinator at a cost of \$1000.00 per month. Provide funding for the annual cost of current and new CERT members workers	LV-UASI	\$ 14,400.00 State-wide	\$ 14,400.0

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: D

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Douglas County CERT Program

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Renew CERT Coordinator contract	09/01/20	08/31/21	12
3	Purchase and or development recruitment and promotional materials	09/01/20	08/31/22	24
4	Conduct specialized CERT training which reinforces mission essentials, CERT functions and assigned responsibilities	09/01/22	08/31/22	24
5	CPR/First Aid recertification training for current members and certification for new members	09/01/20	08/31/22	24
6	Purchase CERT supplies for current and new members	09/01/20	08/31/22	24
7	Purchase approved supplies for current and new members	09/01/20	08/31/22	24
8	Purchase approved equipment for South County evacuation/shelter trailer	09/01/20	08/31/22	24
9	Conduct Douglas County CERT Team EOC Support Training	09/01/20	08/31/22	24
10	Conduct Douglas County Emergency Preparedness Employee Training	09/01/20	08/31/22	24
11	Expand CERT into EOP	09/01/20	08/31/22	24
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

CERT in Douglas County has evolved into an indispensable resource during any type of emergency. While the fundamental purpose of CERT was to address the first 72 hours of a natural disaster, the skills and abilities in the prescribed curriculum can be applied to acts of terrorism. The nexus is very clear. Acts of terrorism generally are designed to impact mass populations, generally assembled in controlled spaces and venues. In many cases the impacts overwhelm the initial responders. CERT can easily fill the gap for that period of time until appropriate resources are assembled. Acts of terrorism are also designed to isolate certain populations or to disrupt critical infrastructure. With CERT being able to exist in multiple locations, resources are better supported should a disruption in services and infrastructure be impact by a terrorist act.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes it does, in particular OPERATIONAL COORDINATION. The deployment of CERT assets is critical in many of our rural locations. CERT has become an important asset in as much as we now include their dispatch in our CAD based system for multiple alarm fire events, natural disasters, and events of terrorism. We are integrating their role on a continued basis in the Douglas County Emergency Operation Plan and many of our individual response guides, including active shooter situations.

c. Can this project funding request be reduced? Is it scaleable? YES NO • Explain below.

The program budget has been strategically designed at its basic support levels to maximize available funding economies.

Vev	ada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	D							
		HSGP Funding Description	Date Submitted	4/25/19							
ROJ	ECT TITLE REFERENCE:	Douglas County CERT Program									
	d. Can this project continue w	thout funding? YES NO 💿 Explain below.									
Fields "d" and "e" are limitied to visible text box size											
L 8)	THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:										
	YES - Agency HAS partici	pated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) So	urvey							
	NO - Agency has NOT pa	rticipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR.	A) Survey							

ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is 19) limited to the visible text box

CERT is an important program. Beyond the obvious services it can and does provide, CERT affords many member of our community, in particular our older Americans and veterans, an opportunity to participate int he security and safety of our county and country.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	Agency Name	Douglas County Emergency Managemen	Project Manager Name & Contact #	Dave Fogers 775/782-909	son 96	Grant Manager Name & Contact #	Tod Carlini 775/782-904	8				D
	IJ TITLE:	Douglas County CERT Program										
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.		,								
1		Contracted part-time CERT Coordinator for 12 months	Maintain	SHSP	1000	100%	12		Citizen Corps - Douglas	Operational Coordination		SHSP
2		·						\$ - \$ -				
4								\$ -				+
	Personnel Sub-Total							\$ 12,000.00			BURGUASED OUTS	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5		Workers compensation insuranc for current and new members and background checks for new members.	Maintain	SHSP	80	100%		\$ 2,400.00		Operational Coordination	Personnel
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ 2,400.00			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			4
17									-			
18									-			+
19									-			+
20									-			
21					-				-			
22									-			
23	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED DUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Approved print advertising	Maintain	SHSP	1	500.00	500.00	Citizen Corps - Douglas	Operational Coordination	SHSP
28		Promotional items	Maintain	SHSP	1.00	500.00	500.00	Citizen Corps - Douglas	Operational Coordination	SHSP
29		M&A	Maintain		1.00	500.00	\$ 500.00	Citizen Corps - Douglas	Operational Coordination	SHSP
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ 1,500.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36										
37			•		·		\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether lect requires EHP Screening									
40		Medical and general CERT supplies	Maintain	SHSP	1.00	3,846.24	\$ 3,846.24	Citizen Corps - Douglas	Operational Coordination	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
41		Portable Generator	Maintain	SHSP	1.00	503.76	\$ 503.76	Citizen Corps - Douglas	Operational Coordination	10GE-00-GENR Generators	SHSP
42							\$ -				
43							\$ -				
44 45				 			\$ -	 			
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 4,350.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			·								\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

						Budget Total		
		/				Request	\$ 20.250.00	

Project D

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19	Project Name:	Douglas County CERT	Program	
Fundir	ng Source:	SHSP	SHSP Funding Request:	
	JASI, SHSP/UASI Split)	SHSP	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This project is a regional resource due to its alignment with the strategic capacity of operational coordination by working within a unified and coordinated operational structure and process that appropriately integrated all critical stakeholders, local volunteer programs, community organizations and businesses, supporting the execution of core capabilities in all five phases of emergency management. This project increases community resilience by increasing the numbers of community members, businesses and organizations within Douglas County, the surrounding counties and the State of Nevada.

This program is completely supported by and is solely dependent on the HSGP funding.

How have you collaborated with other agencies to maximize the resource's capacity?

Douglas County Emergency Management, working through its agent, the East Fork Fire Protection District, will coordinate the provisions of training to CERT volunteers. Program development and training for greater responsibilities for emergency shelter management, and rehabilitation of emergency services personnel will be accomplished with current staff and the part-time CERT coordinator. Additionally, these capacities will be included in the Douglas County EOP and will be exercised. This will be a collaboration effort between local stakeholders, response organizations, the school district and LEPC.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

We provide administrative and operational support to the program through grant oversight and emergency management collaboration with our collective internal, external and regional partners.

Project D

Is there a plan for increasing offset by your jurisdiction to support this project in the future?
At this time we do not have a plan to provide offset to this project.
Please provide a five year funding summary for your project.
Douglas County Emergency Management wishes to retain SHSP funding for the sustainment of this Citizen
Crops program to provide resiliency to our community.

Project D

Douglas County Emergency Management wishes to retain SHSP funding for the sustainment of this Citizen Crops program to provide resiliency to our community.	
crops program to provide resiliency to our community.	

Nevada Homeland Securit	Nevada Homeland Security Grant Program (HSGP) RESUBN							
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19				
1) PROJECT TITLE:	Southern Nevada Comm	unity Emergency Response Team	n (CERT)					
2) PROPOSING/LEAD AGENCY:	City of Las Vegas							
3) Project Manager Name/Title:	Project Manager Name/Title: Mary Camin, CERT Program Coordinator							
Project Manager Contact Info:	Phone: (702) 229-0076 Email: mcamin@lasvegasnevada.gov							
4) Addl Project Manager Name/Title:	Carolyn Levering, Emerg	Carolyn Levering, Emergency Manager, City of Las Vegas						
Addl Project Manager Contact Info:	Phone: (702) 229-0313	Email: clevering@lasvegasneva	da.gov					
5) Finance/Grant Contact Name/Title:	Priscilla Wdowiak, Grant	Manager						
Finance/Grant Contact Info:	Phone: (702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov					
6) CLASSIFICATION - Check the primary intention of the Proposed Project:								
NEW* Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.								

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

Train and equip 800 individuals throughout Southern Nevada in the Community Emergency Response Team Course. Support all emergency management offices in Southern Nevada by maintaining a database of all course participants, segregated by community. Recruit volunteers for first response department drills and exercises for use by the requesting agency. Maintain Southern Nevada emergency preparedness application for continued presence in the community.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

City of Las Vegas [CITIZEN CORPS]

Please select the appropriate FY16-18 NCHS priority aligned with your project

Core Capability aligned with Maintained Project:

OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Train 800 individuals from the Southern Nevada area (Clark, Lincoln and Nye Counties) will be trained in the Community Emergency Response Team (CERT) course. Participants completing the training (with their consent) will be entered into the "CERT DATA BASE" and recruited for response to incidents and in the support of exercises and drills conducted by Public Safety, Public Health Agencies, and other partners. Course participants may also be recruited to participate in public events, such as fairs, parades and public information activities.

Nev	ada Homeland Sec	urity Grant Pro	gram (HSGP) RESUBMISSI	ON	PROJECT ID:	Е						
Pro	ject Proposal for FF	Y19 HSGP Fund	ding Description		Date Submitted	4/25/19						
PRO.	JECT TITLE REFERENCE	: Southern Neva	ada Community Emergency Response	e Tean	n (CERT)							
10)	PROCUREMENT - Indica	ate the method of p	procurement associated with this	s proj	ect:							
	Request for Proposal	Provide a brief expl	anation on your method of procuremen	t - FIEL	.D IS LIMITED TO VISIE	BLE TEXT BOX:						
	Sole SourceInternal		nased through a Request for Proposal City of Las Vegas Purchasing Departn		en, fair and competit	tive bidding						
11)	PROJECT IMPLEMENTA	TION - Describe how	, and by whom, the Proposed Projec	ct will	<i>be implemented.</i> De	scribe						
	in rough order the process by wh	ich the project will be acco	mplished, identifying who (i.e. staff, contracto	r, or ?)	will perform what work							
ВОХ	courses and schedule the Reports, and Program Cha	requisite instructors. I ange Requests. Resp	rs and secure course locations, then p Perform public relations activities to prond to public inquiries regarding the pasport needed course supplies, set up	omote rograr	e CERT. Do Quarterly n.	y Progress						
TEXT	breakdown classrooms.	(mondotoro) wiiii rrai	open medada edalee eapphee, eet ap	olacol	come, todom and clac	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
IBLE	Program Support Staff will	I: Arrange for purchas	ing of supplies, arranging travel and h	elp wi	th general program a	dministration.						
FIELD IS LIMITED TO VISIBLE TEXT BOX	Financial Analyst will: Monitor grant spending and complete quarterly financial reports, and perform close out financial accounting at the end of the reporting period.											
12)	section is for you to tell		the participating agency(s) and jurisiving the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's y		ncy]						
	12(a) City of Las Vegas		City of Las Vegas	Mary	Camin/Carolyn Leve	ring						
	12 (b)											
	12 (c)											
13)	SUSTAINMENT - Identify	y any continuing finan	cial obligation created by the Project,	and pr	roposed funding solu	tion						
FIELD IS LIMITED TO VISIBLE TEXT BOX	There are no continuing continuin		ogram. This program is 100% depend	lent or	n this funding stream	and absent						
14)			oject's funding percentage makeup of St	tatewi	de -vs- UASI is noted b	elow for						
	your convenience. This amo	\neg	ld '15g - PROJECT TOTALS' on Page #3									

Urban Area

(UASI)

Statewide (SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

Ε Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Community Emergency Response Team (CERT)

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Planning:Quick Series Terrorism Application provides a quick guide to terrorism and other hazards. Conference registration fees and membership to the International Association of Emergency Managers, and NV Emergency Preparedness Association. for professional development. Conference fees to the National CERT conference and NV Emergency Preparedness Association. Coordinator cell phone used to administer course. Provides manuals to students, course supplies, backpacks. Travel:To pay for teaching CERT classes in Panaca, Pahrump, Laughlin. Attend IAEM to enhance the emergency management skills and knowledge of the Program Coordinator. EMI-To enhance facilitator-training skills.	\$ 73,675.00	\$ 11,151.00	\$ 84,826.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
None	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
None	\$ 0.00	\$ 0.00	\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Funding provides certified CERT instructor for a Spanish language CERT class and qualified translators for a Deaf CERT class and other printed materials.	\$ 4,600.00	\$ 0.00	\$ 4,600.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Refresh and enhance critical CERT skills stressing operational coordination and community resilience through a full scale exercise. This category provides funding for one exercise:however supplies and food are broken out on two separate lines.		State-wide \$ 0.00	\$2,600.00
Refresh and enhance critical CERT skills stressing operational coordination and community resilience through a full scale exercise. This category provides funding for			
Refresh and enhance critical CERT skills stressing operational coordination and community resilience through a full scale exercise. This category provides funding for one exercise:however supplies and food are broken out on two separate lines.	\$ 2,600.00	\$ 0.00	\$ 2,600.00 SubTotal \$ 209,473.00
Refresh and enhance critical CERT skills stressing operational coordination and community resilience through a full scale exercise. This category provides funding for one exercise:however supplies and food are broken out on two separate lines. 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] Personnel are involved in the support and delivery of the Community Emergency Response Team courses. The support staff is an hourly position and provides clerical services. Course Facilitators deliver training, set up classroom, and provide input for course modification and updates. The Program Coordinator does budget and quarterly reports, schedules courses, manages public relations and speaks to	\$ 2,600.00 LV-UASI	\$ 0.00 State-wide	\$ 2,600.00 SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: E

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Community Emergency Response Team (CERT)

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Secure and confirm training facilities.	09/02/19	01/01/21	16
3	Schedule courses and facilitators.	09/02/19	03/01/21	18
4	Purchase/procure course materials.	09/02/19	03/01/21	18
5	Train participants	09/02/19	03/01/21	18
6	Comply with required reporting requirements.	09/02/19	03/01/21	18
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Yes, the CERT curriculum teaches specific actions for CERT members to take and what to avoid if they suspect a terrorist attack. Unit 8: Terrorism and CERT includes: What is Terrorism? Terrorist Targets/Terrorist Weapons/ CBRNE attacks/Preparing at Home, Work and in your Neighborhood/ CERTs and Terrorist Incidents/Table Top Terrorism Exercise for the class: Applying CERT principles to a suspected terrorist incident. The Southern Nevada DVD "The Seven Signs of Terrorism" is also shown. CERT used to have a dedicated funding stream in Citizen Corps.The Guidance for both UASI and SHSP dictates that these programs now be included in these funding streams.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, this aligns with Operational Coordination because it trains communities in Emergency Response when first responders are overwhelmed and unable to respond in a timely manner

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The number of courses can be reduced, but this will impact the Operational Coordination Core Capability. As courses are reduced, so are the outcomes which will inhibit Operational Coordination.

Nev	ada Homeland Securit	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	E								
		HSGP Funding Description	Date Submitted	4/25/19								
PROJ	ECT TITLE REFERENCE:	Southern Nevada Community Emergency Response Team (CERT)										
	d. Can this project continue without funding? YES NO Explain below.											
Fields "d" and "e" are limitied to visible text box size	Fixed costs associated with this	program are dependent on this funding stream.										
nitiec	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	xplain below.									
Fields "d" and "e" are l	The greater number of persons allowing those resources to be u	trained to respond to an emergency, the less resources will used in other locations.	be requested from the	e State,								
18)	THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:											
	YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey											
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR.	A) Survey								
19)	ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box											
	because it is an effective return	een consistently ranked in the top 5 priorities in UWAG and on investment and provides productive outreach to the conter hazards through the CERT program.										

HOMELAND SECURITY GRANT PROGRAM (HSGP) Revised SHSP FFY 2019 LINE ITEM DETAIL BUDGET

	ENTE IT ENT DE L'AIE BODGET											
	Agency Name	City of Las Vegas	Mary Camin (702) 229-0076			Grant Manager Name & Contact #	Priscilla Wdowiak (Е			
	IJ TITLE: Southern Nevada Community Emergency Response Team (CERT)											
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		CERT Program Coordinator	Maintain	SHSP	28	20%	2075	\$ 11,620.00	Citizen Corps - City of Las Vegas	Operational Coordination		SHSP
2		Support Staff	Maintain	SHSP	15	20%	980	\$ 2,940.00	Citizen Corps - City of Las Vegas	Operational Coordination		SHSP
3		Course Facilitators	Maintain	SHSP	30	20%	2250	\$ 13,500.00	Citizen Corps - City of Las Vegas	Operational Coordination		SHSP
4	Danagarah Cub Tatal							\$ -				
DEDCON	Personnel Sub-Total	DEOR EACH LINE ITEM AROVE - PLEASE EXPLAINE IN	DETAIL THE POCITIONS AND D	ELIVEDADI EC. I	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMS LIC	TED WILL BE COM	\$ 28,060.00		ITEMS MAY NOT	DE BURGUACER OF	UTCIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Personnel above are involved in the support and delivery of the Community Emergency Response Team courses. The support staff is an hourly position, limited to 20 hours per week and provides clerical services (roster maintenance, data input, copying etc.) for all of the courses. Course facilitators deliver training, set up classrooms and provide input for course modifications and updates as appropriate. The Program Coordinator does budget and quarterly reports, scheduling and facilitating courses as needed, manages public relations for the program, speaks to community groups regarding CERT and mees with community leaders to promote the CERT program.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		CERT Program Coordinator	Maintain	SHSP	22	20%	2,050.00	\$ 9,020.00			
6		Support Staff	Maintain	SHSP	4	20%	975.00	\$ 780.00			
7		Course Facilitators	Maintain	SHSP	6	20%	2,250.00	\$ 2,700.00			
8								\$ -			
	Fringe Sub-Total							\$ 12,500.00			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Retirement, medical insurance, sick leave, taxes and other fringe benefits outlined by the City of Las Vegas policies and bargaining unit contract.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9		Panaca Hotel & Per Diem to teach CERT Class	Maintain	SHSP	Training	To pay for teaching a CERT class in Panaca.	1.00	1,000.00		Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
10		Per Diem to teach class in Pahrump	Maintain	SHSP	Training	To pay per diem to teach in Pahrump.	1.00	48.00		Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
11									-			
12									-			
13			 						-			
15									-			
16			1		İ				-			
17									-			
18						<u> </u>			-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							1,048.00			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 9 -To pay for teaching a CERT class in Panaca. Line 10-To pay per diem to teach in Pahrump.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Southern Nevada Terrorism App	Maintain	SHSP	1	2,300.00	2,300.00	Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
28		CERT Facilitator Identification-Uniform	Maintain	SHSP	2	35.00	\$ 70.00	Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
29		Participant Backpacks	Maintain	SHSP	75	96.00	\$ 7,200.00	Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
30		First Aid Training Packets	Maintain	SHSP	75.00	\$ 1.08	\$ 81.00	Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
31		Registration & Graduation Packets	Maintain	SHSP	75.00	\$ 5.00	\$ 375.00	Citizen Corps - City of Las Vegas	Operational Coordination	SHSP
32		Student Manuals	Maintain	SHSP	75.00	\$ 13.00	\$ 975.00	Citizen Corps - City of Las Vegas		SHSP
33		Course Supplies	Maintain	SHSP	1.00	\$ 150.00	\$ 150.00	Citizen Corps - City of Las Vegas		SHSP
34 35							-			
- 55	Planning Sub-Total						\$ 11,151.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 27-To pay for the Quick Series Terrorism App which provides instruction to CERTs in the field. Line 28-Provides funding for CERT instructor uniforms and badging. Line 29-Funding provides each student with a backpack containing items that support course curriculum: first aid kits, bump hat, CERT vest, pry bar, multipurpose wrench, etc Line 30-Supplies to provide hands on training on medical units. Line 31-Supplies for the administration of the program. Line 32-Provides manuals to students. Line 33-Provides course materials for the maintenance and functioning of the program, including propane for the fire pan.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40							\$ -				
41							\$ -				
42							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

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Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			<u> </u>			<u> </u>				\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

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1				Budge	Total		
1				Reque	st	\$ 52,759	.00

HOMELAND SECURITY GRANT PROGRAM (HSGP) UASI FFY 2019 REVISION LINE ITEM DETAIL BUDGET

LINE ITEM DETAIL BUDGET												
	Agency Name	City of Las Vegas	Project Manager Name & Contact #		(702) 229-0076 regasnevada.gov	Grant Manager Name & Contact #	Priscilla Wdowia	ak (702) 22-6045 I	Pwdowiak@lasvegasnev	vada.gov		Ε
	IJ TITLE:	Southern Nevada Community Emergen	cy Response Team (Cl	ERT)								
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		CERT Program Coordinator	Maintain	UASI	28	80%	2075	\$ 46,480.00 Cir	itizen Corps - City of Las Vegas	Operational Coordination		UASI
2		Support Staff	Maintain	UASI	15	80%	980	\$ 11,760.00 Cir	itizen Corps - City of Las Vegas	Operational Coordination		UASI
3		Course Facilitators	Maintain	UASI	30	80%	2250	\$ 54,000.00 Cir	itizen Corps - City of Las Vegas	Operational Coordination		UASI
	Personnel Sub-Total	FOR EACH LINE ITEM AROVE - DI EASE EVRI AINE IN I						\$ 112,240.00				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Personnel above are involved in the support and delivery of the Community Emergency Response Team courses. The support staff is an hourly position, limited to 20 hours per week and provides clerical services (roster maintenance, data input, copying etc.) for all of the courses. Course facilitators deliver training, set up classrooms and provide input for course modifications and updates as appropriate. The Program Coordinator does budget and quarterly reports, scheduling and facilitating courses as needed, manages public relations for the program, speaks to community groups regarding CERT and meets with community leaders to promote the CERT program.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		CERT Program Coordinator	Maintain	UASI	22	80%	2,050.00		Citizen Corps - City of Las Vegas	Operational Coordination	Personnel
6		Support Staff	Maintain	UASI	4	80%	975.00		Citizen Corps - City of Las Vegas	Operational Coordination	Personnel
7		Course Facilitators	Maintain	UASI	6	80%	2,250.00		Citizen Corps - City of Las Vegas	Operational Coordination	Personnel
	Fringe Sub-Total							\$ 50,000.00			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Retirement, medical insurance, sick leave, taxes and other fringe benefits outlined by the City of Las Vegas policies and bargaining unit contract.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9		International Association of Emergency Managers Conference in Long Beach	Maintain	UASI	Training	To enhance the emergency management skills and knowledge of the Program Coordinator.	1.00	1,600.00	1,600.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
10		CERT Train the trainer at the Emergency Management Institute in Emmetsburg MD	Maintain	UASI	Training	To enhance facilitator training skills.	1.00	250.00	250.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
11		Laughlin Hotel and Per Diem to teach CERT class	Maintain	UASI	Training	To pay for teaching a CERT class in Laughlin.	1.00	1,125.00	1,125.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
12		National CERT Conference Location TBD	Maintain	UASI	Training	To learn best practices from other CERT programs throughout the nation	1.00	1,800.00	1,800.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
13		Nevada Preparedness Summit Location TBD	Maintain	UASI	Training	To discuss best practices with other Nevada CERT programs and enhance the emergency management skills and knowledge of the Program Coordinator.	1.00	850.00	850.00	Citizen Corps - City of Las	Operational Coordination	UASI
	Travel Sub-Total	DE FACILITIES AROUSE DE FACE EVEL AINE IN RETA							5,625.00	NACED OUTSIDE THE		

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Line 9-To enhance the emergency management skills and knowledge of the Program Coordinator. Line 10-To enhance facilitator training skills. Line 11-To pay for teaching a CERT class in Laughlin. Line 12-To learn best practices from other CERT programs throughout the nation. Line 13-To discuss best practices with other Nevada CERT programs and enhance the emergency management skills and knowledge of the Program Coordinator.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Conference Registration Fees: International Association of Emergency Managers	Maintain	UASI	1	625.00	625.00		Operational Coordination	UASI
28		Terrorism App for Southern Nevada	Maintain	UASI	1.00	2,300.00	2,300.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
29		Membership: International Association of Emergency Managers	Maintain	UASI	1	200.00	200.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
30		Conference Registration Fee: National CERT Conference	Maintain	UASI	1	200.00	200.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
31		Membership: Nevada Emergency Preparedness Association	Maintain	UASI	1	75.00	75.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
32		Program Coordinator Cell Phone Bill	Maintain	UASI	1	975.00	975.00		Coordination	UASI
33		CERT Facilitator Identification-Uniforms	Maintain	UASI	25.00	35.00	\$ 875.00	Vegas	Operational Coordination	UASI
34		Participant Backpacks	Maintain	UASI	96.00	575.00	\$ 55,200.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
35		First Aid Training Packets	Maintain	UASI	300	1.00	\$ 300.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
35A		Registration and Graduation packets	Maintain	UASI	575	6.00	\$ 3,450.00	Citizen Corps - City of Las Vegas	Operational Coordination	UASI
35B		Student Manuals	Maintain	UASI	575	13.00	\$ 7,475.00		Operational Coordination	UASI
35C		Course Supplies	Maintain	UASI	1	2.000.00	\$ 2,000.00		Operational Coordination	UASI
	Planning Sub-Total						\$ 73,675.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Line 27-To pay for conference registration fees for the International Association of Emergency Managers for continued professional development. This is a discounted rate for IAEM Members. Line 28-To pay for the Terrorism App which provides instruction to CERTs in the field. Line 29-To pay for annual membership in the International Association of Emergency Managers to enhance professional development. Line 30-To pay for conference to enhance Southern Nevada CERT program. Line 31-To pay for conference registration fees for the Nevada Emergency Preparedness Association for, continued professional development, and Nevada specific networking. Line 32-Program Coordinator cell phone used to administer CERT program. Line 38-Provides panuals to students. Line 35-Supplies to provide hands on training on medical units. Line 35A-Supplies for the administration of the program. Line 38B-Provides manuals to students. Line 35C-Provides course materials for the maintenance and functioning of the program, including propane for the fire pan.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Narrative HERE	
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Harranio											
Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MOST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY, HO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40											
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether ject requires EHP Screening									s -	
51		Contract payment for Spanish speaking CERT Train the Trainer instructor to teach a Spanish language CERT class	Maintain	UASI	Yes	Yes	1	1,600.00	Citizen Corps - City of Las Vegas	Operational Coordination	\$ 1,600.00	UASI
52 53		Deaf Translators for Deaf CERT Class	Maintain	UASI	Yes	Yes	3	1000	Citizen Corps - City of Las Vegas	Operational Coordination	\$ 3,000.00	UASI
54	Training Sub-Total										\$ 4,600.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Line 51-Payment for qualified CERT instructor to serve Spanish speaking population. Line 52-Payment for translators to teach CERT in order to serve deaf community.

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State Exercise Officer?	l This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57	EHP Required prior to prod	curement / See 2nd tab to determine whether ect requires EHP Screening										
58		Southern Nevada CERT Skills Refresher and Full Scale Exercise-Supplies	Maintain	UASI	Yes		1	726.00		Operational Coordination	\$ 726.00	UASI
59		Southern Nevada CERT Skills Refresher and Full Scale Exercise-Food for lunch, beverages and snacks for exercise participants, volunteers and staff.	Maintain	UASI	Yes		1	1,700.00		Operational Coordination	\$ 1,700.00	UASI
		Propane for the fire pan for the above listed Southern Nevada CERT Skills Refresher and Full Scale	Maintain				_		Citizen Corps - City of Las			
60		Exercise		UASI	Yes		3	58.00	Vegas	Coordination	\$ 174.00 \$ -	
01	Exercise Sub- Total										\$ 2,600.00	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

The CERT Exercise is to refresh and enhance critical CERT skills stressing operational coordination and community resilience through a full scale exercise. Lines 58 & 59 & 60 are the costs for ONE CERT Exercise-however, the costs for this one exercise are broken in three lines. The first line, Line 58 is for supplies in order to correctly host and and and minister the exercise. Line 59 is for lunch, and the verges to be provided to the students, staff and volunteers. Lunch will be a working lunch, since the exercise exceeds the minimum time requirement in order to provide food and the total cost will not be in excess of the lunch per diem for Clark County. The current Clark County will be used for the 2020 exercise. Propage for the fire pan for us to the skills refresher and the exercise.

per dien	to the first state of the documents of the first state of the first st									
								Budget Total Request	\$ 248,740.00	

Project E

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name: Southern Nevada Community Emergency Response Team (CERT)			
Funding Source:	UASI/SHSP split	SHSP Funding Request:	\$52,759.00
(SHSP, UASI, SHSP/UASI Split)	UASI/SHSF Split	UASI Funding Request:	\$248,740.00

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Southern Nevada CERT program continues to train citizens in effective and efficient emergency response when first responders are overwhelmed. By engaging the whole community in collaborative community planning and capacity building, the program helps to integrate community resources. Outreach and localized preparedness education and training allows the whole community to prepare for and respond to anticipated disruptions and potential hazards following a disaster.

How have you collaborated with other agencies to maximize the resource's capacity?

The CERT program collaborates with various agencies throughout southern Nevada to provide citizen based emergency response training. Some of our partnerships include communities in rural Clark County, the City of North Las Vegas, the City of Henderson, the City of Mesquite, the University of Nevada at Las Vegas, local high schools through their HOSA program, various community groups, such as churches and Home Owner Associations throughout the valley.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The City currently allows other employees to occasionally support grant funded activities, but their efforts are only to leverage the effectiveness of grant funds and cannot be substituted in lieu of grant funding.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?
No.

Please provide a five year funding summary for your project. See Next Page

The Southern Nevada CERT will continue to reach out to a more diverse student base to ensure that we reach the whole community according to Presidential Policy Directive 8. It requires the involvement of everyone—not just the government—in a systematic effort to keep the nation safe from harm and resilient when struck by hazards, such as natural disasters, acts of terrorism and pandemics. (Federal Emergency Management Website, 2016) "A secure and resilient nation with the capabilities required across the whole community to prevent, protect against, mitigate, respond to and recover from the threats and hazards that pose the greatest risk." (Federal Emergency Management Website, 2016)

Current outreach activities will continue, such as Access and Functional Needs, Spanish and Deaf CERT that provide emergency response training to vulnerable populations. Southern Nevada CERT will continue to train the whole community by offering courses in one of four formats: one night a week for six weeks, two consecutive Saturdays, two consecutive Sundays, or a weekend Saturday and Sunday. Through continuing to offer the CERT program in multiple formats, operational coordination and community resilience is enhanced.

In order to achieve the above goals, it is possible more part-time CERT facilitators will need to be added to our current staffing pattern. This only affects the budget in that an increase in staffing makes it possible to increase the number of course offerings and number of participants per course.

Fiscal Year	UASI	SHSP	Total	Number of People Trained
		Actuals		
FFY 16	\$189,091	\$47,700	\$236,791	449
FFY 17	\$225,000	\$66,135	\$291,135	597
FFY 18	\$239,382	\$51,055	\$290,437	780
		Projected		
FFY 19	\$254,824	\$46,675	\$301,499	800
FFY 20	\$256,000	\$47,000	\$303,000	825
FFY 21	\$257,000	\$47,500	\$304,500	825
FFY 22	\$258,000	\$48,000	\$306,000	850
FFY 23	\$259,000	\$48,500	\$307,500	850

Our budget is continually being refined each year as we manage the growth of the CERT program, balancing course offerings in multiple jurisdictions and ensuring the most vulnerable people in our community are empowered to help protect themselves.

Nevada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	F
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/24/19
1) PROJECT TITLE:	Northeast Nevada Citizer	n Corps/CERT Program - Elko CE	RT - DEM	
2) PROPOSING/LEAD AGENCY:	Elko County Sheriff's Offi	ce - DEM		
3) Project Manager Name/Title:	Mary Ann Laffoon - NNC	CCP Coordinator/Stephanie Parke	er - GPA DEM	
Project Manager Contact Info:	Phone: (775) 934-9130	Email: mlaffoon@elkocountynv.n	et	
4) Addl Project Manager Name/Title:	Annette Kerr, ECEM/Step	ohanie Parker - GPA DEM 775.68	37.0323	
Addl Project Manager Contact Info:	Phone: (775) 777-2517	Email: akerr@elkocountynv.net		
5) Finance/Grant Contact Name/Title:	Cash Minor			
Finance/Grant Contact Info:	Phone: (775) 753-7073	Email: cminor@elkocountynv.ne	t	

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request is to maintain, build, improve and expand the Northeastern Nevada Citizen Corps/CERT Program and covers the region of not only Northeastern Nevada, but other non-urban areas in Nevada as part of the building blocks to a more prepared, ready, and resilient community and state of Nevada.

The NNCCCP and the CERT Program and its mission aligns with the Strategic Capacity for 2019 under Citizen Corps. This proposal is to continue the CERT Program, Trainings, Outreaches, and volunteer opportunities to empower the citizens in our communities with a whole community approach to be better prepared for themselves, families, and their communities, and be beneficial and provide support to their communities/state in emergency and non-emergency events.

The NNCCCP and DEM will continue to work with and partner with other programs and state, local, tribal and community entities to provide assistance through education, situational awareness, protective actions, community alerts, shelter set-up/support, POD's, call centers, EOC and exercise support, and emergency/disaster preparedness information.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CITIZEN CORPS

HSGP Project Type Supporting Strategic Capacity: Elko County [CITIZEN CORPS]

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: COMMUNITY RESILIENCE [Mission Area - MITI]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Northeast Nevada Citizen Corps/CERT Program aligns with the Citizen Corps Capacity to offer programs/outreaches/booth events/membership in Local Emergency Planning Committee-(LEPC) and other organizations where NNCCCP can provide assistance and establish and maintain partnerships and continue to provide trained volunteers/citizens to be part of operational coordinated efforts in its communities to help and facilitate integration of all critical stakeholders with a whole community approach.

NNCCCP will continue to provide training, outreaches, and booth events to better educate citizens on emergency preparedness and ways they can be more resilient.

NNCCCP and CERT Programs have been, are and can be of assistance in partnership with other agencies and VOAD's, to provide assistance and support in emergency and non-emergency events in their geographical areas.reas.

Nevada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	F
Project Proposal for FFY19	HSGP Funding Description	Date Submitted	4/24/19
PROJECT TITLE REFERENCE:	Northeast Nevada Citizen Corps/CERT Program - Elko CE	RT - DEM	

10)	PROCUREMENT - I	Indicate the metho	d of	procurement	associated	with this	proi	iect
,				p. 0 00 0	0.0000.0000		P. ~,	,

Request for Proposal	Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:
O Sole Source	Using the most strict federal, state and local procurement policies and procedures.
Internal	

11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe

in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

The Northeast Nevada Citizen Corps/CERT Program includes management of the day to day operations of the program to include, grants management/administration and reporting requirements of the program, direct planning, training and oversight of program delivery to include many non-urban areas in Nevada for citizens from high-school age through seniors. The contract coordinator reports to the Elko County Sheriff's Office - Elko County Emergency Manager, Elko County Commissioners, Elko County Comptroller, Elko County LEPC, and the State of Nevada Department of Emergency Management and the Resilience Commission and works in collaboration with Nevada DEM to support non-urban and tribal areas.

The Citizens Corps/CERT Program provides, trainings, planning and coordination activities to improve resilience in communities adding volunteers as a forced multiplier to support preparedness, response and recovery to emergencies and disasters. outreaches to better prepare the citizens of Nevada in case of and emergency or disaster, target new volunteers, offer volunteer opportunities, and provide support/assistance throughout the northeast region, and other areas per request in emergency and non-emergency events.

The coordinator partners with stakeholders throughout the region and the state of Nevada to prepare all citizens in an effort to build better prepared, ready and resilient communities.

When working out of the Elko County area, the coordinator will work with other CERT Program leads, CERT at NV DEM, and county Emergency Managers to bring training opportunities to their area.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12(a)	Elko County Sheriff's Office Northeast Nevada Citizen Corps/CERT Program	Elko, Elko County, NV	Mary Ann Laffoon, NNCCCP Annette Kerr, ECEM
12(b)	Nevada Division of Emergency Management	State of Nevada	Stephanie Parker, GPS DEM
12 (c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

The NNCCCP and the coordinators position is funded 100% through this funding request.

To maintain/sustain and expand the program and partnerships of the Northeast Nevada Citizen Corps/CERT Program in Elko County, northeast Nevada, and other areas as requested.

To continue with the education and empowering of youth and adults to increase the awareness of emergency/disaster preparedness for multiple threats and hazards with a whole community approach and provide volunteer opportunities. To continue to recruit partnerships with other agencies, first responding, community and VOAD's.

With the program coordinating and providing trainings in other areas than Elko, NV travel funds are needed to promote, train, and facilitate the mission of the program.

Project component for Hawthorne and partial WPC to be managed by DEM for CERT volunteer training for shareable and deployable assets as requested by specific jurisdictions. The ongoing maintenance is that of White Pine County and Mineral C

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3



FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Northeast Nevada Citizen Corps/CERT Program - Elko CERT - DEM

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	LV-UASI		
	15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
	The Northeast Nevada Citizen Corps/CERT Program Coordinator to provide the direct and administrative support to project. The coordinator/program will partner with and train with other agencies to meet the preparedness goals and mission. The program and its coordinator will coordinate, facilitate trainings, and outreaches to provide a whole community approach to build stronger, safer, better prepared, ready and resilient communities to respond to threats and hazards. (\$150 for planning coordination managed by DEM)		\$ 60,150.00	\$ 60,150.00
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
275	Support background checks for trained volunteers to become shareable/deployable assets resulting from the 2019-2020 outreach. This component to be managed by DEM for up to 100 volunteers at \$29.25 per person.		\$ 2,925.00	\$ 2,925.00
	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
	Citizen Corps CERT program training materials, supplies, manuals and training equipment including volunteer backpacks. Estimated at \$105 per deployable volunteer. DEM Managed.		\$ 6,300.00	\$ 6,300.00
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	Chahaiala	Cb.T.a.k.a.l
	134) IT all illing [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine County and Mineral County (Managed by DEM \$3,781.16)	LV-UASI	\$ 9,600.25	\$ 9,600.25
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine	LV-UASI		
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine County and Mineral County (Managed by DEM \$3,781.16)		\$ 9,600.25	\$ 9,600.25
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine County and Mineral County (Managed by DEM \$3,781.16)		\$ 9,600.25	\$ 9,600.25 SubTotal
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine County and Mineral County (Managed by DEM \$3,781.16) 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	\$ 9,600.25 State-wide	\$ 9,600.25 SubTotal \$ 0.00
	Travel for the Northeast Nevada Citizen Corps/CERT Program to travel within the northeast region and sate of Nevada to present CCP/CERT programs/outreaches and trainings. To allow the NNCCCP to attend meetings and trainings and form partnerships to build, expand, maintain, improve citizens and community resilience. (\$5,819.08) Additional travel related training resulting from 2018-2019 planning for White Pine County and Mineral County (Managed by DEM \$3,781.16) 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	\$ 9,600.25 State-wide	\$ 9,600.25 SubTotal \$ 0.00

Tields "a", "b", and "c" are limitied to visible text box size

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: F

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Northeast Nevada Citizen Corps/CERT Program - Elko CERT - DEM

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	FIELDS ARE LIMITED TO TEXT BOX SIZE			Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Request permission from the Elko County Commissioners to accept award for Elko County.	10/01/19	11/13/19	2
3	Meet, call, email, and coordinate with EM's to schedule CERT Outreaches, CERT Basic Training, classes, and exercises.	10/01/19	04/01/21	15
4	Present CERT Basic Training to build community preparedness and resilience and promote volunteer opportunities when requested and scheduled	10/01/19	04/01/21	15
5	Travel out of Elko County to provide CERT Basic Training, Outreaches, Trainings to other non-urban counties and Tribal when requested	10/01/19	04/01/21	15
6	Participate in and work with community events, booth events, and safety fairs. (Wild Fire Picnic, Schools, NNO, Hospitals, etc.)	10/01/19	04/01/21	15
7	The Coordinator will continue as a member of LEPC and other groups to assist in the community and updating of Elko County Plans	10/01/19	04/01/21	15
8	Continue partnerships with Nevada CERT Programs, DEM, and report to the Resilience Commission on behalf of CCP/CERT Programs	10/01/19	04/01/21	15
9	DEM coordinates and provides training support for non-urban jurisdictions for CCP programs (White Pine and Mineral)	10/01/19	04/01/21	15
10	DEM provides support for increased training of volunteers as a deployable/sharable resource	10/01/19	04/01/21	15
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Yes, through the training the NNCCCP provides with CERT Basic Training, and providing information at outreaches that informs citizens of terrorist related topics, with a emphasis on situational awareness, and implications of terroristic events to include incidents with a Cyber Security focus.

The NNCCCP has a partnership with emergency management, fire departments, law enforcement agencies, and TSA. Volunteers trained and utilized in the programming provide a forced multiplier to public responding agencies in the preparedness, response and recovery phases of terrorist incidents.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

The NNCCCP is a Citizen Corps/CERT Program and Project under Citizen Corps which is a Nevada 2019 Strategic Capacity. The NNCCCP and its mission uses a whole community approach to empowering and educating citizens how to be better prepared, ready and resilient for all hazards events, providing volunteer opportunities to be of support and assistance to our communities in times of emergency and non-emergency events.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

At this time the projects cannot continue with out this funding source.

It would be difficult to to reduce or scale back much, funding determines the impact of the project on the non-urban areas that can lack vital resources to respond to emergencies and disasters, with a whole community approach.

This proposal was written to keep in mind that funds are short, and to request a bare bone funds to continue the program, with the ability to to reach out and coordinate with other programs, and the DEM.

This proposal would bring CERT to other non-urban counties, and assist in facilitating trainings on Tribal lands through the travel budget.

A reduction in funding will require the discontinuance of CERT training and programs in areas of greatest need.

		y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	F			
roj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/24/19			
RO.	JECT TITLE REFERENCE:	Northeast Nevada Citizen Corps/CERT Program - Elko Cl	ERT - DEM				
	d. Can this project continue without funding? YES NO Explain below.						
"d" and "e" are limitied to visible text box size	Not at this time. These program	s and its coordinator are 100% funded by the HSGP/SHSP	Grant Program.				
e. Does this project provide a MEASUREARIE statewide benefit? VES NO Familiain below.							
e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below.							
As we continue to teach, inform, train and empower citizens through the CERT programs and its mission it provided the ground front line resource to help build a more prepared, ready and resilient Nevada with the citizens of New The programs bring trained volunteers who can provide assistance and boots on the ground multiplication in elementary events. Providing many hours of resources that are provided by volunteer hours with a signification in the monetary value of those hours. Whether it be in rural or urban areas, the need can exhaust any jurisdictions regular staffing capacity, and the provides volunteer citizens to perform many tasks that can be of benefit to themselves and communities, especially areas.							
)	YES - Agency HAS partio	e indicate the participation level in completing the 2018 Ti cipated in the 2018 Threat and Hazard Identification Risk A articipated in the 2018 Threat and Hazard Identification Ri	ssessment (THIRA) S	urvey			
))	,	Y - Please indicate any additional project commentary yo					
	will grow, expand and provide s There has been an increase in	port from the SHSP program and the visibility of the program stronger, more prepared, ready and resilient communities for the growth and expansion of citizen corps training. The Nortwork with Emergency Managers in surrounding counties to be neir communities.	r the state of Nevada theastern Nevada CE	RT			
	Homeland Security local partne	working with schools for Teen CERT in multiple jurisdictions, ers, volunteers participation in ICS training and NIMS training PER Assessments and POD drills.					
	citizen groups/community-base Casualty Incident and the terror aids in immediate responses ar responding agencies and the m	management and fire departments have received a high nund organizations, schools, private sector in response to the flight threats they learn about in the media. Training and coord in the recovery of incidents. Trained volunteers are a valuan power they provide can be used in required match for fed greater benefit to impacted tribes and local jurisdictions through	oods of 2017, the 1 C dinated resilience in c led asset as a forced deral emergency/disa	October Mass communities multiplier fo			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

						TAIL BODGET						
	Agency Name	ECSO-NNCCCP-DEM	Project Manager Name & Contact #	Mary An Laffoon- 934.9130	775-	Grant Manager Name & Contact #	Mary An 775.777.		'5.934.9130 Stepahar	nie Parker, 775.687.)306, Annette Kerr,	F
	IJ TITLE:	Northeast Nevada Citizen Corps/CERT Prog	ram - Elko CERT	n - Elko CERT								
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previou s Funding	or	% of Effort	Calc ulati on		Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2	Personnel Sub-Total							\$ -				
DERSON	PORSONIEL OST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE TI								COIDE THE ITEMS			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previou s Funding	Hourly	Calc ulati on		Approved Strategic Capacity		Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above								
5							\$ -			
6							\$ -			
	Fringe Sub-Total						\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	BREARDOWN	Select Purchase Type	Previou s Funding Type	_	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL, ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)					-		-			
9		Travel for Northeast Nevada Citizen Corps/CERT Program and Coordinator to travel within the northeast region and Nevada where requested to present CERT Basic Training, Outreaches, attend booth events and meetings, to facilitatre better prepared and resilient citizens and communities.		SHSP	Training	Travel to White Pine, Humboldt, Lander, Eureka, Mineral, Churchill, Pershing and Elko Counties to present CERT Basic Trainings, Outreaches, booth events and attend meetings and trainings	12.00	369.34	4,432.08	Citizen Corps - Elko County	Operational Coordination	SHSP
10		Travel for Northeast Nevada Citizen Corps/CERT Program and Coordinator to travel to Carson City or the Reno area to attend trainings, and meetings.		SHSP	Training	Travel to Carson City, NV to attend meetings and trainings at the DEM, or in the Reno area.	2.00	693.50	1,387.00	Citizen Corps - Elko County	Operational Coordination	SHSP
13		CCP(CERT, Be the Help and Stop the Bleed) Training delivery in Ely for WPC 5 days 1 person DEM Mileage \$374.68; Hotel \$470; Per Diem at \$55 per day \$275 All based on GSA Allowable	Maintain	SHSP	Training	Necessary training support for CCP programs non- urban communities-DEM managed	1.00	1,119.69		Citizen Corps - Elko County	Community Resilience	SHSP
14	Travel Sub-Total	CCP(CERT, Be the Help and Stop the Bleed) Training delivery in Hawthorne for Mineral County 5 days 2 persons DEM & Elko Coordinatorfor Mileage \$873.48; Hotel \$1,128; Per Diem at \$55 per day \$660 All based on GSA Allowable		SHSP	Training	Necessary training support for CCP programs non- urban communities-DEM Managed	1.00	2,661.48	2,661.48 9,600.25	Citizen Corps - Elko County	Community Resilience	SHSP

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lines 9-10 are for CERT, Be the Help, and other Citizen Corps program training directly related to Northeasten Nevada communities. Lines 13-14 are related to CERT, Be The Help and Stop the Bleed programs 5 day training support provided to White Pine County in Ely, NVand a 5 day training support provided in Hawthorne to support the Mineral County Office of Emergency Management. Anticipated facilitators Elko CERT Coordinator and DEM CERT Coordinator Representative.

Line #	CATEGORY		Select Purchase Type	Previou s Funding		QUANTITY	UNIT COS T	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27		Northeast Nevada Citizen Corps/CERT Program Coordinator, Contractor (1) No Benefits	Maintain	SHSP		1	######		Citizen Corps - Elko County	Operational Coordination	SHSP
28							-	-			
29								-			
30		Planning Conference calls multi-jurisdictional	Maintain	SHSP	DEM Managed		25.00		Citizen Corps - Elko County	Community Resilience	SHSP
31								-			
	Planning Sub-Total							#######			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The NE NV Citizen Corps/CERT Coordinator in line #27 will provide the support and educational services related to CERT Basic Trainings, Outreaches, recruiting, coordination, volunteer management, general program administration, and grants management/reporting. The Coordinator/program will build partnerships to train and meet preparedness needs and goals in Elko County, and other areas when requested in Nevada by using a whole community approach to help build a more prepared, ready, strong and resilient Nevada, to plan, mitigate, respond and recover from threats and hazards. Line 30 is to support multi-jurisdiction planning for Citizen Corps/CERT related training coordination.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previou s Funding		QUANTITY	UNIT COS T	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.									
		Background checks support for local jurisdiction trained			DEM					Community	
36		volunteers	Maintain	SHSP	Managed	100.00	29.25	#######	Elko County	Resilience	SHSP
37								\$ -			
38						-		\$ -			
39								\$ -			
	Organization Sub-Total							#######			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Required volunteer checks for trained volunteers to be eligible as a shareable and/or deployable resource for public safety/response entities and to support community resilience.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	s Funding		QUANTITY	UNIT COS T	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION- NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		curement / See 2nd tab to determine whether your ject requires EHP Screening										
40		CERT/CCP volunteer supplies, manuals	New / Enhance / Past / Competitive	SHSP	DEM Managed	60.00	90.00		Citizen Corps - Elko County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
41		CERT/CCP Training supplies, equipment	New / Enhance / Past / Competitive	SHSP	DEM Managed	60.00	15.00		Citizen Corps - Elko County	Community	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
42								\$ - \$ -				
43							1	\$ -				
45								\$ -				
46								\$ -				
47								\$ -				
48							1	\$ -				
49	EQUIPMENT Sub-Total							#######				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previou s Funding Type	nated	Is This Request on the TEPW?	QUA NTIT Y		Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether your										
50	pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56						_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previou s Funding Type	nated	This request is required to be on the TEPW	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)								
		curement / See 2nd tab to determine whether your								
57	pro	ect requires EHP Screening								
58									\$ -	
59									\$ -	
60									\$ -	
61									\$ -	
	Exercise Sub- Total								\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total		
					Request	\$ 78 975 25	

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Elko SO NNCCP-CERT	/Statewide Tribal DEM M	anaged Sub-Award Request
Funding Source:	SHSP	SHSP Funding Request:	\$13,156.16
(SHSP, UASI, SHSP/UASI Split)	SHSF	UASI Funding Request:	\$0.00

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The statewide portion of this project outside of Northeastern Nevada has been ongoing and is expected to continue to support Citizen Corps Programs such as CERT and Be the Help with focuses on preparedness, response and recovery efforts through volunteer programs. The FFY19 funding allocated to DEM will focus on bringing training for all CERT programs with a strategic component for White Pine County and Mineral County as well as tribal entities with CERT programs. The CERT Programs in multiple jurisdictions collaborate with local jurisdictions and tribes. CERT volunteers serve as forced multipliers to provide lifeline services as identified in the Homeland Security Community Lifelines in the National Response Framework Update (Fourth Edition) by contributing to preparedness and response efforts for local jurisdictions and tribal governments related to emergencies. Volunteers are trained for first aid, communications, collection of information for emergency response to include post-disaster assessments, assist in delivery and coordination and dissemination assistance of food, water and sheltering, traffic control assistance. There are various skilled levels of volunteers and stakeholder partners that provide preparedness training to include but not limited to financial and fire safety preparedness. This partnership has continued from the former Nevada Citizen Corps Council and includes partners such as VOAD and the Medical Reserve Units.

How have you collaborated with other agencies to maximize the resource's capacity?

We are leveraging training assistance with Elko County's Northeastern Nevada CERT and the representatives for the tribes that will fall under the NTECC. All CERT programs support emergency management, fire departments and law enforcement agencies through leverage volunteers as forced multipliers in staffing through exercises, training and response activity support. In real life emergencies the CERT volunteers are a shareable and deployable asset for response and recovery efforts. In 2017 the Carson City CERT program sent their Program Manager to Las Vegas to assist in the set-up of the Family Assistance Center after the 1 October incident.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

Volunteers, once trained, provide a return on investment to the public agencies with volunteer hours that can be utilized for match and add value to any emergency management related activity. This can be anything from traffic control, crowd management, standing up EOC's, phone banks, delivery of neighborhood emergency notifications such as boil water notices. If training 60 volunteers in a year, costs \$15,605.00 estimated for FFY20 and 20% or 12 volunteers join a team and provide 40 volunteer hours per year for 2 years at \$22.61 per hour for Nevada in 2018 according to the Independent Sector at https://independentsector.org/resource/vovt_details, that would be an estimated value of \$1,808.80 Per person per year or \$3,617.60 for 2 years. For 12 volunteers over the 2-year period that would equate to a \$43,411.20 value. This is a conservative estimation and varies depending on jurisdiction.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Local jurisdictions are provided with technical assistance on a variety of options they can use to sustain activities to include identifying additional sources of funding and value added resources and working with stakeholder entities to help support training and exercise materials and supplies. There is no anticipated CERT Program Manager salary funding identified at this time for local jurisdictions programs. All activities to provide training will include train-the-trainer activities to help local jurisdictions sustain and enhance their capabilities.

This Project will assist local jurisdictions identify ways the CERT program will help offset multiple emergency management related capabilities. An example of local jurisdiction support would be for jurisdictions to look at their other funding sources/resources such as a staff person funded for emergency management activities to oversee the volunteer teams, assist in the coordination and support of the volunteer background checks to ensure they are deployable and shareable depending on the hazard or training supplies, materials and locations.

Please provide a five year funding summary for your project.

FFY19

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Support will also cover the travel and related training and meeting materials for the facilitators' attendance and delivery. Jurisdictions requesting assistance for the FFY19 funding include White Pine County, Mineral County and NTECC Programmatically this project will encourage CERT teams in local jurisdictions to develop a strategic plan to continue to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit. Funding to support this effort is projected at \$13,156.16

FFY20

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY20 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit. Funding to support this effort is projected at \$15,605.21

FFY21

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY21 funding.

The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit. Local jurisdictions will be required to help support the in-state volunteer training and vetting as well as and cover their own travel to the National CERT conference utilizing their own funding whether grant or general fund as only the DEM representative will be supported through this request. Funding to support this effort is projected at \$13,757.21

FFY22

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY22 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit. Local jurisdictions will be required to help support the in-state volunteer training and vetting as well as and cover their own travel to the National CERT conference utilizing their own funding whether grant or general fund as only the DEM representative will be supported through this request. Funding to support this effort is projected at \$13,757.21

FFY23

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY23 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit. Local jurisdictions will be required to help support the in-state volunteer training will be at the Annual Nevada Preparedness Summit and vetting as well as and cover their own travel to the National CERT conference utilizing their own funding whether grant or general fund as only the DEM representative will be supported through this request. Funding to support this effort is projected at \$9,599.60

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Northeast Nevada Cit	tizen Corps/CERT Progran	n – Elko CERT, (DEM)
Funding Source:	SHSP	SHSP Funding Request:	\$65,819.08
(SHSP, UASI, SHSP/UASI Split)	31131	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The NNCCCP and its coordinator partners with other agencies and NGO's and the Nevada DEM and it staff to provide CERT trainings, outreaches and programs to the citizens of multiple counties in NV. The NNCCCP program is to provide more prepared, ready and resilient communities and provide trained boots on the ground volunteers to provide assistance in emergency and non -emergency events.

How have you collaborated with other agencies to maximize the resource's capacity?

The NNCCCP collaborates with other agencies, and NGO's to provide training to the citizens of non-urban counties and on Tribal lands throughout Nevada with partnership of the DEM and NTECC.

The program with and in partnership will provide trainings, outreaches, and booth events to empower citizens to be better prepared, ready and resilient and to provide extra hands in case of need, in a whole community approach. The NNCCCP collaborates and partners with American Red Cross, Emergency Managers, LEPC's, First Responding agencies, TSA, etc.

Trained CERT's can be a deployable and sharable resource.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

With the continued training of the citizens by the CERT program, outreaches, booth events, and presentations the program can continue to help in the community's preparedness, readiness, and resiliency that will be of assistance to the recovery of the citizens as well as their communities in case of an emergency or disaster.

The program can provide opportunities by trained volunteers to increase the boots on the ground personnel during times of emergency and non-emergency events, and do so with a whole community approach. Trained volunteers can also be of benefit to the emergency management programs of their area. The NNCCCP has provided trained volunteers to first responding agencies as well as assisted with other NGO's during times of an emergency. (Floods of 2017 – EOC, Shelter, Call Bank, I-80 Haz-mat event, and the fires of 2018) , and also in non-emergency events as well such as traffic control, Live X's and more. The NNCCCP's program is based on the coordinator to coordinate with DEM and other Nevada non-urban counties to help facilitate emergency preparedness and CERT Trainings/outreaches/booth events in Elko County, Tribal and non-urban counties of Nevada.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

As an offset for the future, I would propose that we try and get training and communities buy into the program where they can sustain themselves with their own program management, volunteer management and trainers.

With continued training/education and empowering programs we can offer the opportunity that more citizens will become prepared and can offer volunteer assistance in emergency and non-emergency events to help themselves, communities and Nevada in case of an all hazard event.

Please provide a five-year funding summary for your project.

At this time I propose for a long range plan summary that with the continuation of the program and funding through HSGP/SHSP we would be able to continue with the measure of engaging the public and empowering them with the skills and knowledge to be better prepared, ready, situationally aware and hopefully create volunteer programs to assist in times of events, all hazard and non-emergency.

As we move forward with training, and providing a boots on the ground service, we hope to show the value and worth of the program, to the counties and Tribal lands that we reach, as well as the state of Nevada. As of now, the program has tried to keep its funding requests the past few years to a bare minimum of coordinator and travel to the other Nevada counties as it is requested to go to and serve, and has in the past. The program will continue to partner with and will this time cut if the need arises to continue the program as long as possible.

We will, with growth, look for additional funding sources to continue the mission of the programs and to increase their worth/benefit to their communities and the state of Nevada.

SHSP FFY 2019 – 2023 NNCCCP will continue with planning, training, coordinating, review, and increasing the programs of CERT, "Be the Help" and upcoming initiatives through outreaches, booth events, and safety/health fairs, in Elko County, and other non-urban counties (Lander, White Pine, Humboldt, Eureka, Mineral, Pershing, and Tribal) where requested, while partnering and collaborating with DEM and other agencies and NGO's.

NNCCCP will continue to stay current on training and committees, such as LEPC, to show benefit to the county's emergency management and other agencies and NGO's of their community.

NNCCCP will help coordinate and facilitate with other counties, Tribal and DEM to create CERT programs, teams, including supporting Train the Trainer program to increase jurisdictions sustainability and continuous training of new volunteers.

NNCCCP will coordinate with other programs to build, expand, and provide more emergency preparedness training to non-urban counties/Tribal to continue to build a more prepared, ready and resilient non-urban Nevada, and build on a deployable and sharable resource.

NNCCCP will attend meetings, trainings with other CERT Programs to enhance and share - to continue the empowerment of the staff and volunteers. Including attending the Nevada Preparedness summit each year. NNCCCP will continue to review, reevaluate and update to meet the needs of the communities, citizens, and Nevada

NNCCCP will continue when requesting funds to keep costs down, and request only what is needed to facilitate coordinator, travel, and materials (when needed) to continue and complete the CERT mission.

Ne	vada Homeland Security	PROJECT ID:	G			
Pro	oject Proposal for FFY19	Date Submitted	4/24/19			
1) P	ROJECT TITLE:	Maintain				
2) P	ROPOSING/LEAD AGENCY:					
3) P	roject Manager Name/Title:					
Р	roject Manager Contact Info:	Phone:	(775) 785-6205	Email: bhoward@washoecounty.	us	
4) A	ddl Project Manager Name/Title:	Michae	el Perry			
Α	ddl Project Manager Contact Info:	Phone:	(775) 325-6928	Email: mperry@washoecounty.u	S	
5) F	inance/Grant Contact Name/Title:					
Fi	inance/Grant Contact Info:	us	·			

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To improve operational effectiveness through continued training of community members and recruitment of volunteers. including development and coordination of Neighborhood Emergency Response Teams (NERT) that can be activated and equipped to respond in a shorter time frame to specific populated areas within the 625 sq mile service area of southwest Washoe County and expansion of the Rail Auxiliary Team (RAT Pack) for increased safety and security awareness along the miles of rail lines in our Area of Responsibility (AOR). To improve public knowledge and expand awareness through a combination of training and outreach efforts at various venues, including community events, conferences, speaking engagements and ongoing implementation of the Child I.D. Program. To increase operational coordination relative to emergency response and disaster preparedness by providing the necessary emergency equipment, supplies, training, and safeguards to Citizens Corps Program (CCP) volunteers supporting prevention, protection, mitigation, response and recovery efforts for citizens, property and environmental concerns within our service area. To enhance operational coordination and communications with the Washoe County Sheriff's Office Search and Rescue (SAR) program, improving their response time by providing a group of trained volunteers to assist with traffic control, helicopter support, and to work with SAR deputies/volunteers in urban search or evacuation efforts during such coordinated activations. To improve and expand the operational communications capabilities of the CCP through enhancement of social media presence and increase in effectiveness of the CCP website to improve recruiting efforts for new volunteers and raise awareness within the community.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: CITIZEN CORPS HSGP Project Type Supporting Strategic Capacity: Washoe County [CITIZEN CORPS]

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: COMMUNITY RESILIENCE [Mission Area - MITI]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

In addition to hosting training exercises, we support and participate in preparedness drills conducted by other agencies. We offer four (4) CERT academies and one (1) RAT Academy each calendar year to provide training and information on preparedness, mitigation, and response to community members, local groups, and interested members outside our service area. The training that our program hosts are open to and frequently attended by members of other CERT program areas. Inter-program drills are held to enhance training and whole community approach to effectiveness. We conduct outreach efforts and provide information to Neighborhood Advisory groups, Inter-Faith organizations, schools, and other NGOs and Stakeholders. Our program is an active member of VOAD.

Our volunteer standards-based training programs include regular review and practice of core proficiencies, supplemental skills training, and drills that incorporate a range of skills. Our program capabilities are written into the local EOP, as both a stand-alone and VOAD resource, and frequently into specific IAPs. We maintain partnerships with WCHD, WCSD, and others.

PRO		urity Grafft Pro	ogram (HSGP) RESUBMISSI	ON	PROJECT ID:	G
	ject Proposal for FF	Y19 HSGP Fun	nding Description		Date Submitted	4/24/19
>	JECT TITLE REFERENCE	: Washoe Cou	inty Sheriff's Office Citizens Corps Prog	ram - I	Maintain	
10)	PROCUREMENT - Indica	ate the method of	f procurement associated with this	proje	ect:	
	Request for Proposal	Provide a brief exp	planation on your method of procurement	t - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source	Equipment purchas	ses will be completed using the Washoe	Count	ty Grants Purchasing	g Guidelines
	Internal					
11)			ow, and by whom, the Proposed Projec		•	scribe
			complished, identifying who (i.e. staff, contractor			
FIELD IS LIMITED TO VISIBLE TEXT BOX	meet program objectives, of volunteers. All of these efforts, enhance whole co regional training prospects for program volunteers an training effort and is support to provide emergency pre new volunteers. Staff orga Staff actively support and CHSC team, one (1) Rail for all teams. Staff prioritizes equipment Staff manages Intelligence trained volunteers. Staff fi organizations relative to renon-emergency activation Staff manages the Public Staff participates in local,	which include operate efforts are designed of the same designed of the s	identify goals and determine training intitional expansion, training (exercises, drito allow volunteers to respond quickly to allow volunteers to respond quickly to allow volunteers and resiliency, and protich agencies and organizations to leverage encies. Staff builds training programs and so the general public and glean volunteer volunteer recognition and retention effort training programs for the CCP teams and EPIC To see to enhance program, support training aring with our partners at the TSA in command Staff, Emergency Operations for presentations, as well as coordinating verning efforts to volunteers through approuncils to support mitigation and prepare A, VOAD, NSCCC and others.	ills), ou disastect life ge rele d deve and facers, as worts. Including and ordinary olunted oved check the control of the con	utreach, recruitment sters, support timely and property. Staff vant training opportuelops exercises/drills cilitates quarterly CE well as a mentoring pring six (6) CERT tea acilitating volunteer a cutreach programs. ting security tests wier, outside agencies ers for emergency an annels of communications.	and retention recovery research unities, both leads the RT academies program for ms, one (1) assignments th specially and and cations.
12)	section is for you to tell Agency	us WHO will be reco	fy the participating agency(s) and juris eiving the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's yo	ou, put in your age Project Representative (ncy]
	12(a) Washoe County Sh	ieriff's Office	Washoe County	Micha	el Perry	
	12(b)					
	12 (c)					
13)	SUSTAINMENT - Identify	y any continuing fina	ncial obligation created by the Project, a	and pro	oposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX			ese funds will be supported by the Wash onnel and office space for the project.	ioe Co	unty Sheriff's Office	(WCSO),
FIELD IS LIMITED TA						

Urban Area

(UASI)

Statewide

(SHSP)

Fields are limitied to visible text box size

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description
PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office Citizens Corps Program - Maintain

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	cific. Identify (UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Planning efforts include identifying potential hazards unique to our area and training and preparing to protect life and property, including that of our volunteers and our communities. Collaborating with TSA to enhance aviation security. Conduct robust community outreach encouraging the public to "make a plan, make a kit, be the help till help arrives, and be prepared." Planning and securing speakers for CHSC to address terrorist-related topics. Office supplies, consumables, small equipment are needed to support the office functions. These items include items such as chair mats, pens, paper, staples, binder clips, poly-binders, and other desk top supplies that are used in the daily operations for training and public outreach.		\$ 16,875.00	\$ 16,875.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Citizens Corps Program operates on FEMA grants and under the WCSO. Staff provide leadership and program direction based upon grant objectives. Operational coordination is a core capability of the program and relies upon coordinated communication within the program, and on our web site to provide mass communication to 250+ volunteers and the public. Staff are responsible for items such as intelligence and threat level analysis and resource management concepts to facilitate the dispatch, deployment and recovery of resources, shared situational awareness between the public and private sectors and development of whole community partnerships, to include literature, brochures, both digital and print.		\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Responding quickly to save lives, protect property and the environment, and meet basic human needs in the aftermath of a catastrophic incident are all part of the core capabilities of our program. Training and equipping CERT/NERT to respond is essential to our mission. Providing necessary equipment to volunteers for training, backpacks, support kits, and team conexes helps volunteers protect citizens, mitigate impacts, respond quickly and strengthen recovery efforts. Supporting the Child ID Program reduces risk and enhances response and recovery of lost children.		\$ 19,420.00	\$ 19,420.00
Community outreach through speaking engagements, presentations and collateral materials improves awareness about disaster preparedness.			
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
materials improves awareness about disaster preparedness.	LV-UASI	State-wide \$ 0.00	SubTotal \$ 0.00
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks] Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based and	LV-UASI		
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks] Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based and appropriate conference training for staff.		\$ 0.00	\$ 0.00
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks] Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based and appropriate conference training for staff. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and		\$ 0.00 State-wide	\$ 0.00 SubTotal
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks] Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based and appropriate conference training for staff. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and future trainings needed.	LV-UASI	\$ 0.00 State-wide \$ 0.00 State-wide \$ 47,840.00	\$ 0.00 SubTotal \$ 0.00 SubTotal \$ 47,840.00
materials improves awareness about disaster preparedness. 15d) Training [Development and delivery of training to perform assigned missions and tasks] Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based and appropriate conference training for staff. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and future trainings needed. 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] With three (3) programs and 250+ volunteers within a 625 sq. mile service area, there is a need for two part time intermittent staff to help recruit and liaison with volunteers, assist with training coordination and exercises, and public outreach. Staff will provide hands-on support at meetings/trainings to help our programs remain robust and successful. We have trained 1000+ individuals, and provided	LV-UASI	\$ 0.00 State-wide \$ 0.00	\$ 0.00 SubTotal \$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: G

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office Citizens Corps Program - Maintain

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Board of County Commissioners acceptance of award	10/01/19	01/01/20	3
3	Schedule classes for funding cycle	01/01/20	04/01/20	3
4	Purchase equipment	01/01/20	09/30/21	21
5	Conduct scheduled classes	10/01/19	09/30/21	24
6	Schedule outreach activities for the funding cycle	01/01/20	09/30/21	21
7	Conduct scheduled outreach	10/01/19	09/30/21	24
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The Citizens Homeland Security Council team receives monthly trainings on terrorism and related law enforcement topics. Members support the TSA training missions (CAST) six(6) or more times each month at the airport for the purpose of evaluating security screening processes and identifying areas of improvement to thwart terrorist attacks on the aviation system.

The Rail Auxiliary Team (RAT Pack) is trained in bot safety and security of trains and rail systems, how to identify suspicious behavior, items and conditions, and how to report directly to the Union Pacific Railroad Risk Management Communications Center (RMCC) in Omaha, Nebraska.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Our primary focus is on sharing information with and providing training to the public on preparedness for and appropriate response to natural, technological, and man-made disasters. Operational Coordination requirements are met through training and drills, and inter-agency support during emergencies and training preparations. Community Resiliency is increased through education, training, and expansion of volunteer program.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Certain line items may be reduced, some proposed purchases postponed, reduction in training classes, and a reduction in public information and supplies.

Nev	ada Homeland Securit	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	G
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/24/19
PROJ	ECT TITLE REFERENCE:	Washoe County Sheriff's Office Citizens Corps Program -	Maintain	
	d. Can this project continue w	vithout funding? YES NO NO Explain below.		
"d" and "e" are limitied to visible text box size		materials for community outreach, continuous and updated opment of whole community would not be possible without t		response,
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	kplain below.	
Fields "d" and "e" are l	amount of hours that would have disasters and builds on the resil	e CCP is found in the hours of service that is provided to the eto be paid to county employees to provide a similar service iency of the community. In 2018, 14,777 volunteer hours restly rate for volunteer service) that would have been required a service.	e. Training reduces the sulted in a savings of	he impact to \$322,877.45
18)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 1	THIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partio	cipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) S	Turvey
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	ou feel may be impoi	rtant. Field is
	community and enhances the c	at includes CERT, CHSC, and RAT continues to expand and ommunities resiliency. Not only are members trained in resping, Say Something" perspective of security but it provides a n, and education.	oonse during a disast	ter and

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	I EM DE I AIL I	BUDGET						
	Agency Name	Washoe County Sheriff's Office	Project Manager Name & Contact #	Brooke How 785		Grant Manager Name & Contact #			G			
	IJ TITLE:	Washoe County Sheriff's Office Citizen	Corps Program - Main	tain								
		One Budget Per Funding Stream										
		Select Funding Stream	SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		2- Part Time Inremittent pooled position in support of WCSO CCP, annual basis	Maintain	SHSP	23	100%	2080	\$ 47,840.00	Citizen Corps - Washoe County	Community Resilience		SHSP
2								\$ -				
3								\$ -				ļ
4	Personnel Sub-Total							\$ -				
DERSON		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE BOSITIONS AND D	DELIVERABLES	NADDATIVE WILL	RE LISED TO ENGLIDE ITEMS LIS	TED WILL BE COM	\$ 47,840.00	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OU	TODE THE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Staff recruits and liaisons with volunteers, assists with training coordination and exercises, and public outreach. With three (3) programs and 250+ volunteers within a 625 sq mi service area, there is a need for more than just one person to manage our programs. Providing hands-on support at meetings/train helps our programs remain robust and successful. We have trained 1000+ individuals, and provided outreach and collateral materials at speaking engagements and Child ID.

Line	# CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

				Previous				Approved		Requested
Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type		QUANTITY	UNIT COST	TOTAL	Strategic Capacity	Core Capability	Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY		,,						
27		Office supplies/consumables/small equipment: this includes items such as pens, pencils, paper, post-it notes, tape, staples, easel paper, markers, binders, file folders, printer ink etc., and small office equipment such as staplers, laminator, etc.	Maintain	SHSP	1	3,000.00	3,000.00	Citizen Corps - Washoe County	Community Resilience	SHSP
28		Safety Fair and public information items. These are small useful items that are provided with printed material during discussions about emergency preparedness at safety fairs. The items assist with training, encouraging people to stop at the booth to gather safety information, and serving as reminders/examples of specific aspects of emergency preparedness. Items, including brouchures, bags imprinted with our website and other preparedness information, and a declaration that funding sources are provided through Division of Homeland Security.	Maintain	SHSP	1.00	3,600.00	2 600 00	Citizen Corps - Washoe County	Community Resilience	SHSP
28		Stückers/pins/pens/patches for volunteers. These are items for the volunteer uniforms to designate affiliation, training and EM response accomplishments.	Maintain	SHSP	1.00	1,800.00	-	Citizen Corps -	Community Resilience	SHSP
30		Awards/pins. Providing recognition to the volunteers reassures them that the time they donate to our program is valuable and appreciated. This acknowledgement keeps them connected and active in our programs. Useful quality items such as tools, flashlights, etc. for preparedness and emergency packs are used as singular rewards for exceptional service. The plaques are redistributed each year requiring only a new etched name plate for the deserving Team/volunteer(s). Pins, although small tokens, are proudly worn by the volunteers and are visible indicators of level of participation and for those 10 years+ in Program.		SHSP	1	1,575.00	1,575.00	Citizen Corps - Washoe County	Community Resilience	SHSP
31		Safety vests for training. The safety vests used for training, incidents and events are worn out and diminished. The worn vests will be used for CERT academies and other trainings, and may also be used in emergencies if necessary.		SHSP	1	1,200.00	1,200.00	Citizen Corps - Washoe County	Community Resilience	SHSP
32		Printing and/or purchasing for field response training guides and information. These are "continuing education" resources for active volunteers and include Field Response Guides for First Aid, or other critical information resources for CERT responders. This item also includes the purchase of First Aid/CPR books for ongoing training and recertification purposes (20 packs of 5 books per pack). These books are kept by the students.	Maintain	SHSP	1	3,200.00	3,200.00	Citizen Corps - Washoe County	Community Resilience	SHSP
33		Purchase Quick-Series pocket guides for distribution to volunteers. Provides quick access and description for CERT procedures, Flood awareness, incident Command Systems basics, conducting damage assessments, and providing appropriate assistance to people with functional needs. For training and emergencies.	Maintain	SHSP	1	2,500.00	2,500.00	Citizen Corps - Washoe County	Community Resilience	SHSP
34							-			
35	Planning Sub-Total						\$ 16,875.00			
	i idililing oub-rotal						Ψ 10,073.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Planning efforts include identifying potential hazards unique to our area and training and preparing to protect life and property, including that of our volunteers and our communities. Collaborating with TSA to enhance aviation security. Conduct robust community outreach encouraging the public to "make a kit, be the help till help arrives, and be prepared." Planning and securing speakers for CHSC to address terrorist-related topics. Office supplies, consumables, small equipment are needed to support the office functions. These items include items such as chair mats, pens, paper, staples, binder clips, poly-binders, and other desk top supplies that are used in the daily operations for training and public outreach and literature.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								

36				-	-	\$ -		
37						\$ -		ĺ
38				-		\$ -		
39						\$ -		ĺ
	Organization Sub-Total					\$ -		

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Citizens Corps Program operates on FEMA grants and under the WCSO. Staff provide leadership and program direction based upon grant objectives. Operational coordination is a core capability of the program and relies upon coordinated communication within the program, and on our web site to provide mass communication to 250+ volunteers and the public. Staff are responsible for items such an adversarial expenses between the public and private sectors and development of whole community partnerships, to include literature, brochures, both digital and print.

_				Previous				Approved		AEL Ref # (if	Requested
Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Funding	QUANTITY	UNIT COST	TOTAL	Strategic Capacity	Core Capability	AEL is not listed this will not be	Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL		Туре				Сараспу		approved)	Source
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Replacement backpacks for worn and dameged CERT backpacks, TEEN Cert designated backpacks and helmets.	Maintain	SHSP	1.00	1,470.00	\$ 1,470.00	Citizen Corps - Washoe County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
41		Supplies for currently issued CERT backpacks. Fully stocked backpacks are issued to new volunteers as they complete the training and join the program. This line item is for restocking supplies such as small tools and equipment, flashlights/light sticks, first aid supplies, PPE, safety items, replacement batteries, etc	Maintain	SHSP	1.00	7,500.00	\$ 7,500.00	Citizen Corps - Washoe County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
42		Each CERT team has a Conex storage unit for emergency and utility supplies. The conex may be used as a staging area and also contains large items that cannot be stored in the backpacks or duffel bag supplies. These funds would allow restocking items as they break or are used. Items include lights, items to support staging area, motor oil for the generators, wheel barrows, jacks, small tools (picks, axes, bolt cutters, brooms, ropes/tow straps, etc.), large traffic control devices etc.	Maintain	SHSP	1.00	6,800.00	\$ 6.800.00	Citizen Corps - Washoe County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
43		Duffel bag items. Increase the number of duffel bags that have being distributed to active volunteers in specific neighborhoods to be available for immediate assistance in emergencies. These are in addition to the backpacks currently issued to active volunteers. The duffels are to be filled with additional emergency response supplies similar to the CERT volunteer back packs, but with a wider variety and/ or bulkier items than can be kept in individual backpacks. These supplies will be used to provide additional response resources within an immediate neighborhood or area during a disaster. Additional items to be acquired include: additional first aid supplies, portable stretchers, storage clipboards, traffic signs/warning devices, medical supplies, etc. New command duffels and traffic duffels are needed to create a better "Go Bag" process enhance response in an emergency and for community events.	Maintain	SHSP	1.00	3,200.00	\$ 3,200.00	Citizen Corps - Washoe County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
44		Child ID Supplies. This includes consumable items such printer ink, and other items for the Volunteers In Police Service group during their Child ID events. This will provIde supplies for approx 24-30 child ID events during the year.	Maintain	SHSP	1.00	450.00	\$ 450.00	Citizen Corps - Washoe County	Community Resilience	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
45							\$ -				
46				1		+	\$ -				
47 48				1		-	\$ -				
49						1	\$ -				
	EQUIPMENT Sub-Total			1			\$ 19.420.00			1	

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Responding quickly to save lives, protect property and the environment, and meet basic human needs in the aftermath of a catastrophic incident are all part of the core capabilities of our program. Training and equipping CERT/NERT to respond is essential to our mission. Providing necessary equipment to volunteers for training, backpacks, support kits, and team conexes helps volunteers protect citizens, mitigate impacts, respond quickly and strengthen recovery efforts. Supporting the Child ID Program reduces risk and enhances response and recovery of lost children. Community outreach through speaking engagements, presentations and collateral materials improves awareness about disaster preparedness.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
50	your pro	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56						·					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Providing training to volunteers and citizens on disaster preparedness, fire safety, utility controls, disaster medical operations, light search and rescue, ICS organization and practices, disaster psychology, terrorism awareness, and situational awareness are core capabilities of the program. Volunteers are also trained in emergency communications, team leadership, traffic management, fire extinguisher training, fire evacuation, WebEOC and collaborative training with regional partners. Includes approved travel, per-diem and training for staff to enable them to provide relevant, FEMA-based instruction. Includes FEMA-based appropriate conference training for staff.

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59			<u> </u>			-					\$ -	
60											\$ -	
61			·			_					\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Exercise development relies on FEMA exercise guidance and HSEEP standards to establish criteria for well-designed exercises, steps and documents used in designing and conducting exercises, and identifying and evaluating challenges and opportunities for conducting exercises. Our unit's exercises, skills drills, and tabletops are designed and conducted to incorporate best practices. Exercises include a meeting with participants immediately following the exercise to review and evaluate the operations-based elements, use of forms, criteria used to develop exercise, and future trainings needed.

Ī					Budget Total		
					Request	\$ 84.135.00	

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Washoe County Sheriff's Office Citizens Corps Program - Maintain						
Funding Source:	SHSP	SHSP Funding Request:	\$ 84,135.00				
(SHSP, UASI, SHSP/UASI Split)	SHOF	UASI Funding Request:					

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Citizens Corps Program provides emergency response training and mitigation skills to local community volunteers from a nationwide approved curriculum. The training is directly transferable to any community and volunteers can support any statewide emergency. This adds a force-multiplier resource to any agency seeking support during and following a disaster. The goal into the future is to continue to bolster the number of trained volunteers that can support any community, enhance mitigation, and build stronger resiliency.

How have you collaborated with other agencies to maximize the resource's capacity?

The Washoe County Citizens Corps Program partners and collaborates with all local emergency responders, law enforcement agencies, local hospitals, county health district, and regional emergency manager. The program has membership in the Emergency Planning Committee (EPC), Local Emergency Planning Committee (LEPC), and Volunteer Organization Active in Disaster (VOAD), Inter-Hospital Coordinating Council (IHCC), Infragard, Medical Reserve Corps (MRC), and other local organizations and CERT programs. The program interacts, trains alongside, provides regular support to events, and participates in exercises and drills. This effort builds on awareness of the resources the program can provide and builds on partnering efforts to develop more efficient mitigation efforts and enhances resiliency.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The program utilizes the grant as the financial support to maintain its effectiveness, volunteers provided 14,777 hours of voluntary service which results in a cost savings to the county of \$322,877.45 per 2018 Bureau of Labor hourly rate for volunteer service. Washoe County provides the building, vehicles, and training facilities for the program to remain effective.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

There is no plan at this time that is in place to increase the offset by the organization, reduction in grant funding may result in purchases being postponed, reduction in the number of training classes, and a reduction in public information and program supplies.
The second of th
Please provide a five year funding summary for your project.

Over the course of the next five years the program is anticipating continued support from the grant program to enhance and increase the number of volunteers and training for the community. Without the financial support the program will operate on a more limited basis in support of resiliency for the county. If funding is no longer available, efforts will be taken to request support from sponsoring agency and from local stakeholders to offset costs for equipment, supplies, and equipment. With funding the program will continue to provide force-multipliers to emergency services through volunteer efforts. Replacement equipment will be purchased and enhancements to other facets of emergency and disaster support will be provided. Outreach will continue to be provided to the community in support mitigation, while not all community members attend training getting the information out about
preparedness is a critical to the overall mitigation strategy.

Nev	ada Homeland Security	PROJECT ID:	H							
Proj	ect Proposal for FFY19	Date Submitted	4/25/19							
1) PR	OJECT TITLE:									
2) PR	OPOSING/LEAD AGENCY:	DEM	DEM							
3) Pro	oject Manager Name/Title:	TBD, E	TBD, Emergency Management Preparedness Mgr.							
Pro	oject Manager Contact Info:	Phone: (775) 687-0306 Email: sparker@dps.state.nv.us								
4) Ad	dl Project Manager Name/Title:	Jackie	Conway, FPST Er	nerg. Mgr. & NTECC Co-Chair (P	hone Ext. 202)					
Ad	dl Project Manager Contact Info:	Phone: (775) 423-8848								
5) Finance/Grant Contact Name/Title: Kelli Anderson										
Fin	ance/Grant Contact Info:	Phone:	(775) 687-0321	Email: kanderson@dps.state.nv.	us					

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

◉

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To improve and sustain the tribal community emergency response efforts building of the CERT teams to include Battle Mountain Te-Moak Tribe of Western Shoshone, the tribes of the Reno Sparks Indian Colony, Washoe Tribe of Nevada and California, Pyramid Lake Paiute Tribe, and Fallon Paiute Shoshone Tribe. The CERT program is geared to provide support to emergency responders in disasters and emergencies. Since 2015 these tribes have attempted to sustain the CERT program to assist with public outreach, education, training and basic awareness for tribal members throughout Nevada. The new NTECC in collaboration with DEM will oversee the re-engagement and updated training provided to the tribal organizations throughout Nevada as funding allows. Tribal citizens will be trained and prepared to aid in response to emergencies until public safety first responders arrive on scene to minimize the level of harm, destruction of property and to improve the resiliency efforts for communities post-disaster, whether human or non-human caused.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: CITIZEN CORPS HSGP Project Type Supporting Strategic Capacity: Statewide Tribal [CITIZEN CORPS] If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL] Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Statewide Tribal Citizen Corps Program supports and promotes community resilience on tribal land through citizen preparedness teams and activities focused on response and recovery of disasters and/or emergencies to provide forced multipliers supporting tribal jurisdictions emergency management and response activities throughout Nevada. The This project will support sustaining tribal goals & objectives with regards to complimenting emergency response capabilities. The NTECC will provide direction on the delivery of this training. The project will also focus on maximizing the return on investment both monetarily and through resource support.

Information and resources, include training and exercise opportunities, are promoted to equip volunteer teams with the skills to support public emergency response agencies efforts before, during or after an emergency or disaster and for different levels of support.

		<u></u>			PROJECT ID:	H
roject Proposal for F	FY19	HSGP Fundir	ng Description	Date Submitted	4/25/19	
ROJECT TITLE REFERENC	E:	Statewide Tribal	Citizen Corps Program			
) PROCUREMENT - India	ate th	e method of pro	ocurement associated w	ith this pro	iect:	
Request for Proposa	Pro	ovide a brief expland	ation on your method of proc	urement - FIE	LD IS LIMITED TO VISIE	BLE TEXT BOX
O Sole Source		g the most strict of nticipated equipme	federal and state procurement	ent policies a	nd procedures for all	purchases for
Internal	li le a	nticipated equipme	nt needs.			
PROJECT IMPLEMENTA	NOITA	- Describe how, a	and by whom, the Proposed	d Project will	<i>l be implemented.</i> De	scribe
in rough order the process by w	hich the	project will be accomp	lished, identifying who (i.e. staff, o	contractor, or ?)	will perform what work	
jurisdictions to coordinate FEMA Program Manager level training and train-the-trainer opportunities to include supplies and materials for the classes and supplies for tribal and jurisdictional teams or citizens. This will include the Until Help Arrives and Stop the Bleed training components. The CERT Program Manager Training is 3 days and the Train-the-Trainer is 2 days.						
section is for you to tel		HO will be receiving	e participating agency(s) and the money for your proposition (City, County, State for NTECC	oject - If it's y		ncy]
Agen 12(a) Nevada DEM	us W	HO will be receiving	Political Jurisdiction (City, County, S	oject - If it's y	rou, put in your age Project Representative (ncy]
section is for you to tell	us W	HO will be receiving	Political Jurisdiction (City, County, S	oject - If it's y	rou, put in your age Project Representative (ncy]
Agen 12(a) Nevada DEM	us W	HO will be receiving	Political Jurisdiction (City, County, S	oject - If it's y	rou, put in your age Project Representative (ncy]
Agen 12(a) Nevada DEM 12(b) 12(c)	cy (FD, P	HO will be receiving D, etc.)	Political Jurisdiction (City, County, S State for NTECC	oject - If it's y State, etc.) Jack	Project Representative (ncy] individual)
12(a) Nevada DEM 12(b) 12(c) SUSTAINMENT - Identi	t us Wf	HO will be receiving D, etc.)	Political Jurisdiction (City, County, S State for NTECC Jobligation created by the F	Jack Project, and p.	Project Representative (ncy] individual)
12(a) Nevada DEM 12(b) 12(c) SUSTAINMENT - Identi	t us Wf	HO will be receiving D, etc.)	Political Jurisdiction (City, County, S State for NTECC	Jack Project, and p.	Project Representative (ncy] individual)
SECTION IS FOR YOU to tell Agen 12(a) Nevada DEM 12(b) 12(c) SUSTAINMENT - Identi Tribes will look at leverage NTECC. STATEWIDE and/or U.	fy any cling exi	continuing financial sting and future res	Political Jurisdiction (City, County, S State for NTECC Jobligation created by the F	Project, and portion in collaboration	Project Representative (in its Conway) Proposed funding solutions with DEM through the converse of the conver	individual) tion ugh the

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: H

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Statewide Tribal Citizen Corps Program

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	•		
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
			\$ 0.0
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTo
Background checks for team volunteers at \$29.25 for volunteers x 10 volunteers.			
		\$ 292.50	\$ 292.
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
Manuals, class supplies and volunteer materials.		\$ 300.00	\$ 300.
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTo
Travel for key tribal staff/members who will manage the CERT program up to 15 persons to include mileage, hotel and per diem.		\$ 9,986.52	\$ 9,986
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTo
			\$ 0.0
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTo
			\$ 0.0
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTA

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: H
Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Statewide Tribal Citizen Corps Program

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Work with NTECC tribal staff to schedule trainings for spring/summer 2020 and 2021	09/01/19	06/30/21	18
3	Promote and coordinate trainings	09/30/19	07/31/21	23
4	Order training and volunteer supplies and materials through approved procurement process	01/01/20	05/29/20	5
5	Support jurisdictions with background checks for volunteers	04/01/20	10/30/20	7
6	Close-out		08/30/21	
7				
8				
9				
10				
11				
12			_	

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Citizen Corps programs in Nevada provides support and technical guidance to volunteer agencies who partner with public emergency response agencies and private and public communities. The support these organizations/volunteers provide is giving emergency help to community members until official first responders arrive in all types of emergencies to include victims of active shooters, assisting in traffic control, educating community members on reporting suspicious activities. The primary goal is to promote preparedness, prepare for response and to build resiliency in tribal communities throughout Nevada for all types of disasters and emergencies to include multiple types of terrorist attacks on the citizens of Nevada.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

The FFY19 HSGP strategies approved by the Resilience Commission in an effort to build resiliency in communities and improve overall Operational Coordination throughout Nevada includes Citizen Corps as a capacity that should be maintained. The efforts to continue working with jurisdictions that do not receive regular funding and to assist tribal jurisdictions with citizen corps programs to include Community Emergency Response Teams, Be The Help and Stop the Bleed began in 2017.

c. Can this project funding request be reduced? Is it scaleable? YES NO (•) Explain below.

If unavoidable, the project can be reduced and would mean that jurisdictions without the means will not be able to continue the work to continue building resiliency through community preparedness that the Citizen Corps programs provide. Without this funding these entities have not been able to maintain this capacity without support.

		_	<i></i>	•	P) RESUBMISSION	PROJECT ID:	H			
	ect Proposal for		HSGP Fur	nding Descrip	tion	Date Submitted	4/25/19			
PROJ	ECT TITLE REFEREN	ļ		ibal Citizen Corps	Program					
	d. Can this project co		_		Explain below.					
rields "d" and "e" are limitied to visible text box size	This project supports Citizen Corps preparedness efforts for jurisdictions that do not have the ability financially or the manpower to build on their capacity.									
imiti	e. Does this project p	provide a I	MEASUREABLE	statewide benefit?	YES NO E	plain below.				
Fields "d" and "e" are		ns and ca	an be used as	a forced multiplier	to jurisdictions and the volu during an event and towar					
18)	THIRA COMPLETION	- Please	indicate the	participation level	in completing the 2018 T	HIRA Survey. CHOO	SE ONE:			
	YES - Agency HA	AS partici	ipated in the 2	2018 Threat and Ho	azard Identification Risk As	ssessment (THIRA) S	urvey			
		-	•		d Hazard Identification Ris		,			
19)	ADDITIONAL COMM limited to the visible to		l - Please indi	icate any addition	al project commentary yo	u feel may be impor	tant. Field is			
	programs and other volves response agencies thro- for Teen CERT, Railwa	lunteer ac oughout N ny safety t	ctivities that ha Nevada to impr teams specific	ave a focus on resp rove the safety of c to Homeland Sect	laboration to improve the conse to terrorist attacks are our communities. Some acturity local partners, volunte, assisting in CASPER Ass	nd in alignment of em ivities include workin ers participation in IC	nergency g with schools CS training			
	citizen groups/commun Casualty Incident and t aids in immediate responding agencies a	nity-based the terrori onses and nd the ma	d organizations ist threats they d in the recoverance annower they	s, schools, private so learn about in the ery of incidents. Trapprovide can be use	s have received a high number sector in response to the floor media. Training and coord ained volunteers are a valued in required match for fed and local jurisdictions thro	boods of 2017, the 1 C linated resilience in c ed asset as a forced leral emergency/disa	October Mass communities multiplier for			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEWIDETAIL	BUDGLI					
	Agency Name	DEM for NTECC	Project Manager Name & Contact #	Jim Walker, Jackie Conw FPST/NTEC	ay,	Grant Manager Name & Contact#	Kelli Anderson 775-6	587-0321/Sonja Wil	iams 775-687-0388		н
	IJ TITLE:	Statewide Tribal Citizen Corps									
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1 2								\$ -			<u> </u>
3								\$ -			+
4								\$ -			
	Personnel Sub-Total	S FOR EACH LINE ITEM AROVE DI FASE EVRI AINE IN D						\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

L	ine #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
			Positions Require: Fringe to be separate from Personnel Costs above									
L	5								\$ -			j .
L	6								\$ -			j .
	7								\$ -			i l
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9		Mileage to DEM for 6 persons from various tribes in Nevada involved in CCP/CERT at \$0.58 per mile to CERT Specific Training estimate	New / Enhance / Past / Competitive	SHSP	Training	FEMA Prog Mgr training and Train-the-Trainer 5-day training	1.00	1,000.00	1,000.00		Operational Coordination	
10		Hotel for 6 people from various tribes in Nevada for 5 days at GSA \$94	New / Enhance / Past / Competitive	SHSP	Training	FEMA Prog Mgr training and Train-the-Trainer 5-day training	1.00	2,820.00	2,820.00	Citizen Corps - Statewide Tribal	Operational Coordination	
11 12		Per Diem for 6 persons at \$55 per day for 5 days	New / Enhance / Past / Competitive	SHSP	Training	FEMA Prog Mgr training and Train-the-Trainer 5-day training	1.00	1,650.00	1,650.00	Citizen Corps - Statewide Tribal	Operational Coordination	
13		CERT Program Manager Training	Maintain	SHSP	Planning	Program Manager Training at National Conference tentative San Diego, CA for up to 3 persons. Narrative has breakdown.	1.00	2,301.00	2,301.00	Citizen Corps - Statewide Tribal	Operational Coordination	
15 16												
17 18												
19 20									-			
21	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA							7,771.00			

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Year 2 CERT Related training for tribes at DEM. CERT Program Manager Training for NTECC Contract Staff-National CERT Conference in San Diego, CA: Lodging at \$174 per night for 2 nights for 3 persons (DEM, Resilience CCP Rep and one additional representative)=\$1,044,00 Per Diem 3 people for 3 days at \$71 per day for 3 people=\$639.00, mileage to and from airport up to \$80 per person based on actual=\$240.00, Airport parking economy rate up to \$14.00 per day per person up to 4 days based on actual \$168.00, ground transportation from and to airport only at destination up to \$70 per person=\$210.00 Tentatative Total=\$2,301.00

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
			New / Enhance / Past /					Citizen Corps -	Operational	
36		Back-ground checks for team volunteers	Competitive	EMPG	10.00	29.25	\$ 292.50	Statewide Tribal	Coordination	SHSP
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ 292.50			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Year 2 CERT program for volunteers graduating Basic Academy.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed this	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY, MOST HAVE AN ABL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		Training Manuals and supplies	Maintain	SHSP	20.00	15.00	\$ 300.00	Citizen Corps - Statewide Tribal	Operational Coordination	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
41		Volunteer Backpacks and equipment	Maintain	SHSP	20.00	90.00	\$ 1,800.00	Citizen Corps - Statewide Tribal	Operational Coordination	21GN-00-CCEQ Equipment, Citizen Corps	SHSP
42							\$ -				
43							\$ -				
44 45							\$ - \$ -		1		
45							s -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 2,100.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Year 2 CERT Training supplies and equipment for volunteers

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		ocurement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			·			<u>'</u>					\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE HP, PLEASE SEE EHP SCREENING MEMO

					Budget Total Request	\$ 10,163.50	

Project H

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Statewide Tribal NTE	CC Citizen Corps CERT Pro	ogram
Funding Source:	SHSP	SHSP Funding Request:	\$10,579.02
(SHSP, UASI, SHSP/UASI Split)	31131	UASI Funding Request:	\$0.00

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The statewide Tribal NTECC Citizen Corps Project will allow the continuation of support to build on the existing CERT programs with a focus on but not exclusive of Battle Mountain Te-Moak Tribe of Western Shoshone, the tribes of the Reno Sparks Indian Colony (RSIC), Washoe Tribe, Pyramid Lake Paiute Tribe, and Fallon Shoshone Paiute Tribe.

The FFY19 funding will focus on coordinating training and for Tribal CERT Program Managers, to include train-the-trainer in collaboration and to support emergency management capabilities for Operational Coordination purposes. The project will assist tribes in strategizing how to maximize the forced multiplier of the volunteers, when planning, training, exercising, responding and recovering from an incident as identified in the 2018 THIRA and Stakeholder Preparedness Report completed for Nevada. The CERT volunteers serve as forced multipliers to provide lifeline services as identified in the Homeland Security Community Lifelines in the National Response Framework Update (Fourth Edition) by contributing to preparedness and response efforts for local jurisdictions and tribal governments related to emergencies.

Volunteers are trained for first aid, communications, collection of information for emergency response to include post-disaster assessments, assist in delivery and coordination and dissemination assistance of food, water and sheltering, traffic control assistance. There are various skilled levels of volunteers and stakeholder partners that provide preparedness training to include but not limited to financial and fire safety preparedness. This partnership has continued from the former Nevada Citizen Corps Council and includes partners such as VOAD and the Medical Reserve Units.

How have you collaborated with other agencies to maximize the resource's capacity?

We are leveraging training assistance with Elko County's Northeastern Nevada CERT, NTECC staff representatives, tribal emergency managers, and Nevada Division of Emergency Management.

All CERT programs support emergency management, fire departments and law enforcement agencies for tribal jurisdictions through leveraging volunteers as forced multipliers in staffing through exercises, training and response activity support. In real life emergencies the CERT volunteers are a shareable and deployable asset for response and recovery efforts.

Project H

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

Volunteers, once trained, provide a return on investment to the tribal entities with volunteer hours that can be utilized for match and add value to any emergency management related activity. This can be anything from traffic control, crowd management, standing up EOC's, phone banks, delivery of neighborhood emergency notifications such as boil water notices. If training 60 volunteers in a year, costs \$15,605.00 estimated for FFY20 and 20% or 12 volunteers join a team and provide 40 volunteer hours per year for 2 years at \$22.61 per hour for Nevada in 2018 according to the Independent Sector at https://independentsector.org/resource/vovt_details, that would be an estimated value of \$1,808.80 Per person per year or \$3,617.60 for 2 years. For 12 volunteers over the 2-year period that would equate to a \$43,411.20 value. This is a basic estimation and varies depending on jurisdiction.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Tribal jurisdictions are provided with technical assistance on a variety of options they can use to sustain activities to include identifying additional sources of funding and value added resources and working with stakeholder entities to help support training and exercise materials and supplies. There is no anticipated CERT Program Manager salary funding identified at this time for local or tribal jurisdictions programs. All activities to provide training will include train-the-trainer activities to help local and tribal jurisdictions sustain and enhance their capabilities.

This Project will assist local jurisdictions identify ways the CERT program will help offset multiple emergency management related capabilities. An example of local jurisdiction support would be for jurisdictions to look at their other funding sources/resources such as a staff person funded for emergency management activities to oversee the volunteer teams, identify a volunteer from the tribe to oversee the program and report to the emergency manager or NTECC representative, assist in the coordination and support of the volunteer background checks to ensure they are deployable and shareable depending on the hazard or training supplies, materials and locations. Each tribal location will determine their individual plan/strategy.

Please provide a five year funding summary for your project.

FFY19

Planning activities to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Includes funding for training expenses to train 20 volunteers in this year 1 of the 5-year projection. Support will also cover the travel and related training and meeting materials for the facilitators' attendance and delivery and up to 12 volunteers travel expenses to attend. NTECC representatives will work with tribes to programmatically develop a strategic plan to continue to build resiliency through the growth of shareable and deployable volunteers and meeting at the annual Preparedness Summit. Funding to support this effort is projected at \$10,579.02

FFY20

Planning activities year 2 to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Includes supplies to train up to 40 volunteers in the year. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY20 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit and the National Conference attendance for the NTECC representatives. Funding to support this effort is projected at \$12,408.96

FFY21

Planning activities year 3 to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Includes supplies to train up to 40 volunteers in the year. Support will also cover the travel and related training and meeting materials for

Project H

the facilitators. Jurisdictions TBD for the FFY20 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit and the National Conference attendance for the NTECC representatives. Funding to support this effort is projected at \$12,408.96

FFY22

Planning activities year 4 to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Includes supplies to train up to 40 volunteers in the year. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY20 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit and the National Conference attendance for the NTECC representatives. Funding to support this effort is projected at \$12,408.96

FFY23

Planning activities year 5 to include train-the-trainer and increased volunteer capabilities by way of providing vetting support to include back-ground checks and CERT volunteer Backpacks. Includes supplies to train up to 40 volunteers in the year. Support will also cover the travel and related training and meeting materials for the facilitators. Jurisdictions TBD for the FFY20 funding. The project will continue to develop and implement a strategic plan in an effort to build resiliency through the growth of shareable and deployable volunteers using video/teleconferencing and meeting at the annual Preparedness Summit and the National Conference attendance for the NTECC representatives. Funding to support this effort is projected at \$12,408.96

le'	vada Homeland Security	Grant Pr	ogram (l	HSGP) RESUBIV	IISSION	PROJECT ID:	J
rc	oject Proposal for FFY19	HSGP Fu	nding De	scription		Date Submitted	4/25/19
	ROJECT TITLE:			Office - Cybersecurity	y Maintain		
P	ROPOSING/LEAD AGENCY:	Washoe Cou	unty Sheriff's	Office			
P	roject Manager Name/Title:	Max Brokaw	, Lieutenant				
P	roject Manager Contact Info:	Phone: (775) 328-2847	Email: mbrokaw@wa	shoecounty	/.us	
Α	ddl Project Manager Name/Title:						
Α	ddl Project Manager Contact Info:	Phone:		Email:			
F	inance/Grant Contact Name/Title:	Laura Daniel	S				
F	inance/Grant Contact Info:	Phone: (775) 328-3013	Email: Idaniels@was	shoecounty.	us	
	CLASSIFICATION - Check the pi	rimary intent	ion of the Pr	oposed Project:			Choose one:
				ecently addressed this c ects in this category mu			
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 STI	RATEGIC CAPACITY*			O
	*All NEW projects are competitive						
	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hor capability); and <u>where</u> (identify the geo	e Proposed Proje e: "To (establish, meland Security	ect in terms of Ca improve, expan (NCHS) FFY18 pa	APABILITY. The statement d, double, sustain, etc.)] riorities (See #10)]; FOR W	should describ ; OF WHAT CO (identify the	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPA he direct users/beneficial	BILITIES [consideries of the
	Nevada State demographics and suspected to be caused by foreign preservation and recovery efforts	gn or domesti					
	PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities he FFY19 Strategic Capacity Maintain HSGP Project Type Supporting Strat	Emergency Nere: https://fe ned*: regic Capacity:	lanagement / ma.gov/core- CYBERSECU Incident Resp	Agency (FEMA) list of (capabilities / https://winkity Onse Plan [CYBERSEC	Core Capabil www.fema.go	lities and the Crossw	alk of Target
	If OTHER, please choose FFY16-18 N	-					
	Core Capability aligned with Mainta	ained Project:	CYBERSECU	RITY [Mission Area - PI	ROT]		
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro STRATEGIC CAPACITY JUSTIF	ogram guidanc	e per the Noti	ce of Funding Opportur	nity when rel	leased.	
	Cybersecurity involves several le foreign and domestic actors. This Nevada too assist statewide sign	evels from pre s project fund	vention to inc	cident response. Critic existing response cap	cal infrastru	cture is a likely targe	t of both

						SGP) RESUBMISS	ION	PROJECT ID:	J				
Pro	ject P	roposal for FF	Y19	HSGP Fund	ling Des	cription		Date Submitted	4/25/19				
PRO	JECT T	ITLE REFERENCE	:	Washoe County	y Sheriff's C	Office - Cybersecurity Mai	intain						
10)	PROC	UREMENT - <i>Indica</i>	ate th	e method of p	rocureme	nt associated with thi	is proj	ect:					
	O Re	quest for Proposal	Pro	vide a brief expla	anation on y	our method of procuremen	nt - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:				
	O So	le Source	All pu	ırchases will follo	ow by the W	ashoe County Grants Pu	ırchasiı	ng Guidelines					
	Int	ernal											
11)	PROJE	CT IMPLEMENTA	TION	- Describe how,	, and by wl	nom, the Proposed Proje	ct will	<i>be implemented.</i> De	scribe				
in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work													
×	Cyber		will pro	ocure necessary	equipment/	shoe County Sheriff's Offit and software. The grant threats.							
SIBLE TEXT BO	WCSO continues to assign full time personnel to Cyber related matters including investigation and computer forensics, to include supervisory and non supervisory personnel. WCSO has partnered with regional state and federal law enforcement on Cyber related matters. These partners include the FBI, DHS, and NVAGO. WCSO will continue attempts to expand regionalization efforts to include more entities, drawing upon skill sets available. During prior award periods, the WCSO Cyber personnel has seen a large increase in required responses and rapidly evolving												
FIELD IS LIMITED TO VISIBLE TEXT BOX	attack		sonnel	I responded to se		s seen a large increase in ents and expect the numl							
12)	sectio	n is for you to tell	us WH (FD, PD	HO will be received, etc.)	Political	pating agency(s) and jurioney for your project - Industrial (City, County, State, etc.) The County	f it's y		ncy]				
	12 (a)												
	12 (b)												
	12 (c)												
13)						on created by the Project,							
FIELD IS LIMITED TO VISIBLE TEXT BOX	Equipment and/or software purchased with these funds will be supported by the Washoe County Sheriff's Office, once and if funding ceases, however the capabilities may be reduced. WCSO will commit personnel, additional equipment and/or software, and office space for the project.												
14)		-				ng percentage makeup of S JECT TOTALS' on Page #3	Statewic	de -vs- UASI is noted b	elow for				
	[1	00% 0%											

Urban Area

(UASI)

Statewide

(SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION **Project Proposal for FFY19 HSGP Funding Description** PROJECT TITLE REFERENCE: Washoe County Sheriff's Office - Cybersecurity Maintain

PROJECT ID: J Date Submitted 4/25/19

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	cific. Identify	UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
Cyber works with FBI and responds to cyber intrusions throughout No. NV local agencies and business.			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
The Washoe County Sheriff's office was established in 1861. The Washoe County Sheriff's Office provides law enforcement services for the unincorporated area of Washoe County. We also are responsible for operating the only adult detention facility for pretrial detainees and sentenced misdemeanants within Washoe County. The Sheriff's Office is divided into three Bureaus. While each Bureau has a unique function, they impact the operation of the other Bureaus. The Washoe County Sheriff's Office strives to ensure public safety by building trust and creating partnerships within the diverse communities in which we serve.			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
The Sheriff's Office is divided into three Bureaus. While each Bureau has a unique function, they impact the operation of the other Bureaus. The Washoe County Sheriff's Office strives to ensure public safety by building trust and creating partnerships within the diverse communities in which we serve. 15c) Equipment [Procurement and installation of equipment, systems, facilities] Purchase to maintain necessary software to conduct incident response and data recovery of government and/or critical infrastructure attacked or compromised systems. Purchase of 3 laptops to replace outdated laptops. Purchase annual warranties on DEM funded equipment.		\$ 42,035.00	\$ 42,035.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
N/A			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
N/A			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
The Cybersecurity division currently has 5 full time employees and 3 part time. These employees are a combination of Washoe County Sheriff's Office, Reno Police Department, Sparks Police Department, Homeland Security Investigations, FBI, and the Attorney General's Office.			\$ 0.00
4F-) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS	\$ 0.00	\$ 42,035.00	\$ 42,035.0

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: J

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office - Cybersecurity Maintain

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Board of County Commissioners acceptance of award	10/01/19	12/31/19	3
3	Competitive quote process	01/01/20	03/01/20	2
4	Order software/equipment	04/01/20	06/30/21	14
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

_	B 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1/	N	
a.	Does this project have a nexus to terrorism?	YES () NO (Explain below.

Cyber attacks are well known to be conducted by terrorist organizations, both domestic and foreign. An attack to the State's Infrastructure would be an attack falling under terrorist behavior, which could cause substantial disruption to services such as emergency services, traffic control, public health, etc. Cyber terrorists continually probe networks for attacks.

b. Does this project align with the FFY19 strategic capacities? YES NO DEXPLAIN ENDING

Cybersecurity has seen an increased focus worldwide due to recent breaches and attacks. This proposal addresses the response to suspected incidents when they occur. The immediate preservation of data to include attack information is critical in preventing further disruption, increasing the chances of identifying the attackers, and recovering critical data.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Requested funding reductions can be reduced at various levels and still remain effective, but the response and data recovery capabilities would be impacted and reduced due to elimination or reduction of training or equipment updates. This project helps sustain the current Cybersecurity project as equipment is expected to be replaced and the addition of personnel will require equipment and training.

Neva	ada Homeland Securit	y Grant Program	(HSGP) RESUBMISSION	PROJECT ID:	J
Proj	ect Proposal for FFY19	HSGP Funding D	escription	Date Submitted	4/25/19
PROJ	ECT TITLE REFERENCE:	Washoe County Sherif	f's Office - Cybersecurity Maintain		
	d. Can this project continue w	vithout funding? YES 💿	NO (Explain below.		
Fields "d" and "e" are limitied to visible text box size	incidents, requiring other suppo capable of responding to these	rt entities to assist. The \types of incidents immed nnel does not become tra	ation of funding would critically dama Washoe County Sheriff's Office is th diately to mitigate the incident. If the ained within this funding window, it w	e only entity in North program ended, soft	ern Nevada ware expired,
imiti	e. Does this project provide a			plain below.	
Fields "d" and "e" are	and assistance with local, state, multiple incidents throughout No	and federal partners. Thorthern Nevada and cond	ate Cyber infrastructure. This projective Washoe County Sheriff's Office a ducted investigations involving state g specialized personnel and equipment	nd partners have res wide infrastructure. (sponded to
18)	THIRA COMPLETION - Please	e indicate the participat	ion level in completing the 2018 To	HIRA Survey. CHOO	SE ONE:
	VFS - Agency HAS partio	inated in the 2018 Three	at and Hazard Identification Risk As	ssessment (THIRA) S	urvev
			Threat and Hazard Identification Ris		
	,	•	additional project commentary yo		
19)	limited to the visible text box	1 - Tiease maicate arry	additional project commentary you	u reermay be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

		LINE II EM DE I ALL BUDGE I										
	Agency Name	Washoe County Sheriff's Office	Project Manager Name & Contact #			Grant Manager Name & Contact #	Laura Daniels, (775) 328-3013					J
	IJ TITLE:	WCSO Cybersecurity Maintain										
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3								\$ -				+
4								\$ -				
	Personnel Sub-Total							\$ -				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Li	ine #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity			Requested Funding Source
			Positions Require: Fringe to be separate from Personnel Costs above										
	5								\$ -				
	6								\$ -				
	7								\$ -				
	8								\$ -				
		Fringe Sub-Total							\$ -		·	·	

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Exercise Equipment	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
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17			1						-			4
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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE), NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
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31							-			
32							-			
33					<u> </u>		-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Equipment Equipment Equipment Equipment Equipment Equipment Equipment DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILLED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPULANCE) SEE YOUN GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY, MUST HAVE AN AEL EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, Teel Tech, etc). Also includes encryption breacking software. (renewals and new purcahses) 40 Maintain Microsoft Sufface Pro 6 incident response / triage / forensic analysis computer 41 Microsoft Sufface Pro 6 incident response / triage / forensic analysis computer 42 43 44 44 45	AEL is not be Requested Funding Source
Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, Teel Tech, etc) Also includes encryption breacking software. (renewals and new purcahses) SHSP 1.00 36,938.00 \$ 36,938.00 \$ 36,938.00 Response Plan Cybers-Incident Cyber - Incident Cyber - Inciden	
methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, Teel Tech, etc) Also includes encryption breacking software. (renewals and new purcahses) Maintain Maintain Maintain Maintain Maintain Maintain SHSP 1.00 36,938.00 \$ 36,938.00 Response Plan Cyber - Incident Cybersecurity Computer, Integrated Professionally States (Cyber - Incident Cybersecurity Cybersecurity Computer, Integrated Professionally States (Cybersecurity Cybersecurity	
41 forensic analysis computer 3.00 1,699.00 \$ 5,097.00 Response Plan Cybersecurity Computer, Integrated Plan 42 43 44 44 44 45 45 46 47 <td< td=""><td></td></td<>	
43 44	
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47 Maintain SHSP	
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Cyber related equipment is unfortunately an area that has a much shorter lifespan than others due to ever increasing leaps in technology. We have found that a two to four year lifespan for Cyber adequately balances responsibility for tax payer monies with the ability to appropriately respond to Cyber based incidence of computer equipment over grant cycles.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			<u> </u>								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$	
60			·							\$ -	
61			•							\$ -	
	Exercise Sub- Total		·							\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total			
					Request	\$ 42.0	135 00	

Project J

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Washoe County Sher	riff's Office - Cybersecurity Maintain						
Funding Source:	SHSP	SHSP Funding Request:	\$42,035.00					
(SHSP, UASI, SHSP/UASI Split)	ארואר	UASI Funding Request:						

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Sheriff's Office continues to dedicate full time law enforcement personnel to investigate Cyber related crimes and incidents. Washoe County invested substantial NON GRANT county funding in fiscal years 15/16/17 to enhance the investigative infrastructure and Cyber response and investigations capabilities. Cyber security incidents requires specialized skills by both law enforcement and non-law enforcement entities. By sustaining current specialized equipment and software and skills to law enforcement, they will be better equipped to interact with government and private sector incident responders and better advise private industry partners on cyber threats and infrastructure protection. Cyber personnel continue to see increases of required Cyber related responses and have participated in state and local breach incidents.

Nevada State demographics and geographical distances impact response capabilities. A significant Cyber Security incident suspected to be caused by foreign or domestic actors would require an immediate law enforcement response for evidence preservation and recovery efforts.

How have you collaborated with other agencies to maximize the resource's capacity?

The Cybersecurity division collaborates with the Reno Police Department, Sparks Police Department, Homeland Security Investigations, FBI, and the Attorney General's Office.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

General funds are used for the day to day operation of this division. The elimination of funding would critically damage the capability to respond to incidents, requiring other support entities to assist. The Washoe County Sheriff's Office is the only entity in Northern Nevada capable of responding to these types of incidents immediately to mitigate the incident. If the program ended, software expired, equipment failed, or new personnel does not become trained within this funding window, it would require substantial future funding to rebuild the capabilities.

Project J

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

No. The funds to support and sustain the equipment and training within the Cyber Crimes Unit are not obtainable through the Washoe County Sheriff's Office at this time or expected to become available over the next five years.

Please provide a five year funding summary for your project.

Over the course of the next five years the program is anticipating continued support from the grant program to sustain and enhance the investigative infrastructure and Cyber response and investigations capabilities. Without the financial support the program will likely fail or at least operate on a much smaller less productive scale.

If funding is no longer available, efforts will be taken to request support from sponsoring agency and from local stakeholders to offset costs for equipment, supplies, and training.

With funding the program will continue sustaining current specialized equipment and software and skills to law enforcement, they will be better equipped to interact with government and private sector incident responders and better advise private industry partners on cyber threats and infrastructure. Replacement equipment, software license and training will be purchased to sustain the programs ability to best serve our community.

	ada Homeland Securit	•							
oj	ect Proposal for FFY1	9 HSGP Fund	ding Description		Date Submitted				
PR	ROJECT TITLE:								
PR	ROPOSING/LEAD AGENCY:								
r	oject Manager Name/Title:								
rc	oject Manager Contact Info:	Phone:	Email:						
١d	dl Project Manager Name/Title:								
d	dl Project Manager Contact Info:	Phone:	Email:						
in	nance/Grant Contact Name/Title	:							
in	ance/Grant Contact Info:	Phone:	Email:						
(CLASSIFICATION - Check the	primary intentio	n of the Proposed Proj	ect:		Choose o			
	_		jects have recently addressast. All projects in this ca						
	Project will MAIN	TAIN AN APPROVE	D FFY19 STRATEGIC CAP	ACITY*					
•	*All NEW projects are competitive								
	aligning with Nevada Commission on F capability); and <u>WHERE</u> (identify the go								
	PROPOSED STRATEGIC CAPA capability. Reference the Feder	= =							
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(here: https://fem	nagement Agency (FEM	A) list of Core Capabi	lities and the Crosswa	alk of Targe			
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Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID:										
Proj	ect P	roposal for FFY		Date Submitted						
PRO.	PROJECT TITLE REFERENCE:									
LO)	PROC	UREMENT - Indicate	e the method of pro	curement associated with this	proj	ect:				
	So	quest for Proposal le Source ernal	Provide a brief explana	tion on your method of procurement	- <mark>FIEL</mark>	D IS LIMITED TO VISIE	BLE TEXT BOX:			
11)				nd by whom, the Proposed Project shed, identifying who (i.e. staff, contractor		•	scribe			
FIELD IS LIMITED TO VISIBLE TEXT BOX										
12)		n is for you to tell us		participating agency(s) and juris g the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's y		ncy]			
	12(a)									
	12(b)									
	12(c)									
13)	SUST	AINMENT - Identify a	ny continuing financial	obligation created by the Project, a	nd pr	oposed funding solu	tion			
FIELD IS LIMITED TO VISIBLE TEXT BOX										

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

Nev	evada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID:									
Pro	ject Proposal for FFY19 HSGP Funding Description		Dat	e Submitted						
PRO.	JECT TITLE REFERENCE:									
15)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cos									
,	15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strate		LV-UASI	State-wide	SubTotal					
	15b) Organization [Establishment of organization, structure, leadership, and operation]		LV-UASI	State-wide	SubTotal					
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are limitied to visible text box size										
tex	15c) Equipment [Procurement and installation of equipment, systems, facilities]	-	LV-UASI	State-wide	SubTotal					
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imi	AF-II) Training (S.)	. ,	11/ 11/051	State wide	CubTotal					
re	15d) Training [Development and delivery of training to perform assigned missions and tas	sksj	LV-UASI	State-wide	SubTotal					
Fields										
Щ										
	15e) Exercise [Development and execution of exercises to evaluate and improve capabiliti	ies]	LV-UASI	State-wide	SubTotal					
	250) Exercises (percoprient and execution of exercises to evaluate and improve capabilities)									
	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capa.	bility]	LV-UASI	State-wide	SubTotal					
			LV-UASI	State-wide	TOTAL					
	15g) PROJECT TOTALS									

Nevada Homeland Security	PROJECT ID:		
Project Proposal for FFY19	Date Submitted		
PROJECT TITLE REFERENCE:			

16)	TASKS & SCHEDULE - Identif	fv the necessary ta	asks/steps. and	time needea

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

a.	Does this project have a nexus to terrorism? YES NO Explain below.
	•
b.	Does this project align with the FFY19 strategic capacities? YES NO Explain below.
c.	Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
	· · · · · · · · · · · · · · · · · · ·

Neva	ada Homeland Security Grant Program (HSGP) RESUBMISSION	PROJECT ID:	
Proj	ect Proposal for FFY19 HSGP Funding Description	Date Submitted	
PROJ	ECT TITLE REFERENCE:		
	d. Can this project continue without funding? YES NO Explain below.		
ed to visible text box size			
Fields "d" and "e" are limitied to visible text box size	e. Does this project provide a MEASUREABLE statewide benefit? YES NO Ex	xplain below.	
18)	THIRA COMPLETION - Please indicate the participation level in completing the 2018 To YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk	ssessment (THIRA) Sur	vey
19)	ADDITIONAL COMMENTARY - Please indicate any additional project commentary yo limited to the visible text box	u feel may be importa	ınt. <mark>Field is</mark>

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

LINE ITEM DETAIL BUDGET											
	Agency Name	Office of the Secretary of State	Project Manager Name & Contact #	Wayne Thor (775) 684-5		Grant Manager Name & Contact #	Ashley Dale (775) 684-5738				K
	IJ TITLE:	Netflow and Intrusion Detection System	1								
		One Budget Per Funding Stream									
		SHSP									
Line #		PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
3								\$ - \$ -			+
4					1			\$ -			+
	Personnel Sub-Total							\$ -		TEMS MAY NOT BE DUDCHASED OU	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5					•			\$ -			
6					•			\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
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26	·								-			+
27									-			+
	Travel Sub-Total	DE EACH I INE ITEM ABOVE - DI EASE EVELAINE IN DETA							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -	·		
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY. NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL.									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40		Tier 1 - IDS netflow monitoring and analysis (monthly cost)	Maintain	SHSP	12.00	7,440.00	\$ 89,280.00	Cyber - Threat Identification	Cybersecurity	05NP-00-IDPS System, Intrusion Detection/Prevention	SHSP
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -	-			
48							\$ -				
49	FOLUDATAL Sub Tatal						\$ -				
	EQUIPMENT Sub-Total						\$ 89,280.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #		TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

			Budget Total		
			Request	\$ 89,280.00	1

Project K

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19	9 Project Name:	Netflow and Intrusion	n Detection System Moni	toring and Analysis
Funding Source:		SHSP	SHSP Funding Request:	\$89,280.00
	UASI, SHSP/UASI Split)	SHOF	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This project is a statewide resource because it improves the cybersecurity posture of 12 of Nevada's 17 counties (Churchill, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Mineral, Nye, Pershing, Storey, and White Pine). These 12 counties will receive monitoring and analysis services on an intrusion detection system (IDS) that all the counties have already installed. This monitoring and analysis will detect malicious or unauthorized activity on a system or network by analyzing network traffic.

How have you collaborated with other agencies to maximize the resource's capacity?

The Secretary of State's office has collaborated with the county election official and county information technology resource in all 12 counties. This collaboration was necessary to make sure all the IDS sensors were configured and installed correctly.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The grant funding for this project will fund network monitoring and analysis services for the 12 counties. The Secretary of State's office has already provided funding from a different resource to purchase approximately \$100,000 worth of hardware (i.e., the IDS sensors). All costs associated with the procurement and installation of the IDS sensors have been paid for by the Secretary of State's office from a different funding source. The request for this project is to fund the ongoing monitoring of the sensors, as well as analysis of the monitoring data.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

At this time there is not a plan for the Secretary of State's office to increase the offset for this project.

Project K

Please provide a five year funding summary for your project.
This project proposes to provide one year's worth of funding for networking monitoring and analysis services for 12 counties. The funding summary is as follows:
Service contract for IDS netflow monitoring and analysis in 12 counties:
Tier 1 - \$620/month x 12 counties = \$7,440/month x 12 months = \$89,280 annually

Nevada Homeland Securit	y Grai	nt Program (F	HSGP) RESUBMISSION	PROJECT ID:	L
Project Proposal for FFY19	HSG	P Funding De	scription	Date Submitted	4/25/19
1) PROJECT TITLE:	Public	Health Analytical F	TE		
2) PROPOSING/LEAD AGENCY:	Southe	ern Nevada Health	District		
3) Project Manager Name/Title:	Stever	n Kramer/Superviso	or		
Project Manager Contact Info:	Phone:	(702) 759-1658	Email: kramer@snhd.org		
4) Addl Project Manager Name/Title:	Jeff Q	uinn/Manager			
Addl Project Manager Contact Info:	Phone:	(702) 759-0945	Email: Quinn@snhd.org		
5) Finance/Grant Contact Name/Title:	Lynda	Zielinski/Accountar	nt II		
Finance/Grant Contact Info:	Phone:	(702) 759-1245	Email: zielinski@snhd.org		

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The SNHD is seeking funding through the DHS UASI grant to continue an FTE to work full time within the SNCTC, specifically, within the analytical section. This position will coordinate Public Health related information and statical data with partners within the SNCTC Analytical and Operational areas. Information for this individual may be gathered through several systems in place within SNHD, i.e., HAN, EpiX, and Essence systems. Information gathered through public health can assist in the detection of potential national and international outbreaks, emerging infectious diseases, and potential use of biological agents. The coordination of this individual on a full-time basis will enhance the current capability of Intelligence and Information Sharing and Operational Coordination on a real time basis. Information that can be shared within the SNCTC will assist Clark County and the State of Nevada to prepare, mitigate, and if necessary respond to a potential event. This individual will also provide a monthly Public Health informational release through the Fusion Center.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

FUSION CENTERS

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

HSGP Project Type Supporting Strategic Capacity: Southern Nevada Counter Terrorism Center [FUSION]

Core Capability aligned with Maintained Project: INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

SNHD would like to ensure that public health has an individual assigned to the SNCTC full-time to be able to provide public health information on a real time basis with analytical staff to assist in the sharing of information that may be relevant to the operational coordination for Clark County. The ability to identify, gather, and verify data received will allow the coordination of a potential response effort to be coordinated in a timely manner. Information that will be gathered will be related to local, national, and international trends for outbreaks, emerging diseases, and Bio-Events.

Veva	ada I	Homeland Secu	urity Grant Pro	ogram (HSGP) <mark>RESUBMISS</mark> I	ION	PROJECT ID:	L			
Proj∈	ect P	roposal for FF	Y19 HSGP Fun	ding Description		Date Submitted	4/25/19			
PROJI	ECT T	ITLE REFERENCE:	Public Health	Analytical FTE						
0) 1	PROC	UREMENT - Indica	te the method of	procurement associated with this	s proje	ect:				
(○ Re	quest for Proposal	Provide a brief exp	planation on your method of procuremen	it - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:			
(O So	le Source	Continue the curren	nt FTE within the SNCTC.						
(O Int	ternal								
1) I	PROJI	ECT IMPLEMENTA	ΓΙΟΝ - <i>Describe ho</i>	w, and by whom, the Proposed Projec	ct will l	<i>be implemented.</i> De	scribe			
i F	n rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work Once the project has been approved by the UASI working group and funding is secured through NDEM, SNHD will continue									
E TEXT BOX	the involvement of the current employee within the SNCTC. This individual will continue to work with Analytical and Operational Planning staff to gather and provide Public Health related information to share with the Fusion Center, Jurisdictional Partners, and other Fusion Centers as identified by the SNCTC Director. This FTE will continue to enhance the current staff that currently work within the SNCTC one day a week on planning efforts. This FTE will continue to have the capability to receive real time updates through current SNHD systems that can detect any potential outbreaks or threats. The information gathered will be confirmed through SNHD's EPI, Lab, or Chief Health Officer for verification and potential dissemination.									
		on is for you to tell u	(FD, PD, etc.)	Fy the participating agency(s) and juriceiving the money for your project - In Political Jurisdiction (City, County, State, etc.) County-Special District	f it's yo		ncy]			
1	12 (b)									
1	12 (c)									
3)	SUST	AINMFNT - Identify	any continuing fina	ncial obligation created by the Project,	and nr	onosed fundina solu	tion			
	То со		the SNHD, funding v	will be need to be secured through UAS		·				
			unt is derived from Fi	roject's funding percentage makeup of Si eld '15g - PROJECT TOTALS' on Page #3	tatewia	le -vs- UASI is noted b	elow for			

Statewide

(SHSP)

Urban Area

(UASI)

2

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

PROJECT TITLE REFERENCE:

Public Health Analytical FTE

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be s	specific. Identify	UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
4Fb) Organization (5 - 1/1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	LV-UASI	State-wide	SubTotal
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UA3i	State-wide	SUDTULA
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
The continuation of currently funded staff through the UASI 2018 funding stream. Funding consists of Salary, Fringe, and Travel costs.	\$ 93,276.00		\$ 93,276.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
150) PROJECT TOTALS	\$ 93,276.00	\$ 0.00	\$ 93,276.00

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

PROJECT TITLE REFERENCE:

Project Proposal for FFY19 HSGP Funding Description

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION	PROJECT ID:	L
Project Proposal for FFY19 HSGP Funding Description	Date Submitted	4/25/19

Public Health Analytical FTE

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Continue FTE within current position for SNCTC	09/01/19	08/31/20	12
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to terrorism?	YES NO	Explain below.

This FTE will continue to work with staff within the SNCTC Analytical department to identify potential emerging threats that may be identified nationally and internationally through information gathered with Public Health notification systems currently in place. Throughout the past year, there has been information shared with Federal Public Health partners about the possession of material that can be utilized as a Bio-Terrorist attack. This information was provided to the SNCTC sometimes 48 hours prior to them receiving any information related to the incident. The ability to have an analytical person working side by side with SNCTC staff and share information received daily, would assist in the mitigation of any potential threats to the community.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

The continuation of this project directly aligns the Intelligence and Information Sharing, and Operational Coordination between Public Health and SNCTC.

c. Can this project funding request be reduced? Is it scaleable?	YES NO 💿	Explain below
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This is the current amount needed to continue this FTE for another year.

oject Proposal for FFY19	HSGP Funding Description Date Submitted	4/25/19
DJECT TITLE REFERENCE:	Public Health Analytical FTE	
d. Can this project continue w No funding available through oth e. Does this project provide a The sharing of information relate		
e. Does this project provide a The sharing of information relate	MEASUREABLE statewide benefit? YES NO Explain below. ed to a public Health Event.	

- - NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

Currently SNHD provides 1 staff to the SNCTC on a part-time basis of 1 day each per week. The current individual is involved with planning and development of programming for community needs. The continuation of this FTE would be directly related to the gathering and sharing of information, along with the statistical data coordination. This FTE position would differ from the current part-time in that the part-time employees work on the Planning and Operational aspects between the District and the SNCTC. The new FTE full-time would be strictly Analytical.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEM DETAIL	BUDGET						
	Agency Name	Southern Hevada Health District	Project Manager Name & Contact #		mer 702-759-	Grant Manager Name & Contact # Lynda Zielinski-702-759-1245 ema			elinski@snhd.org	L		
	IJ TITLE:	Public Health Preparedness Analyst										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		Public Health Preparedness Analyst	Maintain	UASI	Salary	100%	2080	\$ 66,000.00	Fusion Center - SNCTC	Operational Coordination		UASI
2								\$ -				
3								\$ -				
4	Personnel Sub-Total							\$ 66,000,00				
		O FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE BOSITIONS AND D	ELIVEDADI EC	NADBATIVE WILL	DE LICED TO ENGLIDE ITEMS LIC	TED WILL BE COM			ITEMS MAY NOT	BE BURCHASED O	LITCIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		Fringe Rate of 41.00% of Base Salary	Maintain	UASI	Salary	100%	2,080.00		Fusion Center - SNCTC	Operational Coordination	Personnel
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ 27,060.00			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
a	Training	Mileage for local trainings/meetings	Maintain	UASI	Training	Travel for instate meeting mileage			216.00		Operational Coordination	UASI
10	Travel/Training	Fusion Center Training in Chicago	Walitalii	07101	rraining	micage			210.00	014010	COOrdination	UAGI
11	Ü	, , , , , , , , , , , , , , , , , , ,							-			
12									-			
13									-			
14									-			
15									-			
16									-			
17 18			-						-			
19									-			
20									-			
21									-			
22									-			
23									-			Ĺ
24									-			
25									-			
26			-						-			├
27	Travel Sub-Total								216.00			
		DR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	AU EAGUL NE ITEM AND DELV	(EDADLES MAS	DATIVE WILL BE !!	IOSE TO SUCCESS TEMP LICES	WII - DE COMPLE	TED IN THE OR			DUDOULAGED OUTOU	DE TUE ITEMO

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	•			
28						-				
29							•			
30										
31							-			
32							•			
33										
34										
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40							\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE (TEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			•								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 93,276.00	1 1

Project L

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	SNCTC FTE							
Funding Source:	UASI	SHSP Funding Request:						
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	98,276.00					
How is your project a reg	jional or statewide res	ource, or how do you int	end for it to be so in the future?					
This project is initiated at the regional level for daily monitoring and the sharing of information. Should a detection of a Public Health event be identified, that information and potential response would be a statewide resource.								
How have you collaborated with other agencies to maximize the resource's capacity?								
Yes, SNCTC								
What is the current inves	stment provided by yo	ur jurisdiction to offset r	eliance on grant funding for this project?					
Indirect costs								
Is there a plan for increasing offset by your jurisdiction to support this project in the future?								
Not currently at this tir	ne.							

Project L

Please provide a five year funding summary for your project.
The current project would be on continued funding through HSGP and the increase would be 2.5% as a yearly step increase to pay.

Ν	evada Homeland Security	y Grant Pr	rogram (H	ISGP) RESUBI	PROJECT ID:	М							
Pı	roject Proposal for FFY19	HSGP Fu	nding Des	scription		Date Submitted	4/25/19						
1)	PROJECT TITLE:	Southern Ne	evada Counter	Terrorism Center									
2)	PROPOSING/LEAD AGENCY:	Las Vegas N	Metropolitan P	olice Department									
3)	Project Manager Name/Title:	Chris Tomai	no / Captain										
	Project Manager Contact Info:	Phone: (702	2) 828-2281	Email: c4671t@lvm	pd.com								
4)	Addl Project Manager Name/Title:	Rachel Skid	more / Emerg	ency Manager									
	Addl Project Manager Contact Info:	Phone: (702	2) 828-2257	Email: r14590s@lv	mpd.com								
5)	Finance/Grant Contact Name/Title:	Joni Prucnal	, Director of Fi	inance									
	Finance/Grant Contact Info:	Phone: (702	2) 828-8267	Email: J13700P@L	VMPD.COM								
6)	CLASSIFICATION - Check the p	rimary intent	tion of the Pro	pposed Project:			Choose one:						
						hin the past five years; NCHS FY16-18 prioritie							
	MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*												
	*All NEW projects are competitive												
7)	PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement. Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe How Much [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.												
	infrastructure of the state of Nevi Center (SNCTC) will be able to s SNCTC is committed to intelliger Region IX. This project proposa and continue to operate as the D	sustain curren nce and inforn I further susta	it operations to mation sharing ins our efforts	o meet the Fusion (within the state, re to maintain neces	Center Baseli egionally, and sary informat	ine Capabilities / CoO I nationally, to include	C's / EC's. The e FEMA						
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency M	lanagement A	gency (FEMA) list o	f Core Capabi	lities and the Crosswa	alk of Target						
	FFY19 Strategic Capacity Maintai	ned*:	FUSION CENT	ΓERS									
	HSGP Project Type Supporting Strat				n Center [FUSI	ION]							
	If OTHER, please choose FFY16-18 N	NCHS Priority:	INTELLIGENC	E AND INFORMATION	ON SHARING [Mission Areas - PREV	PROT]						
	Core Capability aligned with Mainta	ained Project:	INTELLIGENC	E AND INFORMATIO	ON SHARING [Mission Areas - PREV/	PROT]						
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or						
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment v												
	This project is the sustainment re	equest for the	Southern Nev	vada Counter Terro	orism Center.								

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

M Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Fields are limitied to visible text box size

Southern Nevada Counter Terrorism Center

/	15a) Dlamaina (-								Ctata usida	
15)	BUDGET - Describ	e obiectives.	acquisitions	. and quan	tities within e	ach category.	Be specific.	Identify U/	ASI and State c	ost.

\$ 0.00 \$ 0.00 \$ 0.00 \$ 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] LV-UASI State-wide SubTotal	BODGET - Describe objectives, acquisitions, and quantities within each category. Be spe	cinc. identity (DASI allu State	COSI.
plotter supplies, information service subscription renewals, printed materials, and operating materials, AV system maintenance, and travel for planning meetings & conferences. \$ 17,200.00 \$ 132,200.00 \$ 149,400.00 \$ 149,400.00 \$ 149,400.00 \$ 149,400.00 \$ 149,400.00 \$ 155) Organization (Establishment of organization, structure, leadership, and operation) Comega professional services contract, cybersecurity contract employee, Privacy Officer contract, and a professional services contract for the strip camera program. \$ 100,000.00 \$ 385,000.00 \$ 485,000.00 \$ 485,000.00 \$ 385,000.00 \$ 485,000.00 \$	15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Omega professional services contract, cybersecurity contract employee, Privacy Officer contract, and a professional services contract for the strip camera program. \$100,000.00	plotter supplies, information service subscription renewals, printed materials, operating materials, AV system maintenance, and travel for planning meetings &	\$ 17,200.00	\$ 132,200.00	\$ 149,400.00
Omega professional services contract, cybersecurity contract employee, Privacy Officer contract, and a professional services contract for the strip camera program. \$100,000.00	15b) Organization (Establishment of organization, structure, leadership, and operation)	LV-UASI	State-wide	SubTotal
2 Analyst notebook renewal, Coplink software annual maintenance, Omega renewals, website domain renewal, Cybersecurity software, social media analytics, Orator Plus annual maintenance, Strip Camera Project maintenance, computer software, and computer hardware. \$435,153.57 \$120,000.00 \$555,153.57 15d) Training [Development and delivery of training to perform assigned missions and tasks]	Omega professional services contract, cybersecurity contract employee, Privacy			\$ 485,000.00
renewals, website domain renewal, Cybersecurity software, social media analytics, Orator Plus annual maintenance, milestone annual maintenance, Strip Camera Project maintenance, computer software, and computer hardware. \$ 435,153.57 \$ 120,000.00 \$ 555,153.57 \$ 150,000.00 \$ 555,153.57 \$ 150,000.00 \$ 150,0	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Analyst trainings to include IALEIA, IACA and FIAT. Trainings utilized in this category directly align with the mission of the Southern Nevada Counter Terrorism Center. \$ 49,000.00 \$ 0.00 \$ 49,000.00 \$ 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15o) PROJECT TOTALS 15o) PROJECT TOTALS 15or PROJECT TOTALS	renewals, website domain renewal, Cybersecurity software, social media analytics, Orator Plus annual maintenance, milestone annual maintenance, Strip Camera	\$ 435,153.57	\$ 120,000.00	\$ 555,153.57
Analyst trainings to include IALEIA, IACA and FIAT. Trainings utilized in this category directly align with the mission of the Southern Nevada Counter Terrorism Center. \$49,000.00 \$0.00 \$49,000.00 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 1.V-UASI State-wide SubTotal 1.5f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 1.D-UASI State-wide SubTotal 1.D-UASI State-wide TOTAL	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
n.a \$0.00	Analyst trainings to include IALEIA, IACA and FIAT. Trainings utilized in this category directly align with the mission of the Southern Nevada Counter Terrorism	\$ 49,000.00	\$ 0.00	\$ 49,000.00
\$ 0.00 \$	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
15g) PROJECT TOTALS \$ 0.00 \$ 0.00 \$ 0.00 LV-UASI State-wide TOTAL	n.a	\$ 0.00	\$ 0.00	\$ 0.00
\$ 0.00 \$ 0.00 \$ 0.00 \$ 150) PROJECT TOTALS	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
15g) PROJECT TOTALS	n.a	\$ 0.00	\$ 0.00	
T5g) PROJECT TOTALS \$601,353.57 \$637,200.00 \$1,238,553.57	4F-) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
	TISOT PROJECT TOTALS			

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: M

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism Center

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Execute necessary contracts	01/01/20	12/31/20	12
3	Receive information, process, analyze, and disseminate	01/01/20	12/31/20	12
4	Sustain and continue to evolve community outreach programs	01/01/20	12/31/20	12
5	Maintain the Strip Camera Project	01/01/20	12/31/20	12
6	Continue to maintain data information sharing with partner agencies	01/01/20	12/31/20	12
7	Maintain outreach for See Something Say Something	01/01/20	12/31/20	12
8	Procure necessary equipment	01/01/20	12/31/20	12
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO DEXPLAIN Explain below.
	Yes, the Southern Nevada Counter Terrorism Center's primary purpose is to implement the National SAR initiative which is to combat terrorism within the United States.
text box size	
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
", and "c" are limitied to visible text box size	Fusion centers are intelligence and information sharing at the core. We are currently seeking to build out the cybersecurity components within our center
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
Fields "a",	We would have capability loss.

Neva	ada	Homeland S	ecurity	Grant Pro	gram (HSGP) RESUBM	ISSION	PROJECT ID:	М
Proj	ect F	Proposal for	FFY19	HSGP Fund	ding De	escription		Date Submitted	4/25/19
PROJ	ECT 1	TITLE REFEREN	ICE:	Southern Nev	ada Coun	er Terrorism Center			
	d.	Can this project o	ontinue w	thout funding?	YES ()	NO Explain below.			
Fields "d" and "e" are limitied to visible text box size	The L	VMPD requires t	he grants	to sustain this μ	orogram.				
mitie	e.	Does this project	provide a	MEASUREABLE s	tatewide b	enefit? YES 🧿	NO O E	xplain below.	
Fields "d" and "e" are l	Yes th	ne SNCTC is the	state desi	gnated fusion c	enter for t	he state of Nevada.			
18)	THIR	A COMPLETION	N - Please	indicate the p	articipatio	on level in completing	the 201 8 T	THIRA Survey. <u>CHOO</u>	SE ONE:
		YES - Agency H	IAS partic	ipated in the 20	018 Threat	and Hazard Identifica	ition Risk A	ssessment (THIRA) S	urvey
		NO - Agency h	as NOT pa	nrticipated in th	ne 2018 Th	reat and Hazard Ident	tification Ri	sk Assessment (THIR.	A) Survey
19)		ITIONAL COMN ed to the visible t		' - Please indic	ate any a	dditional project comi	mentary yo	ou feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	IEM DETAIL I	BUDGET						
	Agency Name	Las Vegas Metropolitan Police Department	Project Manager Name & Contact # Christohper Tomaino, 702 828 2257 Grant Manager Name & Contact # Journal of the Contact				Joni Prucnal, 702 828		M			
	IJ TITLE:	Southern Nevada Counter Terrorism Ce	nter									
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				<u> </u>
3								\$ -		-		
4								\$ -		+		
	Personnel Sub-Total							\$ -				
PERSONN	IEL COST NARRATIVE REQUIRED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	FLIVERABLES	NARRATIVE WILL	BE USED TO ENSURE ITEMS US	STED WILL BE COM	IPI ETED IN THE	GRANT CYCLE	ITEMS MAY NOT	BE PURCHASED OF	ITSIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE TIEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9		2020 Announced Conferences	Maintain	SHSP	Planning	Trainings arise throughout the year, and are imporant to maintain trends.	9.00	2,000.00		Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
10		National Fusion Center Conference / Fusion Center West Conference	Maintain	SHSP	Planning	Required by Fusions Centers	4.00	2,000.00	\$ 8,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
11		National Homeland Security Conference	Maintain	SHSP	Planning	This is the UASI HS Conference and is attened every year by staff.	3.00	2,000.00		Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
12												
13 14									-			
15									-			+
16									-			
17									-			
18									-			
19 20			1		<u> </u>				-			
21									-			
22									-			
23			İ						-			
24									-			
25									-			
26									-			
27	Travel Sub-Total								33 000 00			
<u> </u>	Travel Sub-Total								32,000.00			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.
This includes conference attendance at the Nationa Fusion Center, Fusion Center West, National Homeland Security Conference, and additional that are announced throughout the year.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		SITE Subscription	Maintain	SHSP		1 14,000.00	14,000.00		Intelligence and Information Sharing	SHSP
28		Utilities	Maintain	SHSP		\$ 13,200.00	13,200.00		Intelligence and Information Sharing	SHSP
29		Printed and Printing Materials	Maintain	SHSP		\$ 8,000.00	8,000.00		Intelligence and Information Sharing	SHSP
30		Membership in Professional Organizations (LEIU/IALEIA)	Maintain	SHSP		\$ 2,500.00	2,500.00		Intelligence and Information Sharing	SHSP
31		Information Services Subscription Renewals (Targus /Spypedia /James Town/MSA/Flashpoint Global Partners)	Maintain	SHSP		\$ 57,000.00	57,000.00		Intelligence and Information Sharing	SHSP
32		AV System Service and repair	Maintain	SHSP		\$ 5,500.00	5,500.00		Intelligence and Information Sharing	SHSP
33							-			
34							-			
35	Planning Sub-Total						\$ 100,200.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Include a SITE subscription and additional infrmation service subscriptions that are systems the SNCTC uses on a regular basis. Utilities, Printing, members, and AV system service and repair is also included here.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36		Omega Professional Services		SHSP	1.00	85,000.00		Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
37		Contract Cyber Analyst		SHSP	1.00	225,000.00	\$ 225,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
38		Contract Privacy Officer		SHSP	1.00	75,000.00		Fusion Center - SNCTC	Intelligence and Information Sharing	SHSP
39	Organization Sub-Total				_		\$ 385,000.00			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Professional service contracts for the cyber analyst, the privacy officer, and the Omega professional services contract for data management.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		rocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		Computer Hardware	Maintain	SHSP	32.00	1,000.00	\$ 32,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	SHSP
41		Social Media Analytics	Maintain	SHSP	1.00	51,500.00	\$ 51,500.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04SW-04-NETW	SHSP
42		I2 Analyst Notebook Software License Renewals	Maintain	SHSP	1.00	34,000.00	\$ 34,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04SW-04-NETW	SHSP

43		Website Renewals	Maintain	SHSP	1.00	800.00			Intelligence and Information Sharing	04SW-04-NETW	спер
43		Website Maintenance (SNCTC)	Maintain					Fusion Center -	Intelligence and Information		
44				SHSP	1.00	1,700.00	\$ 1,700.00	SNCTC	Sharing	04SW-04-NETW	SHSP
45							\$ -				
46							\$ -				
47							\$ -				
48			·				\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 120,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Includes computer hardware replacements, social media analytics, I2 analyst notebook, webpage renewals, and website maintenance.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total		
					Request	\$ 637,200.0	0

Project M

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	SNCTC		
Funding Source:	LIACI/CLICD	SHSP Funding Request:	\$637,200
(SHSP, UASI, SHSP/UASI Split)	UASI/SHSP	UASI Funding Request:	\$601,353
How is your project a reg	jional or statewide res	ource, or how do you int	tend for it to be so in the future?
	for the fusion center	are provided by the HS	the national SAR initiative. The funding for SGP funding streams. The LVPMD hosts all
How have you collaborat	ted with other agencie	s to maximize the resour	rce's capacity?
We have more than 22 pa the DHS CIKR sectors.	artner agencies, our dis	stributions are received b	y several thousand recipients across all 16 of
	stment provided by yo	ur jurisdiction to offset r	eliance on grant funding for this project?
12-million			
Is there a plan for increas	sing offset by your juri	sdiction to support this p	project in the future?

Project M

Not at this time
Please provide a five year funding summary for your project.

Project M

110joctiii	
We anticipate costs to remain on par for the next five years.	

Nev	ada Home	eland Security	y Grar	nt Program (I	HSGP) RESUBMISSION	PROJECT ID:	N
Proj	ect Propo	sal for FFY19	HSGF	Funding De	scription	Date Submitted	4/26/19
1) PR	OJECT TITL	E:	Nevada	a Threat Analysis	Center		
2) PR	ROPOSING/L	EAD AGENCY:	Nevada	a Department of P	ublic Safety, Investigation Division	n	
3) Pro	oject Manage	r Name/Title:	Lt. And	rew Rasor			
Pro	oject Manage	r Contact Info:	Phone:	(775) 687-0309	Email: arasor@dps.state.nv.us		
4) Ad	dl Project Mar	nager Name/Title:					
Add	dl Project Mana	ager Contact Info:	Phone:		Email:		
5) Fin	ance/Grant Co	ontact Name/Title:	Melissa	Carr/ Administrat	ive Service Officer		
Fin	ance/Grant Co	ntact Info:	Phone:	(775) 684-7443	Email: mcarr@dps.state.nv.us		
6)	CLASSIFICAT	ION - Check the p	rimary i	ntention of the Pi	roposed Project:		Choose one:
	NEW*	, ,	,	, ,	ecently addressed this capability with ects in this category must align with		

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

The Nevada Threat Analysis Center (NTAC) is the Department of Homeland Security (DHS) recognized state fusion center with an Area of Responsibility (AOR) covering 16 of 17 counties (except Clark), with interests across the entire state (all state agencies and Tribal Nations) and the Office of the Governor. As a critical component of the United States homeland security and counter-terrorism enterprise and the National Network Of Fusion Centers, the purpose of the Nevada Threat Analysis Center is to receive, analyze, disseminate and gather information from and to share intelligence with state, local, tribal and federal partners in an effort to deter, detect, prevent and/or mitigate terrorism and other criminal activity. The funding requested is primarily to sustain NTAC programs, operations, and staffing in accordance with the fusion center baseline capabilities and critical operating capabilities.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

Nevada Threat Analysis Center [FUSION]

If OTHER, please choose FFY16-18 NCHS Priority:

Core Capability aligned with Maintained Project:

SCREENING, SEARCH, AND DETECTION [Mission Areas - PREV/PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

As a state-level critical component of the United States homeland security and counter-terrorism architecture, the purpose of the Nevada Threat Analysis Center (NTAC) is to provide an information sharing environment based on the intelligence cycle to receive, analyze, disseminate and gather information from state, local, tribal and federal partners and the private sector in an effort to deter, detect, prevent and/or mitigate terrorism and other criminal activity. The NTAC shares timely and accurate threat based information with federal and state authorities. The NTAC manages a reporting and collection program to receive suspicious activity information from state, local, and tribal government, the private sector and the general public, which is analyzed and reported to the appropriate federal authorities or state law enforcement.

◉

			ırity Grant Prooု			N
roj	ect Pr	oposal for FF\	/19 HSGP Fund	ing Description	Date Submitted	4/26/19
ROJ	ECT TIT	TLE REFERENCE:	Nevada Threat	Analysis Center		
0)	PROCU	REMENT - Indicat	te the method of p	rocurement associated with this	s project:	
	○ Requ	uest for Proposal	Provide a brief expla	nation on your method of procuremen	t - FIELD IS LIMITED TO VISI	BLE TEXT BOX:
	O Sole			ee the need to use contracting RFP o		
	Interest		during the performand processes.	e period of the grant. Procurement	will likely be completed thi	ougn internal
l)	PROJEC	T IMPLEMENTAT	ION - Describe how,	and by whom, the Proposed Project	ct will be implemented. De	escribe
	in rough o	rder the process by whic	h the project will be accon	nplished, identifying who (i.e. staff, contractor	r, or ?) will perform what work	
FIELD IS LIMITED TO VISIBLE TEXT BOX	funded assigne Officer, Intellige 1 Fusion NTAC a contract fusion of	employees and 16 of the the FBI Joint To 1 Sergeant assigne ence Analysts, 1 DPS in Liaison Officer Coalso operates the Sat communication spectator Baseline and	contractors. The emperrorism Task Force in d to Safe Voice and 1 S Senior Intelligence ordinator (contractor), if eVoice Communication of the Core Operating Capa	I feedback is accomplished by 27 full loyees include: 5 Sworn DPS Officers Reno, 1 State Trooper assigned as Detective assigned to SNCTC/ARM Analyst, 1 DPS Administrative Assistand 1 Critical Infrastructure/Key Resons Center on behalf of the Nevada requested is vital to the Nevada Threbilities, which are significant and necessite the State of Nevada.	s (including 1 Lieutenant, the NTAC Privacy Officer, OR); 1 Deputy Director; 3 ant, 2 Intelligence Analysts source Coordinator (contradepartment of Education, eat Analysis Center's ability	1 Detective /Security DPS s (contractor); actor). The which has 12 / to sustain
2)		is for you to tell u	s WHO will be receiv	the participating agency(s) and juris	it's you, put in your age	ncy]
	section	is for you to tell u	s WHO will be receive (FD, PD, etc.)	ring the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's you, put in your age Project Representative	ncy]
	section	is for you to tell u	s WHO will be receive (FD, PD, etc.)	ring the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's you, put in your age	ncy]
	section	is for you to tell u	s WHO will be receive (FD, PD, etc.)	ring the money for your project - If Political Jurisdiction (City, County, State, etc.) State (Department of Public	it's you, put in your age Project Representative	ncy]
	section 12(a)	is for you to tell u	s WHO will be receive (FD, PD, etc.)	ring the money for your project - If Political Jurisdiction (City, County, State, etc.) State (Department of Public	it's you, put in your age Project Representative	ncy]
	12(a) 12(b) 12(c)	Agency (Agency	s WHO will be received (FD, PD, etc.) visis Center (NTAC)	ring the money for your project - If Political Jurisdiction (City, County, State, etc.) State (Department of Public	Project Representative Lt. Andrew Rasor	ncy] (individual)

your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3 $\,$

100%

Statewide

(SHSP)

0% Urban Area

(UASI)

2

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: N

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Nevada Threat Analysis Center

15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Planning/Prevention Activities; General Planning/Prevention Materials; Consumables/Supplies; Telecommunications Services; Information/Public Records Subscriptions; Memberships in Professional Organizations; VPN and network connection services; Webhosting services; Internet subscription service; Suspicious Activity Reporting Phone Line/Call Charges; Public Information & Awareness Campaign program materials/services. Fusion Liaison Officer training/ planning/outreach travel; Critical infrastructure & vulnerability /threat assessments travel.		\$ 158,669.21	\$ 158,669.21
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Fusion Liaison Officer (FLO) Coordinator-\$105,000; Critical Infrastructure and Key Resources (CIKR) Coordinator-\$105,000; Intelligence Analyst #1 - \$105,000.48; Intelligence Analyst #2 - \$105,000.		\$ 420,000.26	\$ 420,000.26
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
ORATOR-renewal/upgrade; ESRI GIS SUPPORT-renewal/upgrade; I2-renewal/upgrade; FUSION 360-maintenance; Polaris Alpha Intelligence analytics software/server - programming maintenance/renewal/upgrade; COMPUTERS & PERIPHERALS-routers, switches, keyboards, cabling, printers, etc.; EITS server maintenance/upgrade; Traffic Jam Analytics.		\$ 79,770.00	\$ 79,770.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Fusion Liaison Officer (FLO) Training (Conducted and Attended)/FLO Training Materials; Intelligence/Crime Analysis Training; Professional Conferences/Workshops; Privacy/Security Training; CIKR Training (Conducted and Attended)/CIKR Training Materials.		\$ 51,526.75	\$ 51,526.75
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] National/Regional/State Exercises.	LV-UASI	\$2,575.50	\$ 2,575.50
	LV-UASI		
National/Regional/State Exercises.		\$ 2,575.50	\$ 2,575.50
National/Regional/State Exercises.		\$ 2,575.50	\$ 2,575.50 SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: N

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Nevada Threat Analysis Center

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive approval to spend funding	12/01/19	04/15/20	4
3	Sustain Criminal Intelligence Analysts	08/01/20	08/01/21	12
4	Sustain FLO Coordinator and CIKR Coordinator	08/01/20	08/01/21	12
5	Conduct planning activities	08/01/20	08/01/21	12
6	Purchase Equipment	08/01/20	08/01/21	12
7	Conduct/Attend training/Conferences/Workshops	08/01/20	08/01/21	12
8	Purchase training materials	08/01/20	08/01/21	12
9	Host and/or attend regional/state exercises	08/01/20	08/01/21	12
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES () NO () Explain below.

The NTAC is the State fusion center and supports the National Network of Fusion Centers. The principal role of the fusion center is to collect, analyze, and disseminate terrorist/criminal information and intelligence and other information (including, but not limited to, threat, public safety, law enforcement, public health, social services, and public works) to support efforts to anticipate, identify, prevent, and/or deter terrorist/criminal activity.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns specifically with the Nevada Commission on Homeland Security Strategic Capacity: FUSION CENTERS, and supports FEMA core capability: Intelligence and Information Sharing. The NTAC mission, goals and objectives are based on the intelligence cycle components of collecting, analyzing, and sharing timely and actionable intelligence with federal, state, local, tribal, and private sector partners, to prevent, detect, deter and mitigate terrorist and criminal activities.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

This project request could be reduced, but not as a "scalable" reduction. Any reduction in the proposed budget would require targeting a program area or technological solution, thereby adversely impacting necessary fusion center mission related capabilities.

			~	am (HSGP) RESUBMISSIC	N	PROJECT ID:	N
	•		HSGP Fundin	g Description		Date Submitted	4/26/19
PROJ	ECT TITLE REFE	ERENCE:	Nevada Threat An	alysis Center			
	d. Can this pro	ject continue v	vithout funding? YES	S NO Explain below.			
Fields "d" and "e" are limitied to visible text box size	though the grant, information. The by grant funding. two Intelligence A	which include Fusion Liaison Four contract analysts - are of maintain fusio	the tools, resources n Officer program an positions -The Fusion critical to the NTAC in n center baseline ca	roject without funding. Substantial of and technology required for inform d the Silver Shield Critical Infrastructor Liaison Officer Coordinator, the Onformation sharing operation. The pabilities and to effectively support	natio cture Critic SHS the I	n gathering and the a programs are suppo al Infrastructure Coo GGP funding is critica National Network of F	analysis of the orted entirely rdinator and I to the
limiti	e. Does this pr	oject provide a	MEASUREABLE states	wide benefit? YES NO () Ex	cplain below.	
Fields "d" and "e" are	reporting terrorism (excluding Clark), collaboration with	n and criminal to all state ag federal partne	related suspicions a encies including the ers (the FBI and DHS	ffective, unique, and efficient mecha activity to local government partner a Office of the Governor, and all triba b) the NTAC manages this critical in ack to our statewide partners.	agen al go	cies from 16 of 17 co vernments statewide	ounties . Through
18)	THIRA COMPLE	TION - Pleas	e indicate the partic	cipation level in completing the 20	18 7	HIRA Survey. CHOO	SE ONE:
	YES - Age	ncy HAS partio	cipated in the 2018	Threat and Hazard Identification Ri	sk A.	ssessment (THIRA) S	urvey
	NO - Ager	ncy has NOT p	articipated in the 20	018 Threat and Hazard Identificatio	on Ri.	sk Assessment (THIR	A) Survey
171	ADDITIONAL Co		Y - Please indicate	any additional project commentai	ry yo	ou feel may be impoi	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

				L	INC II LIVI DI	ETAIL BUDGET					
	Agency Name	Nevada Dept. of Public Safety, Investigation Division	Project Manager Name & Contact #	Lieutenant A Rasor	Andrew	Grant Manager Name & Contact #	Lieutenant Ar (775.684.744		(775.687.0309	9); Melissa Carr, ASO	N
	IJ TITLE:	Nevada Threat Analysis Center (NTAC) -	- Fusion Center	•							
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.			Hourly						
1		Fusion Liaison Officer Coordinator - (Existing) - 12 months - \$105,000 - (Planning, / Organizations / Training / Exercise)	Maintain	SHSP	\$50.48	100	% 2080	\$ 105,000	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
2		Critical Infrastructure and Key Resources (CIKR) Coordinator -(Existing) - months - \$105,000 - (Planning / Organization / Training / Exercise)	Maintain	SHSP	\$50.48	100	% 2080	\$ 105,000	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
3		Intelligence Analyst - (Existing) - 12 months - \$105,000 - (Planning / Organization / Training)	Maintain	SHSP	\$50.48	100	% 2080	\$ 105,000	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
4		1 Intelligence Analyst - (Existing) - 12 months - \$105,000 - (Planning / Organization / Training)	Maintain	SHSP	\$50.48	100	% 2080	\$ 105,000	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
	Personnel Sub-Total	FOR EACH LINE ITEM AROVE - PLEASE EXPLAINE IN DE						\$ 420,000.26			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Fusion Liaison Officer (FLO) Coordinator – manages / facilitates the NTAC's FLO Program. The FLO Program supports the NTAC's collection, analysis, and dissemination efforts (Critical Operating Capabilities), which support the Intelligence Cycle. More specifically, the FLO Program nocuses on developing and maintaining relationships with lederal, state, local, tribal and private sector partners via outreach, training and exercises to ensure that threat information is recognized, collected, reported, analysical, and disseminated to those with a right and need to know the Information. Furthermore, these relationships provide the NTAC with Subjective Against the NTAC's (NTAC's Information) intelligence used to create various fusion center products, establishing SME contacts, etc.

The Critical Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upport and exercises, Subject and intelligence in the NTAC's Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upport and exercises to ensure the NTAC's CIKR Program is upport and exercises to the NTAC's CIKR Program is upport and exercises to ensure the NTAC's CIKR Program is upport to the NTAC's CIKR Program is upport the NTAC's Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upport to the NTAC's Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upport to the NTAC's Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upport to the NTAC's CIKR Program is upport to the NTAC's CIKR Program is upport to the NTAC's Infrastructure and Key Resources (CIKR) Coordinator – manages / facilitates the NTAC's CIKR Program is upported to the NTAC's CIKR Program is upported to the NTAC's CIKR Program is upported to the NTAC's CIKR Program is upported to the NTAC's CIKR Program is upported to the NTAC's CIKR Program is upported to t

The Intelligence Analyst (IA) Two positions – the NTAC's Intelligence Analyst supports all phases of the Intelligence Cycle including, but not limited to: the collection, analysis, and dissemination of information / intelligence (Critical Operating Capabilities). More specifically, the IA primarily receives/collects threat and/or hazard information from federal, state, local, tribal, and private sector partners, analyzes it for national /local implications, and disseminates it to appropriate leadership for strategic / tactical planning and/or operational purposes. Deliverables include, but are not limited to: Tip/ Lead and SAR processing, briefings, and the production and dissemination of intelligence products.

Line #	# CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		NOTE -Any fringe is included in the personnel cost estimates.						\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type		Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENOUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		_			
9		Fusion Liaison Officer Planning / Outreach - in state travel	Maintain	SHSP	Planning	Travel for NTAC FLO coordinator and staff to conduct training across entire state of Nevada. Outreach travel supporting the NTAC FLO Program	14.00	365.54	5,117.61		Intelligence and Information Sharing	SHSP
10		Fusion Liaison Officer Planning / Outreach - out of state travel	Maintain	SHSP	Planning	Travel supporting FLO program - training, best practices, outreach with other state FLO programs	2.00	873.00	1,746.00		Intelligence and Information Sharing	SHSP
11		General Planning / Prevention Activities - in state travel	Maintain	SHSP	Planning	Travel supports planning / prevention activities within the NTAC's AOR. Deliverables include, but are not limited to: general outreach / liaison, threat briefings, joint product production, threat assessments, intelligence / information gathering. Supports travel of 2 people for 6 trips with an average duration of 2 days per trip	12.00	539.68	6.476.10		Intelligence and	SHSP

					Travel supports planning / prevention activities					
		Maintain			related to NTAC's AOR. To include, not limited to Fusion Center best practices development, regional/strategic planning threat assessments.					
12	General Planning / Prevention Activities - out of state travel		SHSP	Planning	Support the travel of 2 people for 6 trips with an average duration of 2 days per trip.	5.00	1,216.00	Fusion Center - 6,080.00 NTAC	Intelligence and Information Sharing	SHSP
	10.0		O. T.O.	r icaniming	Travel supports CIKR vulnerability assessments.	0.00	1,210.00	0,000.00 1417.0	incontactor creaming	Gridi
13	Conduct Site Instrastructure / Vulnerability / Threat Assessments - in state travel	Maintain	SHSP	Planning	estimated to support the travel of 2 people for 5 trips with an average duration of 3 days per trip.	10.00	564.75	Fusion Center - 5,647.50 NTAC	Intelligence and Information Sharing	SHSP
-					CIKR Planning / Outreach efforts within the NTAC's AOR, to include, not limited to: Special					
_	Critical Infrastructure and Key Resources (CIKR)	Maintain			Events Assessment planning meetings, briefings/ presentations. Support the travel of 2 people for 2			Fusion Center -	Intelligence and	
14	Planning / Outreach - in state travel		SHSP	Planning	trips with an average duration of 2 days per trip. Out-of state CIKR Planning / Outreach efforts	4.00	524.75	2,099.00 NTAC	Information Sharing	SHSP
		Maintain			related to NTAC's AOR, to include, not limited to: Special Events Assessment planning meetings, briefings/ presentations. Support the travel of 2					
15	Critical Infrastructure and Key Resources (CIKR) Planning / Outreach - out of state travel		SHSP	Planning	people for 2 trips with an average duration of 2 days per trip.	1.00	1,189.00	Fusion Center - 1,189.00 NTAC	Intelligence and Information Sharing	SHSP
					Supports training conducted and/or attended by the FLO Coordinator / Program. Deliverables					
-		Maintain			include, not limited to: FLO / related training and the professional development of FLO Coordinator / related staff to support the FLO Program.					
	Fusion Liaison Officer Training (Conducted / Attended)		01100		Estimated to support the FLO Program. Estimated to support the travel of 2 people for 6 trips with an average duration of 2 days.	45.00	400.05	Fusion Center -	Intelligence and	
16	I in state travel		SHSP	Training	Supports training conducted and/or attended by	15.00	466.95	7,004.25 NTAC	Information Sharing	SHSP
_		Maintain			the FLO Coordinator / Program. Deliverables include, not limited to: FLO / related training and the professional development of FLO Coordinator					
	Fusion Liaison Officer Training (Conducted / Attended)	Wantani			/ related staff to support the FLO Program. Estimated to support the travel of 1 people for 2			Fusion Center -	Intelligence and	
17	out of state travel		SHSP	Training	trips with an average duration of 2 days. Supports required Fusion Center Intelligence	2.00	1,226.00	2,452.00 NTAC	Information Sharing	SHSP
-		Maintain			Analyst training. Per HSGP grant guidelines. See narrative section for more detail. Supports travel					
18	Intelligence / Crime Analysis Training - in state travel		SHSP	Training	of 4 analysts for 2 trips with an average duration of 2 days. Supports required Fusion Center Intelligence	6.00	808.50	Fusion Center - 4,851.00 NTAC	Intelligence and Information Sharing	SHSP
-		Maintain			Analyst training. Per HSGP grant guidelines. See narrative section for more detail. Supports travel					
19	Intelligence / Crime Analysis Training - out of state travel		SHSP	Training	of 3 analysts for 2 trips with an average duration of 5 days. Supports attendance to in-state Fusion Center	10.00	1,248.30	Fusion Center - 12,483.00 NTAC	Intelligence and Information Sharing	SHSP
					related conferences or workshops. Deliverables include, but are not limited to: strategic planning /					
		Maintain			collaboration, training, and professional development for staff to support NTAC operations					
_	Professional Conferences / Workshops - in state				/ Critical Operating Capabilities. Support the travel of 2 people for 2 trips with an average length of 3 days. See narrative area for more			Fusion Center -	Intelligence and	
20	travel		SHSP	Training	detail. Travel supports attendance to any regional /	4.00	1,050.50	4,202.00 NTAC	Information Sharing	SHSP
					national Fusion Center conferences or workshops, including the National Homeland					
-	Professional Conferences / Workshops - out of state	Maintain			Security Conference and the annual National Fusion Center Association workshop. Funding is estimated to support the travel of 3 people for 1			5		
21	travel		SHSP	Training	trip with an average length of 4 days. Supports training for the Privacy / Security Officer	7.00	1,729.29	Fusion Center - 12,105.00 NTAC	Intelligence and Information Sharing	SHSP
_					and/or related staff. Includes, but are not limited to: training and professional development to					
_		Maintain			support NTAC privacy/ security functions and ensure compliance with Privacy laws, Civil Rights, Civil Liberties, and security requirements.					
_					Currently, this funding is estimated to support the travel of 1 person 2 trips with average length of 2			Fusion Center -	Intelligence and	
22	Privacy / Security Training		SHSP	Training	days. Travel supports training conducted and/or	2.00	1,226.00	2,452.00 NTAC	Information Sharing	SHSP
		Maintain			attended by the CIKR Coordinator and/or related staff; includes, but not limited to: CIKR Program / related training and professional development to					
	Critical Infrastructure and Key Resources (CIKR)	iviaii itali i			support the NTAC CIKR Program. Funding is estimated to support the travel of 1 person for 8			Fusion Corte-	Intelligence and	
23	Training (Conducted / Attended) - in state travel		SHSP	Training	trips with an average length of 2 days.	5.00	808.50	Fusion Center - 4,042.50 NTAC	Intelligence and Information Sharing	SHSP
					Travel supports training conducted and/or attended by the CIKR Coordinator and/or related staff; includes, but not limited to: CIKR Program /					
		Maintain			related training and professional development to support the NTAC CIKR Program. Funding is					
24	Critical Infrastructre and Key Resources (CIKR) Training (Conducted and Attended) - out of state travel		SHSP	Training	estimated to support the travel of 1 person for 1 trips with an average length of 4 days.	1.00	1,935.00	Fusion Center - 1,935.00 NTAC	Intelligence and Information Sharing	SHSP
					Supports staff participation in the exercises testing the NTAC's Critical Operating Capabilities;					
		Maintain			includes, but not limited to: evaluating / enhancing the NTAC's Critical Operating					
05	Formation to the state of the s		CHCC	Eu :	Capabilities and National Strategic Stockpile program. Funding is estimated at 1 person for 3 trips with an average length 2 days.		050 50	Fusion Center -	Intelligence and	01/2-
25	Exercises - in state travel		SHSP	Exercise	apo mar arrango longin 2 days.	3.00	858.50	2,575.50 NTAC	Information Sharing	SHSP

26								-			
27								=			
	Travel Sub-Total							82,457.45			
TRAVEL	COST NARRATIVE REQUIRED FOR	EACH LINE ITEM AROVE - PLEASE EXPLAINE IN DETAIL	EACH LINE ITEM AND DELIVER	ARIES NARRA	TIVE WILL BE US	SED TO ENSURE ITEMS LISTED WILL BE COMP	ETED IN THE GRA	NT CYCLE - ITEMS MAY NOT BE PI	IRCHASED OUTS	IDE THE ITEMS LISTE	D ABOVE

TRAVEL COST MARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOV WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIEST.

Fusion Liaison Officer (FLO) Program Planning / Outreach - In State Travel — this travel supports FLO Planning / Outreach efforts within the NTAC's AOR (all 16 of the 17 counties in the state, all state agencies regardless of county location, and all tribal nations within the state). Deliverables include, but are not limited to: outreach, Tips / Leads, Suspicious Activity Reports (SAR's), situational awareness, local context to federal threat streams, information of 2 days per trip. Support (SAR's), situational awareness, local context to federal threat streams, information of 2 days per trip. Support (SAR's), local context to federal threat streams, information of 2 days per trip. Support (SAR's), local context to federal buildings of the support (SAR's). Deliverable, Outreath, Outrea

Fusion Llaison Officer (FLO) Planning / Outreach - Out of State Travel - this travel supports regional / national FLO Planning / Outreach efforts. Deliverables include, but are not limited to: regional / national outreach, liaison, FLO best practices development, situational awareness, information / intelligence collection, establishing SME contacts, etc. Currently, this funding is estimated to support the travel of 1 person for 2 trips with an average duration of 2 days per trip.

General Planning / Prevention Activities – In State Travel — this travel supports planning / prevention activities within the NTAC's AOR. Deliverables include, but are not limited to: general outreach / liaison, threat briefings, joint product production, threat assessments, intelligence / information Needs (SINS) development, operational activities, comprehensive Fusion Center best practices development, statewide fusion center strategic planning / collaboration; attendance to Homeland Security Commission / Subcommittee Meetings, etc. Currently, this funding is estimated to support the travel of 2 people for 6 trips with an average duration of 2 days per trip.

General Planning / Prevention Activities – Out of State Travel – this travel supports planning / prevention activities related to the NTAC's AOR. Deliverables include, but are not limited to: general outreach / liaison, threat briefings, joint product production, threat assessments, intelligence / information gathering / sharing activities, operational activities, comprehensive Fusion Center best practices development, regional / national strategic planning / collaboration, etc. Currently, this funding is estimated to support the travel of 2 people for 6 trips with an average duration of 2 days per trip.

Conduct Site Infrastructure / Vulnerability / Threat Assessments – In State Travel – This travel supports the CIKR Program. Deliverables include, but are not limited to: CIKR site vulnerability assessments and special events assessments. Currently, this funding is estimated to support the travel of 2 people for 5 trips with an average duration of 3 days per trip.

Critical Infrastructure and Key Resources (CIKR) Planning / Outreach – In State Travel – this travel supports in state CIKR Planning / Outreach efforts within the NTAC's AOR. Deliverables include, but are not limited to: the state data call, outreach, liaison, informational presentations, briefings, Site Vulnerability / Special Events Assessment planning meetings, etc. Currently, this funding is estimated to support the travel of 2 people for 2 trips with an average duration of 2 days per trip.

Critical Infrastructure and Key Resources (CIKR) Planning / Outreach — Out of State Trave I — this travel supports out of state Trave I — this travel supports out of state CIKR Planning / Outreach efforts related to the NTAC's AOR. Deliverables include, but are not limited to: regional / national CIKR related outreach, presentations, briefings, Special Events Assessment planning meetings, CIKR best practices development, etc. Currently, this funding is estimated to support the travel of 1 person for 1 trip with an average duration of 2 days per trip.

Fusion Liaison Officer (FLO) Training (Conducted / Attended) – In State Travel - This travel supports training conducted and/or attended by the FLO Coordinator / Program. Deliverables include, but are not limited to: FLO / related training and the professional development of FLO Coordinator / related staff to support the FLO Program. Currently, this funding is estimated to support the travel of 2 people for 6 trips with an average duration of 2 days.

Fusion Liaison Officer (FLO) Training (Conducted / Attended) — Out of State Travel - This travel supports training conducted and/or attended by the FLO Coordinator. Deliverables include, but are not limited to: Deliverables include, but are not limited to: FLO / related training and the Professional Development of FLO Coordinator / related staff to support the FLO Program. Currently, this funding is estimated to support the travel of 1 person for 2 trips with an average duration of 2 days.

Intelligence / Crime Analysis Training – In State Travel – This travel supports required Fusion Center Intelligence Analyst training, Per HSGP grant guidelines, fusion center analytic personnel must demonstrate qualifications that meet or exceed competencies identified in the Common Competencies for State, Local, and Intelligence Analysts, which details the minimum categories of training for intelligence analysts. Additionally, the Critical Operating Capabilities require that Intelligence Analysts have at least 20 hours of topic specific training per year. As such, the NTAC requires funding to support travel for required training for intelligence analysts. Such training may include, but is not limited to: DHS Basic Intelligence Analysts and Analysical Methods, DHS Principles of Intelligence Virting and Briefing; Foundations in Intelligence Analysts Training – Analysts and Terrorism Prevention; Intermediate Fusion Center Analyst Training – Analysts and Terrorism Prevention; Intermediate Fusion Center Analyst Training – Analysts and Terrorism Prevention; Intermediate Fusion Center Analyst Training – Analysts and Terrorism Prevention of Intelligence Analysts, which supports all of the NTAC's operations / Critical Operating Capabilities. Currently, this funding is estimated to support the travel of 4 analysts for 7 tines with an average duration of 2 days.

Intelligence / Crime Analysis Training — Out of State Travel — This travel supports required Fusion Center Intelligence Analysts training, Per HSGP grant guidelines, fusion center analytic personnel must demonstrate qualifications that meet or exceed competencies identified in the Common Competencies for State, Local, and Intelligence Analysts, which details the minimum categories of training for intelligence analysts. Additionally, the Critical Operating (Sapabilities require thand in support travel or travel or travel or travel or travel or travel or travel or travel for travel analysts. Additionally, the Critical Operating in support travel for travel for travel or travel for tr

Professional Conferences / Workshops – In State Travel – This travel supports attendance to in-state Fusion Center related conferences or workshops. It should be noted that the grants differentiate between conferences, workshops and training. Although most involve a training aspect, conferences and workshops do not result in a training certificate, while training classes do result in a training certificate. As such, they must be accounted for in separate line items. Deliverables include, but are not limited to: strategic planning / collaboration, training, and professional development for staff to support NTAC operations / Critical Operating Capabilities. Currently, this funding is estimated to support the travel of 2 posole for 2 trips with an average length of 3 days.

Professional Conferences / Workshops – Out of State Travel – This travel supports attendance to any regional / national Fusion Center conferences or workshops. It should be noted that the grants differentiate between conferences, workshops and training. Although most involve a training aspect, conferences and workshops do not result in a training certificate, while training casses do result in a training cartificate. As such, they must be accounted for in separate line items. Deliverables include, but are not limited to: training and professional development for staff to support NTAC operations / Critical Operating Capabilities. Currently, this funding is estimated to support the travel of 3 people for 1 this with an average lenath of 4 days.

Privacy / Security Training – Out of State Travel – This travel supports training for the Privacy / Security Officer and/or related staff. Deliverables included, but are not limited to: training and professional development to support NTAC privacy/ security functions and ensure compliance with Privacy laws, Civil Rights, Civil Liberties, and security requirements. Currently, this funding is estimated to support the travel of 1 person 2 trips with average length of 2 days.

Critical Infrastructure and Key Resources (CIKR) Training – In State Travel - this travel supports training conducted and/or attended by the CIKR Coordinator and/or related staff. Deliverables include, but are not limited to: CIKR Program / related training and professional development for the CIKR Coordinator / Program to support the NTAC CIKR Program. Currently, this funding is estimated to support the travel of 1 person for 8 trips with an average length of 2 days.

Critical Infrastructure and Key Resources (CIKR) Training – Out of State Travel - this travel supports training conducted and/or attended by the CIKR Coordinator. Deliverables include, but are not limited to: CIKR Program / related training and professional development for the CIKR Coordinator / Program to support the NTAC CIKR Program. Currently, this funding is estimated to support the travel of 1 person for 1 trip with an average length of 4 days.

Exercises - In State Travel - This travel supports staff participation in the exercises that test the NTAC's Critical Operating Capabilities. Deliverables include, but are not limited to: evaluating / enhancing the NTAC's Critical Operating Capabilities. Currently, this funding is estimated at 1 person for 3 trips with an average length 2 days.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	10	NIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
28		General Planning / Prevention Materials	Maintain	SHSP		6	630.00	3,780.00	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
29		Materials to Conduct Site Vulnerability Assessments / Special Events Threat Assessments	Maintain	SHSP		4	636.00	2,544.00	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
30		Fusion Liaison Officer Training Materials	Maintain	SHSP		4	637.25	2,549.00	Fusion Center - NTAC	Intelligence and Information Sharing	SHSP
31		CIKR Training Materials	Maintain	SHSP		2	638.00	1,276.00	Fusion Center - NTAC	Intelligence and Information Sharing Intelligence and	SHSP
32		Consumables / Supplies	Maintain	SHSP		13	749.69	9,746.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
33		Webhosting Services	Maintain	SHSP		1	2,500.00	2,500.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
34		Internet Cable Subscription	Maintain	SHSP		1	2,000.00	2,000.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
35		VPN and Connection Services	Maintain	SHSP		12	65.00	780.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
36		Telecommunications Services	Maintain	SHSP		12	565.00	6,780.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
37		Information / Public Records Subscriptions	Maintain	SHSP		12	1,259.00	15,108.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
38		Memberships in Professional Organizations	Maintain	SHSP		2	825.00	1,650.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
39		Suspicious Activity Reporting - Phone Line	Maintain	SHSP		1	202.00	202.00	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
40		Suspicious Activity Reporting - Call Charge	Maintain	SHSP		1	799.01	799.01	Fusion Center - NTAC	Information Sharing Intelligence and	SHSP
41		Public Information & Awareness Campaign	Maintain	SHSP		1	80,600.00	80,600.00	Fusion Center - NTAC	Inferingence and Information Sharing	SHSP
42 43	Planning Sub-Total							\$130,314.01			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

General Planning / Prevention - Materials - this funding supports the purchase of general planning / prevention materials that support NTAC operations. Purchases include, but are not limited to: informational posters / pamphlets, handouts, booklets, contractor business cards, Fusion Center business cards, etc. Deliverables include, but are not limited to: general outreach / liaison, threat briefings, joint product production, threat assessments, intelligence / information gathering / sharing activities, comprehensive Fusion Center best practices development, regional / national strategic planning / collaboration, etc.

Material to Conduct Site Vulnerability Assessments - this funding supports the purchase of materials needed to conduct site vulnerability assessments. Purchases include, but are not limited to: binders, CD's, flash drives, handouts, pamphlets, booklets, batteries, etc.

Deliverables include, but are not limited to: CIKR site vulnerability assessments and special events assessments.

Internet Cable Subscription – Funding supports data cable cost for non-state internet connectivity.

Webhosting Services - Funding supports Netsential website hosting annual service fee.

Consumables / Supplies — this funding supports general consumables / supplies not currently funded via the State Budget. Purchase include, but are not limited to: pencils, paper, note pads, printer / toner cartridges, file folders, binders, CD's, flash drives, batteries, etc., and support all NTAC operations / Critical Operating Capabilities. VPN (Virtual Private Network) - Funding supports 5 VPN connections to sensitive computers to conduct & support information sharing/gathering activities.

Telecommunications Services - this funding supports air cards for laptop connectivity to the State of Nevada Network to support all NTAC operations / Critical Operating Capabilities, as well as cell phone costs for NTAC contractors.

Information / Public Records Subscriptions - this funding supports subscriptions to various information gathering services and media outlets to support ongoing information needs related to NTAC operations / Critical Operating Capabilities.

Memberships in Professional Organizations – this funding supports NTAC membership in various professional organizations, which support NTAC operations and/or provide related technical assistance / resources related NTAC operations / Critical Operating Capabilities. See Something, Say Something Phone Line - this funding supports the costs associated the See Something, Say Something phone line charge (12 months @ \$15.00/mo).

Something, Say Something Call Charge - this funding supports the costs associated with calls to the See Something, Say Something phone line. (Est. 30/min per day @ \$.06/min x 365).

Public Information & Awareness Campaign - this funding supports the continuation of the DHS "See Something," public information campaign; provides funding for printed material, billboard signage, over air media PSAs, and related media advertising.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
45					-	-	\$ -			
46			•				\$ -			
47			•		-		\$ -			
48			•				\$ -			
	Organization Sub-Total						\$ -			

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ZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		rocurement / See 2nd tab to determine whether roject requires EHP Screening									
49		Computer Software - Orator - renewal / upgrade	Maintain	SHSP		1 1,400.00	\$ 1,400.00	Fusion Center - NTAC	Information Sharing	13IT-00-DEXC Data Exchange and Interoperability	
50		Computer Software - ESRI GIS Support - renewal / upgrade	Maintain	SHSP		1 6,000.00	\$ 6,000.00	Fusion Center - NTAC	Intelligence and Information Sharing	13IT-00-DACQ Data Acquisition 13IT-00-SGNT	
51		Computer Software - 12 - renewal/upgrade	Maintain	SHSP		1 9.100.00	\$ 9,100,00	Fusion Center -	Intelligence and Information Sharing		
52		Computer Software - Fusion 360 - maintenance / upgrades	Maintain	SHSP		1 500.00	\$ 500.00	Fusion Center - NTAC	Intelligence and Information Sharing	13IT-00-INTL Systems, Intelligence Sharing	
53		Computers & Peripherals - routers, switches, keyboards, cabling, printers, etc.	Maintain	SHSP		10 852.00	\$ 8,520.00	Fusion Center - NTAC	Intelligence and Information Sharing	04HW-01-INHW Hardware, Computer, Integrated	
54		Polaris Alpha Intelligence Analytics software / server - for programming, maintenance/ renewal/upgrade	Maintain	SHSP		1 38,400.00	\$ 38,400.00	Fusion Center - NTAC	Intelligence and Information Sharing	13IT-00-DFSN Data Fusion/Synthesis	
55		Traffic Jam Analytics				1 8,500.00	\$ 8,500.00	Fusion Center - NTAC	Intelligence and Information Sharing	13IT-00-DFSN Data Fusion/Synthesis	
56		EITS Technology Maintenance	Maintain	SHSP		1 7,350.00	\$ 7,350.00	Fusion Center - NTAC	Intelligence and Information Sharing	13IT-00-INTL Systems, Intelligence Sharing	
57	EQUIPMENT Sub-Total						\$ - \$ - \$79,770.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line	# CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinate d with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		ocurement / See 2nd tab to determine whether										
58	your pro	ject requires EHP Screening									\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
62											\$ -	
63											\$ -	
64											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinate d with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		ocurement / See 2nd tab to determine whether									
65	your pro	ject requires EHP Screening									
66										\$ -	
67										\$ -	
68										\$ -	
69										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

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7					Budget Total	
/					Request	\$ 712,541.72

Project N

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above

FFY19 Project Name:	Nevada Threat Analys	Nevada Threat Analysis Center (NTAC) – Fusion Center							
Funding Source:	SHSP	SHSP Funding Request:	\$ 712,541.72						
(SHSP, UASI, SHSP/UASI Split)	3035	UASI Funding Request:							

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Nevada Threat Analysis Center (NTAC) is the state fusion center with an Area of Responsibility (AOR) covering 16 of 17 counties (except Clark); and with agency interests across the entire state (all state agencies and Tribal Nations) and the Office of the Governor. The NTAC is one of two DHS recognized fusion centers in Nevada. As a state level critical component of the United States homeland security and counter-terrorism architecture, the purpose of the Nevada Threat Analysis Center is to receive, analyze, disseminate and gather feedback from and to state, local, tribal and federal partners and the private sector in an effort to deter, detect, prevent and/or mitigate terrorism and other criminal activity. The NTAC, though its counterterrorism and all hazards mission, is a state resource; and though participation with the National Network of Fusion Centers, the NTAC is also a regional and national resource.

How have you collaborated with other agencies to maximize the resource's capacity?

The NTAC operates through constant and continuous collaboration with state and local governments, tribal government, federal partners, and the private sector by sharing threat-related information, gathering and analyzing tips and leads from public and partner sources, developing suspicious activity reports, and assisting law enforcement and homeland security partners in preventing, protecting against, and responding to crime and terrorism. Threat and criminal information received from multijurisdictional partners and home agency law enforcement is analyzed in context to the local environment, providing added value to customers and decision makers. Such multijurisdictional and agency participation contributes nationally to the Information Sharing Environment (ISE) as the NTAC provides federal government partners (DHS, FBI, Secret Service, DEA) with critical locally generated threat-related information.

The NTAC collaborates with various state and local agencies, such as Legislative Police, Carson City Sheriff's Office, Nevada Department of Health and Human Services, Nevada Highway Patrol, and Nevada Department of Corrections, with assigned individuals from these agencies working directly with NTAC analysts. The state of Nevada SafeVoice Program is situated with the NTAC intelligence analysts, which facilitates an efficient and effective sharing of capability and expertise to address complex tip and lead information received by Safe Voice communication specialists. Often this collaboration involves life safety issues requiring quick analysis and determinations.

Additionally, NTAC facilitates and maintains collaborative relationships with partners and stakeholders though education and training programs (such as the Fusion Liaison Officer program and active shooter training), and outreach.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The Investigation Division (NDI) of the Nevada Department of Public Safety (DPS) State General Funds provide 66% (\$1,375,600) of the funding supporting NTAC personnel and operations (including support from individuals assigned from other state agencies); HSGP grant funding supports the remaining 34%. State general funds through DPS, NDI support 11 FTE NTAC staff and also cover 40% of operations costs. The NTAC has four contract positions which are 100% paid through homeland security grant funds.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

DPS, NDI/NTAC does not have plans to increase the offset of the current cost allocations.

Please provide a five year funding summary for your project.

The Nevada Threat Analysis Center anticipates a critical need to use Homeland Security Grant Funds over the next five years to cover existing program costs as an important funding stream to maintain current capabilities and provide for program sustainability. Over the next five years NTAC anticipates requesting the following items to maintain Project sustainment:

- Continuation of the Fusion Liaison Officer Coordinator position This is a contract position fully funded by the grant.
- Continuation of the Critical Infrastructure Program Manager position This is a contract position fully funded by the grant.
- Continuation of two Intelligence Analyst positions Both are contract positions fully funded by the grant.
- Continuation of the line items identified in the current budget POETE categories for Planning activities, Training, and Equipment.

Nevada Homeland	Security	y Grar	nt Program (I	HSGP) RESUBMISSION	PROJECT ID:	0				
Project Proposal for	r FFY19	HSGF	P Funding De	scription	Date Submitted	4/26/19				
1) PROJECT TITLE:										
2) PROPOSING/LEAD AG										
3) Project Manager Name/	Title:	Prepar	edness EMPM							
Project Manager Contac	ct Info:	Phone:	(775) 687-0305	Email: xxx@dps.state.nv.us						
4) Addl Project Manager Na	me/Title:									
Addl Project Manager Conf	tact Info:	Phone: Email:								
5) Finance/Grant Contact Na	ame/Title:	Kelli Ar	Kelli Anderson / Emergency Management Program Manager							
Finance/Grant Contact Info):	Phone: (775) 687-0321 Email: kanderson@dps.state.nv.us								
6) CLASSIFICATION - CA	heck the p	rimary i	intention of the Pr	oposed Project:		Choose one:				
NIE VV ^	nin the past five years; C NCHS FY16-18 priorities	\sim								
MAINTAIN Project of	will MAINT	AIN AN A	PPROVED FFY19 ST	RATEGIC CAPACITY*		•				
			·	<u> </u>	·					

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

The outcome of this project will be to maintain fundamental NIMS-required programs and projects statewide to all Tribal jurisdictions. The NIMS Program and its components set the foundation for the core capability of Operational Coordination which crosses all Mission Areas of the National Preparedness Goal under PPD-8. NIMS includes three components: Resource Management, Command and Coordination, and Communications and Information Sharing. These are foundational to all other core capabilities. This project will support continued improvement in NIMS-compliant Planning, Training, and Exercise Programs, as well as support the Tribal Resource Management and Public Information Programs.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

If OTHER, please choose FFY16-18 NCHS Priority:

Core Capability aligned with Maintained Project:

NATIONAL INCIDENT MANAGEMENT SYSTEM [NIMS]

OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

NIMS is a comprehensive, national approach to incident management that is applicable at all jurisdictional levels and across functional disciplines. It is intended to be applicable across a full spectrum of potential incidents, hazards, and impacts, regardless of size, location or complexity. It improves coordination and cooperation between public and private entities in a variety of incident management activities, and provides a common standard for overall incident management. The Planning, Training, Exercise, Communications, Public Information, and Resource Management Programs supported in this project directly establish, maintain, and integrate on a statewide platform those operational structures and processes used by local, state, and tribal jurisdictions. This program and those projects contained within provide this capability statewide, integrating all stakeholders, and supports the execution of all Mission Areas of the National Preparedness Goal.

aua	iomeiana sec	urity	Grant Progi	ram (HSGP) RESUBMISSI	ION	PROJECT ID:	0
ject P	Proposal for FF	Y19 H	HSGP Fundii	ng Description		Date Submitted	4/26/19
JECT T	TITLE REFERENCE	: -	Tribal NIMS				
PROC	CUREMENT - Indica	ate the	method of pro	ocurement associated with this	s proje	ect:	
Re	equest for Proposal	Prov	ide a brief explan	ation on your method of procuremen	nt - FIELI	D IS LIMITED TO VISI	BLE TEXT BO
O So	le Source			owever procurement method may v	ary de	pending on costs ar	nd
O Int	ternal	circum	stances.				
PROJI	ECT IMPLEMENTA	TION -	Describe how, a	and by whom, the Proposed Projec	ct will i	be implemented. De	escribe
in rough	n order the process by wh	nich the pr	roject will be accomp	olished, identifying who (i.e. staff, contracto	or, or ?) v	vill perform what work	
and g We sh	rant compliance shal hall maintain an "aud	II be ma dit-ready	intained. State ru " posture through	tewide NIMS program to leverage re ules and regulation regarding purch hout the life of the investment . At the outcomes achieved by this investm	nasing a	and other areas sha	II be followe
	on is for you to tell (us WHO	O will be receivi	ne participating agency(s) and juri	f it's yo	ou, put in your age	ncy]
sectio	on is for you to tell on Agency	us WH(y (FD, PD,	O will be receiving etc.)	ng the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo	ou, put in your age Project Representative	ncy]
	on is for you to tell (us WH(y (FD, PD,	O will be receiving etc.)	ng the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo	ou, put in your age	ncy]
sectio	on is for you to tell on Agency	us WH(y (FD, PD,	O will be receiving etc.)	ng the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo	ou, put in your age Project Representative	ncy]
section 12(a)	on is for you to tell on Agency	us WH(y (FD, PD,	O will be receiving etc.)	ng the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo	ou, put in your age Project Representative	ncy]
12(a) 12(b) 12(c)	Agency DPS - Division of Er	us WHC y (FD, PD, mergen	etc.) cy Management	ng the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo	put in your age Project Representative redness EMPM	ncy] (individual)

100% 0% Urban Area (SHSP) (UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description PROJECT TITLE REFERENCE: Tribal NIMS PROJECT ID: O Date Submitted 4/26/19

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
Travel: Training \$2,000 / Exercise \$2,000 / Planning \$2,000 Office Lease \$1,800 Phones/Internet \$1,500 Printing/Duplication \$1,200 Supplies \$600 Contract Tribal Coordinator \$80,600		\$ 91,700.00	\$ 91,700
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTo
		\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
		\$ 0.00	\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTo
Training Contractor Support \$500		\$ 500.00	\$ 500.0
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTo
Exericise Contract Support \$500		\$ 500.00	\$ 500.0
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTo
		\$ 0.00	\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTA

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID:

Date Submitted

O 4/26/19

PROJECT TITLE REFERENCE:

Tribal NIMS

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Conduct THIRA, SPR, Consequence Analysis, and NIMS Assessments	10/01/19	12/31/20	15
3	Conduct Tribal Plans Reviews and Updates	10/01/19	12/31/20	15
4	Prepare for and Deliver Operational Coordination Training and Exercises	10/01/19	12/31/20	15
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project h	nave a nexus to terrorism?	YES 📵	No 🔵	Explain below.

All Operational Coordination and Public Information and Warning functions will be applicable to terrorism events. Planning, Training and Exercises conducted will prepare organizations and staff statewide to respond to terrorism. Communications equipment will be used for operational coordination during terrorism events, and resources are being cataloged and typed in preparation for a terrorism event requiring mutual aid.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with the FFY19 strategic capacity of Tribal NIMS.

c. Can this project funding request be reduced? Is it scaleable? YES

NO Explain below.

Reductions in funding will directly reduce the planning, training and exercise support to the tribal jurisdictions within the state. Less planning efforts, training classes offered, and exercises to verify capabilities will be available. Significantly reduced funding jeopardizes the maintenance of the NIMS program within to the tribal nations, also jeopardizing the eligibility of the tribes for federal grant funding.

ada Homeland Securi	ty Grant Program (HSGP) RESUBMISSION	PROJECT ID:	0
ect Proposal for FFY1	9 HSGP Funding Description	Date Submitted	4/26/19
ECT TITLE REFERENCE:	Tribal NIMS		
d. Can this project continue	without funding? YES NO Explain below.		
		to ensure the tribes w	ithin Nevada
e. Does this project provide	a MEASUREABLE statewide benefit? YES NO E	xplain below.	
THIRA COMPLETION - Plea	se indicate the participation level in completing the 2018	THIRA Survey. CHOO	SE ONE:
YES - Agency HAS part	ticipated in the 2018 Threat and Hazard Identification Risk A	Assessment (THIRA) S	urvey
NO - Agency has NOT	participated in the 2018 Threat and Hazard Identification R	isk Assessment (THIR.	A) Survey
		ou feel may be impor	tant. Field is
None at this time			
	ect Proposal for FFY1 ECT TITLE REFERENCE: d. Can this project continue Without funding the state will rare eligible for Federal HSGP e. Does this project provide All portions of this project provijurisdictions throughout the state the Tribal areas of Nevada. THIRA COMPLETION - Please YES - Agency HAS part NO - Agency has NOT ADDITIONAL COMMENTA limited to the visible text box	ECT TITLE REFERENCE: Tribal NIMS d. Can this project continue without funding? YES NO Explain below. Without funding the state will not be able to maintain the Tribal NIMS program as required are eligible for Federal HSGP funding. e. Does this project provide a MEASUREABLE statewide benefit? YES NO EARLY NIMS Program as required are eligible for Federal HSGP funding. Public Services statewide. The planning, training and Exercise jurisdictions throughout the state. Public Service Announcements will be delivered statewide the Tribal areas of Nevada. THIRA COMPLETION - Please indicate the participation level in completing the 2018 NO - Agency HAS participated in the 2018 Threat and Hazard Identification Risk ANO - Agency has NOT participated in the 2018 Threat and Hazard Identification RADDITIONAL COMMENTARY - Please indicate any additional project commentary you limited to the visible text box	Date Submitted ECT TITLE REFERENCE: Tribal NIMS d. Can this project continue without funding? YES NO Explain below. Without funding the state will not be able to maintain the Tribal NIMS program as required to ensure the tribes ware eligible for Federal HSGP funding. e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below. All portions of this project provide services statewide. The planning, training and Exercise programs provide supjurisdictions throughout the state. Public Service Announcements will be delivered statewide to residents and traited Tribal areas of Nevada. THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOO YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey. NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be importanted to the visible text box

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	Agency Name	DPS - Division of Emergency Management	Project Manager Name & Contact #	Preparednes 775-687-030	s EMPM)5	Grant Manager Name & Contact #					0
	IJ TITLE: Tribal NIMS One Budget Per Funding Street										
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2	Personnel Sub-Total							\$ - \$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9		Deliver ICS training to Nevada's Tribes	Maintain	SHSP	Training	Travel to coordinate and provide training to Tribes within Nevada	2.00	1,000.00			Operational Coordination	SHSP
10		Deliver HSEEP exercises to Nevada's Tribes	Maintain	SHSP	Exercise	Travel to coordinate and provide exercises to Tribes within Nevada	2.00	1,000.00			Operational Coordination	SHSP
11		Planning Support to Nevada's Tribes	Maintain	SHSP	Planning	Travel to coordinate and provide planning support to Tribes within Nevada	2.00	1,000.00		NIMS - Tribal DEM NTECC	Planning	SHSP
12	Travel Sub-Total	DEACH LINE ITEM ADOVE DI EASE EVELAINE IN DETAI							6,000.00			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lines 9-11: Travel for the Contract Tribal Coordinator to provide NIMS coordination and support to the Tribes in Nevada, assisting with planning, trainging and exercises.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	F	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27		Office Lease	Maintain	SHSP	12	150.00			Operational Coordination		SHSP
28		Landline/Mobile/Internet	Maintain	SHSP	12	125.00	1,500.00		Operational Coordination		SHSP
29		Printing/Duplication	Maintain	SHSP	12	100.00	1,200.00	NIMS - Tribal DEM NTECC	Planning		SHSP
30		Office Supplies	Maintain	SHSP	12	50.00		NIMS - Tribal DEM NTECC	Planning		SHSP
31		Contract Tribal Coordinator	Maintain	SHSP	2,080	38.75	80,600.00	NIMS - Tribal DEM NTECC	Operational Coordination		SHSP
32	Planning Sub-Total						\$ 85,700.00				_

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 27: Lease of Office space for Contract Tribal Coordinator

Line 28: Phone and internet for Contract Tribal Coordinator

Line 29: Printing and Duplication costs of planning, training and exercise materials for the Contract Tribal Coordinator

Line 30: Office Supplies for the Contract Tribal Coordinator

Line 31: Contract for a Tribal Coordinator to support the Tribes in Nevada with planning, training and exerices.

Lii	ne#	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
	36					-	-	\$ -			
	37							\$ -			
		Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40							\$ -				
41							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether ject requires EHP Screening									•	
51		Training Contract Support	Maintain	SHSP	Yes	Yes	1			Operational Coordination	\$ 500.00	SHSP
52											\$ -	
53											\$ -	
54										1	\$ -	
55					-					-	\$ -	
56	Training Sub-Total										\$ 500.00	
	Training Sub-Total										\$ 500.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57		ocurement / See 2nd tab to determine whether ject requires EHP Screening										
58		Exercise Contract Support	Maintain	SHSP	Yes		1			Operational Coordination	\$ 500.00	SHSP
59											\$ -	
60					-						\$ -	
61	Exercise Sub- Total										\$ 500.00	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total			
					Request	\$ 92	2,700.00	

Project O

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name: HSGP Tribal NIMS Maintenance Project							
Funding Source:	SHSP	SHSP Funding Request:	92,700				
(SHSP, UASI, SHSP/UASI Split)	31131	UASI Funding Request:	0				

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The outcome of this project sustains the continued delivery of the training, exercise, planning, resource management, and technology programs toth 27 federally recognized tribal nations in Nevada needed to remain in compliance with federal NIMS requirements and build their capacity and resilience.

Maintaining NIMS compliance is necessary to ensure all organizations within the state remain eligible for Homeland Security grant funding.

How have you collaborated with other agencies to maximize the resource's capacity?

Services will be provided for all tribal governments. Where applicable collaboration and coordination with adjacent local jurisdictions, agencies, private sector and NGO's will be included and leveraged.

State and UASI TEPW, Statewide Training and Exercise coordination, multi-agency and multi-jurisdiction planning coordination through task forces and workshops, resource management to include inventory for the purpose of mutual aid both intra and interstate, credentialing of first response resources, THIRA/SPR statewide support through conduct and analysis for tribes, jurisdictions, agencies, private sector and NGO's.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

There are no state funds provided for NIMS

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

DEM continues to work through the Nevada Commission on Homeland Security and the legislative process to advocate for state funding.

Project O

Please provide a five year funding summary for your project.

DEM is the agency responsible for the management, implementation and compliance with NIMS statewide to include tribal nations. The strategy utilized to continue to advance the implementation of the statewide NIMS program contains the following components:

- 1. Utilizing the results of the THIRA/SPR/Consequence and Gap Analysis determine the planning, training, exercise and resource capability requirements of tribes, jurisdictions, agencies, private sector and NGO's within Nevada.
- 2. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies, private sector and NGO's with development of new plans and/or review and update of existing plans through workshops and task forces to ensure the widest, most appropriate collaboration as possible.
- 3. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies, private sector and NGO's and utilizing the annual TEPW, identify and conduct necessary training and exercises to improve NIMS compliance and community resilience.
- 4. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies with identification of local, regional and statewide resources available to assist in times of emergencies or disasters through resource typing, mutual aid inventory, and qualified and credentialed first response resources. Continue to build out a robust outreach and collaboration system to identify solutions for gaps in resource availability. Continue development of reimbursement processes and procedures through real world events and exercises. Full implementation of a First Responder Credentialing program will require a partnership between state and local jurisdictions for day to day deployment at the local level statewide.
- 5. Items 1-4 above are intended to continually and consistently build and increase capabilities and capacity to effectively respond to and recover from emergencies and disasters in Nevada.

Nevada Homeland Securit	levada Homeland Security Grant Program (HSGP) RESUBMISSION										
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/26/19							
1) PROJECT TITLE:	Statewide NIMS										
2) PROPOSING/LEAD AGENCY:	DPS - Division of Emerge	ency Management									
3) Project Manager Name/Title:											
Project Manager Contact Info:	Project Manager Contact Info: Phone: (775) 687-0305 Email: xxx@dps.state.nv.us										
4) Addl Project Manager Name/Title:) Addl Project Manager Name/Title:										
Addl Project Manager Contact Info:	Phone:	hone: Email:									
5) Finance/Grant Contact Name/Title:	Kelli Anderson / Emergen	cy Management Program Manag	er								
Finance/Grant Contact Info:	Phone: (775) 687-0321	Email: kanderson@dps.state.nv	.us								
6) CLASSIFICATION - Check the p	orimary intention of the Pr	oposed Project:		Choose one:							
NEW*	, , ,	ecently addressed this capability with ects in this category must align with									
MAINTAIN Project will MAINT	AIN AN APPROVED FFY19 STI	RATEGIC CAPACITY*		0							

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

The outcome of this project sustains the continued delivery of the statewide training, exercise, planning, resource management, and technology programs needed to remain in compliance with federal NIMS requirements. These programs span all of the core capabilities; including those of Operational Coordination, Operational Communication, Public Information and Warning, and Planning; and provides for coordination and cooperation at all levels and for all types of disasters throughout the state. Services will be provided for all jurisdictions and agencies including state agencies, local jurisdictions, tribal governments, and non-governmental organizations. Maintaining NIMS compliance is necessary to ensure all organizations within the state remain eligible for Homeland Security grant funding.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

If OTHER, please choose FFY16-18 NCHS Priority:

Core Capability aligned with Maintained Project:

NATIONAL INCIDENT MANAGEMENT SYSTEM [NIMS]

State of Nevada DEM [NIMS]

OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

NIMS is a comprehensive, national approach to incident management that is applicable at all jurisdictional levels and across functional disciplines. It is intended to be applicable across a full spectrum of potential incidents, hazards, and impacts, regardless of size, location or complexity. It improves coordination and cooperation between public and private entities in a variety of incident management activities, and provides a common standard for overall incident management. The Planning, Training, Exercise, Communications, Public Information, and Resource Management Programs supported in this project directly establish, maintain, and integrate on a statewide platform those operational structures and processes used by local, state, and tribal jurisdictions. This program and those projects contained within provide this capability statewide, integrating all stakeholders, and supports the execution of all Mission Areas of the National Preparedness Goal.

				am (HSGP) RESUBMISSI	ION	PROJECT ID:	P
Proj	ect Proposal for	FFY19 HS	GP Fundin	g Description		Date Submitted	4/26/19
PRO.	JECT TITLE REFEREN	ICE: Sta	atewide NIMS				
10)	PROCUREMENT - Inc	dicate the m	nethod of prod	curement associated with thi	s proj	iect:	
	Request for Propo	sal <i>Provide</i>	a brief explana	tion on your method of procuremen	t - FIEL	LD IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source	May requ		wever procurement method may v	ary de	epending on costs an	d
	Internal	Circumsta	ances.				
1)				nd by whom, the Proposed Projections shed, identifying who (i.e. staff, contractors)		=	scribe
FIELD IS LIMITED TO VISIBLE TEXT BOX	approach within the Pr phases of each project support or for specific p insure programmatic a Exercise, Resource Ma investment identified w investment. Quarterly p and other areas shall be	reparedness a t and their acc projects, the E and financial or anagement ar with a program reporting and be followed. W	and Technical Scompanying mile companying mile implementation of the compliance to the compliance workplan grant compliance shall maintail	elivered, the various projects identi- ervices Sections of NDEM and pla- estones. In some cases, where co- gn a specific staff member to overs- eir portion of the investment. Each g, and Technical Services, shall ha and a budget to insure understan- ce shall be maintained. State rules in an "audit-ready" posture through bort specific to the goals and event	aced wontractorsee the individual	within a schedule that ors are identified for or eir project and work product program: Plannieir portions of the overand continual compliance gulation regarding presented in the investme	identifies the either program erformance to ng, Training, erall nce with the purchasing nt. At the
2)	section is for you to t	tell us WHO v	vill be receivin	e participating agency(s) and juri g the money for your project - I		ou, put in your age	ncy]
		gency (FD, PD, et		Political Jurisdiction (City, County, State, etc.)	Dron	Project Representative (individual)
	12(a) DPS - Division of	or Emergency	Management	State of Nevada	Ртера	aredness EMPM	
	12(b)						
	12 (c)						
3)	SUSTAINMENT - Idei	ntify any conti	inuing financial	obligation created by the Project,	and pi	roposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX	Program investments. Hazard Identification a events also demonstra necessary to maintain	NIMS assess and Risk Assess ate the continu- technology sy	sments of capab ssment (THIRA) lal requirement vstems, licenses	agencies and organizations neces bilities such as the Stakeholder Pr), and After Action Reports / Impro for a sustained NIMS program. M s, and an inventory of ever-changi tem which includes a repository o	epared oveme lainten ng res	dness Review (SPR), nt Plans from exercis nance funding will als ources spread out ac	Threat and es and real to be cross the
14)	STATEWIDE and/or	LIACI DENE					

100%

Statewide

(SHSP)

0%

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: P
Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Statewide NIMS

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	ecific. Identify	UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Travel: Technology \$10,800 / Training \$47,300 / Exercise \$16,000 / Resource Management \$5,000 / Planning \$23,750 Supplies: Technology \$18,000 / Training \$8,187.70 / Exercise \$3,500 / Resource Management \$1,000 / Planning \$500 Technology Fees/Subscriptions \$13,000 Resource Management Contract Support \$60,000 Nevada Preparedness Summit \$10,000		\$ 217,037.70	\$ 217,037.70
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Organization [Establishment of Organization, Structure, leadership, and Operation]	EV-UASI	State-Wide	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Credentialing Software \$55,000		\$ 55,000.00	\$ 55,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Training - Develop, Support and Participate \$56,250 Training - Preparedness Program Support \$50,850		\$ 107,100.00	\$ 107,100.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
Conducting Exercises Statewide \$23,820 Exercise & Program Contractor Support \$8,000		\$ 31.820.00	Ф 24 220 20
		ψ 31,920.00	\$ 31,820.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 31,820.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] Personnel & Fringe - Planning/Training/Exercise (5 people - 20% FTE) \$90,970.30	LV-UASI		
	LV-UASI	State-wide	SubTotal

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION**Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: P
Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Statewide NIMS

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Conduct THIRA, SPR, Consequence Analysis, and NIMS Assessments	10/01/19	12/31/20	15
3	Conduct Jurisdictional Plans Reviews and Updates	10/01/19	12/31/20	15
4	Prepare for and Deliver Operational Coordination Training and Exercises	10/01/19	12/31/20	15
5	Statewide Exercise Initial Planning Conference, Mid-term Planning Conference, Final Planning Conference, and event	10/01/19	12/31/20	15
6	SEOC / Local EOC Exercise Development and Delivery	10/01/19	12/31/20	15
7	Develop, Coordinate and Deliver the Nevada Preparedness Summit	10/01/19	12/31/20	15
8	Complete specifications, purchase, install, configure and test tech equipment.	10/01/19	12/31/20	15
9	Prepare and submit licensing renewal information for payment	10/01/19	12/31/20	15
10				
11				
12				_

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to terroris	m? YES 🕡) No (Explain below.

All Operational Coordination and Public Information and Warning functions will be applicable to terrorism events. Planning, Training and Exercises conducted will prepare organizations and staff statewide to respond to terrorism. Communications equipment will be used for operational coordination during terrorism events, and resources are being cataloged and typed in preparation for a terrorism event requiring mutual aid.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with the FFY19 strategic capacity of Statewide NIMS.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Reductions in funding will directly reduce the planning, training and exercise support to the tribal and local jurisdiction within the state. Less planning efforts, training classes offered, and exercises to verify capabilities will be available. Significantly reduced funding jeopardizes the maintenance of the NIMS program within the state, also jeopardizing the eligibility of the State for federal grant funding.

d. Can this project continue	9 HSGP Funding Description Statewide NIMS	Date Submitted	4/26/19
d. Can this project continue	Statewide NIMS		
• •			
Mithaut funding the State will	without funding? YES 🔵 NO 💿 Explain below.		
HSGP funding.	not be able to maintain the Statewide NIMS program as requi	red to remain eligible	for Federal
e. Does this project provide	a MEASUREABLE statewide benefit? YES NO E	plain below.	
and local jurisdictions throughouristicate n	out the state. The communications upgrades included in this nore effectively throughout the State. Public Service Announce	project will allow triba	l and local
THIRA COMPLETION - Plea	se indicate the participation level in completing the 2018 T	HIRA Survey. CHOO	SE ONE:
YES - Agency HAS part	icipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) Si	ırvey
		u feel may be impor	tant. Field is
None at this time			
	All portions of this project provand local jurisdictions through jurisdictions to communicate meto residents and travelers in No. THIRA COMPLETION - Please YES - Agency HAS part NO - Agency has NOT ADDITIONAL COMMENTAL	All portions of this project provide services statewide. The planning, training and Exercise pand local jurisdictions throughout the state. The communications upgrades included in this jurisdictions to communicate more effectively throughout the State. Public Service Announce to residents and travelers in Nevada. THIRA COMPLETION - Please indicate the participation level in completing the 2018 To the service of the participation level in the 2018 To the service of the participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk ADDITIONAL COMMENTARY - Please indicate any additional project commentary you limited to the visible text box	All portions of this project provide services statewide. The planning, training and Exercise programs provide sup and local jurisdictions throughout the state. The communications upgrades included in this project will allow triba jurisdictions to communicate more effectively throughout the State. Public Service Announcements will be delive to residents and travelers in Nevada. THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOOL YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) States and NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be importalimited to the visible text box

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 I INF ITEM DETAIL BUDGET

				LINE	EM DETAIL I	BUDGET							
	Agency Name	DPS - Division of Emergency Management		Preparedness (775) 687-03		Grant Manager Name & Contact #							P
	IJ TITLE:	STATEWIDE NIMS											
		One Budget Per Funding Stream											
		SHSP											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requeste Funding Source	Reduction	New Total
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1		DEM Planner	Maintain	SHSP	31.07	20%	2080	\$ 12,925.12		Operational Coordination	SHSP		\$ 12,925.12
2		DEM Planner	Maintain	SHSP	31.07	20%	2080	\$ 12,925.12	NIMS - State of Nevada DEM	Operational Coordination	SHSP		\$ 12,925.12
3		DEM Training and Exercise Supervisor	Maintain	SHSP	38.78	20%	2080	\$ 16,132.48	NIMS - State of Nevada DEM	Operational Coordination	SHSP		\$ 16,132.48
4		DEM Training Officer	Maintain	SHSP	32.52	20%	2080	\$ 13,528.32	NIMS - State of Nevada DEM	Operational Coordination	SHSP		\$ 13,528.32
5		DEM Exercise Officer	Maintain	SHSP	30.98	20%			NIMS - State of Nevada DEM	Operational Coordination	SHSP		\$ 12,887.68
	Personnel Sub-Total							\$ 68,398.72				\$ -	\$ 68,398.72
PERSONN	IEL COST NARRATIVE REQUIRE	D FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND I	DELIVERABLES.	NARRATIVE WILL	BE USED TO ENSURE ITEMS LI	STED WILL BE CO	MPLETED IN TH	E GRANT CYCLE	- ITEMS MAY NO	T BE PURCHASED OUTSIDE THE		

ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 1: DEM Planner will update required Statewide plans to include the State Comprehensive Emergency Management Plan, Continuity of Operations Plan, State Emergency Operations Center Standard Operating Guide, Mass Care Plan, and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other necessary statewide plans.

Line 2: DEM Planner will update required Statewide plans to include the State Comprehensive Emergency Management Plan, Continuity of Operations Plan, State Emergency Operations Center Standard Operating Guide, Mass Care Plan, and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other emergency (Jassater James as needed.

Line 2: DEM Transing and Excesses Supervisor will overepete the Emergency Operations Plans and Excesses programs for the State of Nevada, providing guidance and assisting with the training and exercise instruction and deliverables. He will provide both direct support to local and tribal jurisdictions for developing an

conducting trainings and exercises.
Line 4.De M Taining Officer will design, conduct, coordinate, and oversee the Statewide training program. The Training Officer will ensure minimum required NIMS classes are conducted and that all classes contain the required content and quality.
Line 5.DEM Exercises Officer will design, conduct, coordinate, and oversee the Statewide exercise program. The Exercise Officer will ensure minimum required NIMS exercises are conducted and that all exercise contain the required content and quality.
Line 5.DEM Exercises Officer will ensure minimum required NIMS exercises are conducted and that all exercise contain the required content and quality.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source	Reason	Reduction	New T	otal
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									Personnel				
6		DEM Planner	Maintain	SHSP	31.07	20%	2080	\$ 4,265.29		Operational Coordination	Personnel			\$	4,265.29
7		DEM Planner	Maintain	SHSP	31.07	20%	2080	\$ 4,265.29	NIMS - State of Nevada DEM	Operational Coordination	Personnel			\$	4,265.29
8		DEM Training and Exercise Supervisor	Maintain	SHSP	38.78	20%	2080		NIMS - State of Nevada DEM	Operational Coordination	Personnel			s	5,323.72
9		DEM Training Officer	Maintain	SHSP	32.52	20%	2080	\$ 4,464.35		Operational Coordination	Personnel			s	4,464.35
10		DEM Exercise Officer	Maintain	SHSP	30.98	20%	2080		NIMS - State of Nevada DEM	Operational Coordination	Personnel			s	4,252.93
	Fringe Sub-Total							\$ 22,571.58					\$ -	\$	22,571.58

NGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS

Line 6: DEM Planner will update required Statewide plans to include the State Comprehensive Emergency Management Plan, Continuity of Operations Plan, State Emergency Operations Center Standard Operating Guide, Mass Care Plan, and other necessary statewide plans. Planner will assist local and tribal jurisdictions with development and update of their required Emergency Operations Plans and other emerency / disaster plans as needed.

Line 7: DEM Planner will update equired Statewide plans to include the State Comprehensive Emergency Management Plan, Continuity of Operations Plan, State Emergency Operations Center Standard Operating Guide, Mass Care Plan, and other necessary statewide plans. Planner will assist local and tribal jurisdictions with the development and update of their required Emergency Operations Plans and other emerency / disaster plans as needed.

Line 8: DEM Training and Exercise Supervisor will oversee the Emergency/Disaster Training and Exercise programs for the State of Nevada, providing guidance and assisting with the training and exercise instruction and deliverables. He will provide both direct and indirect support to local and tribal jurisdictions for developing and Line 9. DEM Training officer will design, conduct, coordinate, and oversee the Statewide training program. The Training Officer will ensure minimum required NIMS classes are conducted and that all classes contain the required content and quality.

Line 10: DEM Exercise Officer will design, conduct, coordinate, and oversee the Statewide exercise program. The Exercise Officer will ensure minimum required NIMS exercises are conducted and that all exercise contain the required content and quality, and conform to the HSEEP standards.

Line	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type		Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source	Reason	Reduction	New Total
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type												
11		State TEPW	Maintain	SHSP	Training	Training officer travel to LV for UASI TEPW	1.00	1.000.00	1.000.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP			1.000.00
		Oldio TET 11		51101	ridining	Training officer& tribal	1.00	1,000.00	1,000.00			Orion			1,000.00
12		Reg IX TEPW	Maintain	SHSP	Training	training or supervisor travel to Reg TEPW in Oakland	2.00	1.000.00	2.000.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP			2,000.00
12		Reg IX TEPW		5H5P	Training	Reg TEPW in Oakland	2.00	1,000.00	2,000.00	NIMS - State of		SHOP			2,000.00
13		NIMS Classes in Elko	Maintain	SHSP	Training	ICS course - Instructor travel	4.00	1,000.00	4,000.00	Nevada DEM	Coordination	SHSP	MOVED 2 TRIPS TO COMPETITIVE PROPOSAL	\$ 2,000.00	2,000.00
14		NIMS Classes rural	Maintain	SHSP	Training	ICS course - Instructor travel	6.00	1.000.00	6,000,00	NIMS - State of Nevada DEM	Operational Coordination	SHSP	MOVED 3 TRIPS TO COMPETITIVE PROPOSAL	\$ 3,000.00	3.000.00
15		NIMS Classes Southern NV	Maintain	SHSP	Training	ICS course - Instructor travel	6.00	1,000.00		NIMS - State of		SHSP	MOVED ALL TRIPS TO COMPETITIVE PROPOSAL	\$ 6,000,00	
15		INING Classes Southern INV		эпэг	Halling	DEM staff EMI costs not	6.00	1,000.00	6,000.00	NIMS - State of		SHOP	MOVED ALL TRIPS TO COMPETITIVE PROPOSAL	\$ 6,000.00	
16		EMI travel support	Maintain	SHSP	Training	funded	10.00	500.00	5,000.00		Coordination	SHSP	MOVED 5 TRIPS TO COMPETITIVE PROPOSAL	\$ 2,500.00	2,500.00
17		DEM travel to national courses	Maintain	SHSP	Training	DEM staff travel to attend national courses with no stipend	8.00	2,000.00	16,000.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP	MOVED 4 TRIPS TO COMPETITIVE PROPOSAL DELETED 4 TRIPS	\$ 16,000.00	
- 17		DEW traver to frational courses		эпэг	Halling	Traing officer travel to	6.00	2,000.00	16,000.00	Nevada DEW	Coordination	SHOP	DELETED 4 TRIPS	\$ 16,000.00	
18		DEM training travel to Las Vegas	Maintain	SHSP	Training	southern NV for Technical Assistance	8.00	1,200.00	9 600 00	NIMS - State of Nevada DEM	Operational Coordination	SHSP	MOVED 4 TRIPS TO COMPETITIVE PROPOSAL	\$ 4.800.00	4.800.00
10						Training Supervisor travel to			.,,,,,,,,	NIMS - State of	Operational				4,000.00
19		Training Supervisor travel	Maintain	SHSP	Training	Northen NV	6.00	1,200.00	7,200.00		Coordination	SHSP	MOVED ALL TRIPS TO COMPETITIVE PROPOSAL	\$ 7,200.00	\$ -
20		Chief Travel to training	Maintain	SHSP	Training	DEM Chief to travel for training	1.00	1,200.00	1,200.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP	DELETED ALL TRIPS	\$ 1,200.00	s .
21		Basic Academy Travel LV		SHSP	Training	Instructor travel to Basic Acdemy	10.00	1,200.00		NIMS - State of		SHSP			12.000.00
			Maintain			4 DEM student to travel to LV for Advanced academy 4		.,	,	NIMS - State of					
22		Adavaced Academy Travel LV		SHSP	Training	trips/ea.	16.00	1,000.00	16,000.00	Nevada DEM	Coordination	SHSP			16,000.00
23		MEPP Travel LV	Maintain	SHSP	Training	1 DEMstaff to travel to MEPP in southern NV 2 trips	2.00	2,000.00	4,000.00		Coordination	SHSP			4,000.00
25		Travel: Technology Support	Maintain	SHSP	Planning	Henderson 2020 NPS	3.00	1,500.00	4,500.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP	MOVED ONE PERSON TO COMPETITIVE PROPOSAL	\$ 1,500.00	3,000.00
26		Travel: Technology Support	Maintain	SHSP	Planning		age 1 of 4 6.00	550.00		NIMS - State of		SHSP			3,300.00

		T .			Tech support to training						1			
		Maintain			classes outside of CC and N.				NIMS - State of	Operational				
27	Travel: Technology Support		SHSP	Training	Nevada	6.00	750.00	4,500.00		Coordination	SHSP			\$ 4,500.00
		Maintain							NIMS - State of			MOVED CONFERENCE TRAVEL TO COMPETITIVE		
28	Travel: Technology Support	Walitalii	SHSP	Planning	Conference: Infocom	2.00	1,500.00	3,000.00	Nevada DEM	Coordination	SHSP	PROPOSAL	\$ 3,000.00	\$ -
29								-						
					Exercise Officer and exercise									
		Maintain			designers, players, controllers				NIMS - State of	Operational				
30	Travel: Exercise In & Out of State		SHSP	Exercise	and evaluators travel	25.00	800.00	20,000,00		Coordination	SHSP	MOVED 5 TRIPS TO COMPETITIVE PROPOSAL	\$ 4,000.00	\$ 16,000.00
31	Travol. Excroso in a dator date		01101	Excitoiou	und cranacoro traver	20.00	000.00	20,000.00	NOVIGGE DEM	Coordination	Grior	MOVED O THE O TO COME ETTIVE THOS COME	4,000.00	Ψ 10,000.00
- 0.					Technical Asst. to									
		Maintain			Tribes/Locals; ICAM and EMAC				NIMS - State of	Operational				
32	Resource Management & Credentialing Travel		SHSP	Planning	Meetings	10.00	1,000.00	10,000.00	Nevada DEM	Coordination	SHSP	MOVED 5 TRIPS TO COMPETITIVE PROPOSAL	\$ 5,000.00	\$ 5,000.00
33								-						
					THIRA/SPR/CA/NIMS; Planning for Tribes/Locals: School									
		Maintain			Planning; Mass Care Planning;				NIMS - State of			MOVED 8 TRIPS TO COMPETITIVE PROPOSAL		
34	Planning Support Travel		SHSP	Planning	Tech. Plans development	25.00	1.000.00	25.000.00		Planning	SHSP	DELETED 4.5 TRIPS	\$ 12,500.00	\$ 12.500.00
34	I latining Support Havei		OFFICE	rianning	recii. Fians development	25.00	1,000.00	23,000.00	IVEVAGA DEIVI	rianning	SHOP	DELETED 4.5 TRIPS	9 12,300.00	3 12,000.00
					Nevada Preparedness									
		Maintain			Summit: Travel for attendance				NIMS - State of					
35	Nevada Preparedness Summit		SHSP	Planning	by state/local/tribal partners	15.00	750.00	11,250.00	Nevada DEM	Planning	SHSP			\$ 11,250.00
36								-						
	Travel Sub-Total							171,550.00					68,700.00	102,850.00

17,550.00 17,550

Line 11 & 12: DEM travel to support and present the state and regional TEPW.
Line 13-15: DEM adjunct instructor travel to instruct NIMS/ICS courses in NV.
Line 16: Travel support to pick up non-covered costs from FEMA for consortium travel.
Line 17: Travel support to national courses that are not available for stipend frough FEMA.

Line 17: Traves Support to Tealouts Cucieses and are the valentage to Superun rough Period.

Line 18: Travel for training officer to support Clark County

Line 19: Travel support for Supervisor to vist Carson City.

Line 20: Travel support for the Child to attend a national course.

Line 21-23: Travel support for DEM statifiquests to attend the Academy Classes offered around the state.

Line 24: Travel support for the Child only not the Nevada Prep. Summit in 2020, Henderson.

Line 22. Travel to support the technology needs of the Nevada Prep. Summit in 2000. Henderson.
Line 25. Travel in support of the set plan arturning of the Redilineous and Homeland Security Commissions, as well as other large attended meetings.
Line 27. Travel in support of non Carson City training and exercise events where technology services are required to support he mission.
Line 28. Travel to pather in State Exercise Officer to develop and support information during the engineering and upgrade phase of the SEOC technology.
Line 30. Travel for State Exercise Officer to develop and support federal, state and local exercises. Travel for players, controllers, evaluators, and simulators to attend exercises development meetings.
Line 32. Attended and Access Management (CAM) Counterprise Meetings, EMAC Regional/National Meetings; provide support and technical assistance to counties and tribes.
Line 34. Travel and per diem for THRA/SPR/Consequence Analysia/NIMS Assessment in and out of state, planning support to counties and tribes, attending school planning training, National Mass Care Exercise, and threat/hazard specific planning training (i.e.: Radiological, Biochemical. Cyber, etc.) in and out of state; develop of planning capability for local and tribal planners

				Previous			Approved		Requested			
Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type		QUANTITY	UNIT COST	TOTAL Strategic	Canability	Funding	Reason	Reduction	New Total
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY		Type					Source			
40		Training- Printing & Purchase Course Materials	Maintain	SHSP	1.00	12,000.00	NIMS - State of 12,000.00 Nevada DEM	f Operational Coordination	SHSP	MOVED \$2,000 TO COMPETITIVE PROPOSAL SUBTRACTED \$1,812.30 TO BALANCE BUDGET	\$ 3,812.30	\$ 8,187.70
41			Maintain									\$ -
42		Licensing Fee: iVCl Polycom 500/700/700/Pano	Maintain	SHSP	4	1,800.00	NIMS - State of 7,200.00 Nevada DEM	f Operational Communications	SHSP			\$ 7,200.00
43		Licensing Fee: iVCl Cloud	Maintain	SHSP	1.00	2,500.00	NIMS - State of 2,500.00 Nevada DEM	f Operational Communications	SHSP			\$ 2,500.00
44		Licensing Fee: LiveStream / Vimeo	Maintain	SHSP	1	900.00	NIMS - State of 900.00 Nevada DEM	f Operational Communications	SHSP			\$ 900.00
45		Subscription: Satellite Phone	Maintain	SHSP	1	3,000.00	NIMS - State of Nevada DEM	f Operational Communications	SHSP	REMOVED FROM BUDGET LIMITED / NO USE OVER PRIOR YEAR	\$ 3,000.00	\$ -
46		Supplies: Technology Support components, parts for replacement, support equipment.	Maintain	SHSP	1	20,000.00	NIMS - State of 20,000.00 Nevada DEM	f Operational Communications	SHSP	10% MOVED TO COMPETITIVE PROPOSAL	\$ 2,000.00	\$ 18,000.00
47		Licensing Fee: Connected Sign	Maintain	SHSP	1	2,000.00	NIMS - State of 2,000.00 Nevada DEM	f Operational Communications	SHSP			\$ 2,000.00
48		Subscription Fee: Survey Monkey	Maintain	SHSP	1	400.00	NIMS - State of 400.00 Nevada DEM	f Operational Communications	SHSP			\$ 400.00
49												\$ -
50		Exercise - Printing & Purchase Exercise Materials	Maintain	SHSP	1	3,500.00	NIMS - State of 3,500.00 Nevada DEM	f Operational Coordination	SHSP			\$ 3,500.00
51												
52		Resource Mgmt & Credentialing supplies & materials	Maintain	SHSP	1	5,000.00	NIMS - State of 5,000.00 Nevada DEM	f Operational Coordination	SHSP	MOVED \$3,000 TO COMPETITIVE PROPOSAL REMOVED \$1,000 TO BALANCE BUDGET	\$ 4,000.00	\$ 1,000.00
53		Direct Contract Support to Local/Tribal Resource Management & Credentialing implementation	Maintain	SHSP	1	10,000.00	NIMS - State of 10,000.00 Nevada DEM	f Operational Coordination	SHSP	MOVED TO COMPETITIVE PROPOSAL	\$ 10,000.00	s -
54 55		Resource Mgt: Preparedness Program Support	Maintain	SHSP	1	60,000.00	NIMS - State of 60,000.00 Nevada DEM	f Operational Coordination	SHSP			\$ 60,000.00
56		Nevada Preparedness Summit	Maintain	SHSP	1	10,000.00	NIMS - State of 10,000.00 Nevada DEM NIMS - State of	Planning	SHSP			\$ 10,000.00
57		THIRA/SPR Contract Support	Maintain	SHSP	1	50,000.00	50,000.00 Nevada DEM	Planning	SHSP	MOVED TO COMPETITIVE PROPOSAL	\$ 50,000.00	\$ -
58		Planning Supplies and Materials	Maintain	SHSP	1	2,000.00	2,000.00 Nevada DEM	Planning	SHSP	\$1,500 MOVED TO COMPETITIVE PROPOSAL	\$ 1,500.00	\$ 500.00
59		Consequence Analysis - Contract	Maintain	SHSP	1	10,000.00	NIMS - State of 10,000.00 Nevada DEM	Planning	SHSP	MOVED TO COMPETITIVE PROPOSAL	\$ 10,000.00	\$ -
60		EOP Development Support - Rural/Tribal	Maintain	SHSP	1	15,000.00	NIMS - State of 15,000.00 Nevada DEM	Planning	SHSP	\$5000 MOVED TO COMPETITIVE PROPOSAL \$10,000 REMOVED TO BALANCE BUDGET	\$ 15,000.00	s -
	Planning Sub-Total						\$ 213.500.00				\$ 99.312.30	\$ 114,187,70

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. Line 40: Printing of training documents and purchase of training material, meals for working lunches, instructor apparel or other supplies deemed necessary in support of statewide training program. Line 42: Fees for iVCI services on four VTC Components within the SEOC,

Line 45: Sul Line 46: Sul Line 47: Sul Line 48: Sul Line 50: Pri Line 52: Sul Line 54: Co Line 56: Ne Line 57: TH	Subscription fee for Connected Sign- bubscription fee for Survey Monkey f Printing of exercise documents and p Supplies and materials to support Re Provide contract support to County & Contract Preparedness Section supp levada Preparedness Summit HIRA/SPR Contract Support - additi	for SEOC If gleacy equipment, to support changing technologies and capabi pilor (1) year y for (1) year y for (1) year d purchase of exercise material in support of HSEEP exercise prog Resource Management and Credentialing , & Tribal Nations for Resource Management & Credentialing imple port ditional funding to come from UASI	rogram. plementation	·	ther, to provided for equipment, ins'	allation and maintenr	ance of new and o	existing component	ts at the SEOC an	d local jurisdictions.			
Line 58: Su Line 59: Co	Supplies and Materials to support the Contract support to conduct required	the annual THÏRA/SPR, the Consequence Analysis, NIMS Assessi ed THIRA Consequence Analysis and Gap Analysis id Tribal Nations with EOP Updates and Development	ment, and other planning relate										
Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST		Approved Strategic Capacity		Requested Funding Source	Reason	Reduction	New Total
(Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.											
61	Organization Sub-Total						\$ -						\$

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source	Reason	Redi	uction N	New Total
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL													
		ocurement / See 2nd tab to determine whether oject requires EHP Screening												s	_
62		Radio, DHS HF SHARES system	New / Enhance / Past / Competitive		1.00	5,000.00	\$ 5,000.00	NIMS - State of Nevada DEM	Operational	06CP-01-HFRQ Radio, High Frequency (HF) Single Sideband	SHSP	REMOVED TO COMPETITIVE PROPOSAL	\$	5,000.00 \$	-
63		Radio, Public Safety / EAS system components case	New / Enhance / Past / Competitive		1.00	2,000.00	\$ 2,000.00	NIMS - State of Nevada DEM	Operational Communications		SHSP	REMOVED TO COMPETITIVE PROPOSAL	\$	2,000.00 \$	
64		Antennas, Dipole	New / Enhance / Past / Competitive		2.00	820.00	\$ 1,640.00	NIMS - State of Nevada DEM		06CP-03-TOWR Systems, Antenna and Tower	SHSP	REMOVED TO COMPETITIVE PROPOSAL	\$	1,640.00 \$	<u>=</u>
65		Radio Upgrade component for XL200 Portable	New / Enhance / Past / Competitive		6.00	500.00	\$ 3,000.00	NIMS - State of Nevada DEM	Operational Communications	06CP-01-PORT Radio, Portable	SHSP	REMOVED TO COMPETITIVE PROPOSAL	\$	3,000.00 \$	<u>=</u>
66		Radio, New, DualBand VHF / UHF, Digital Fusion	New / Enhance / Past / Competitive		1.00	800.00	\$ 800.00	NIMS - State of Nevada DEM	Operational Communications	06CP-01-BASE Radio, Base	SHSP	REMOVED TO COMPETITIVE PROPOSAL	\$	800.00 \$	
67		Project support equip. & software for agencies & jurisdictions for Resource Mgmt & Credentialing (physical & logical access)	Maintain		1.00	50,000.00	\$ 50,000.00	NIMS - State of Nevada DEM	Operational	04AP-05-CRED System, Credentialing	SHSP	MOVED \$17,655 TO COMPETITIVE PROPOSAL \$2,345 REMOVED TO BALANCE BUDGET	\$	20,000.00 \$	30,000.00
69		Training, Qualification & Back End Attribute Exchange (BAE) software	Maintain		1.00	25,000.00	\$ 25,000.00	NIMS - State of Nevada DEM	Operational Coordination	04AP-05-CRED System, Credentialing	SHSP			\$	25,000.00
70		Printer	Maintain				\$ -	NIMS - State of		04HW-01-INHW Hardware, Computer					
71	EQUIPMENT Sub-Total				1.00		\$ 1,500.00 \$ 88,940.00				SHSP	MOVED TO COMPETITIVE PROPOSAL	\$	1,500.00 \$ 33,940.00 \$	55,000.00

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 62: System components for communication with DHS HF radio network. This reestablishes this capability within the SEOC Communications Suite.

Line 62. System components for communication with DHS HF radio network. This reestablishes this capability within the SEOC Communications Suite.
Line 63. Case and components for the installation of esisting PS Radios and EAS system for COOP.
Line 64. Antennas for the ARES / RACES radio repeater systems.
Line 65. Radio component to enhance current XL 200 potables within the SEOC for UHF which was left out at time of purchase.
Line 66. Radio will replace current with next-generation unit with digital capabilities.
Line 66. Radio will replace current with next-generation unit with digital capabilities.
Line 65. Software and software to continue the development and milementation of the Resource Management & Credentialing Project
Line 69. Software development, licensing and programming for the Training, Qualification & Back End Attribute Exchange (BAE) software that supports the Credentialing Project
Line 67. Expriser to support the DEM Planning Section.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source	Reason	Reduction	New Total
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						_							
72		curement / See 2nd tab to determine whether ject requires EHP Screening									•				
73		Training- Develop, Support & Particiapte in NIMS Training	Maintain	SHSP	Yes	Yes	60			Operational Coordination	\$ 67,500.00	SHSP	8 CLASSES MOVED TO COMPETITIVE PROPOSAL 2 CLASSES REMOVED TO BALANCE BUDGET	\$ 11,250.00	\$ 56,250.00
74		Training- Preparedness Program Support	Maintain	SHSP	Yes	Yes	1			Operational Coordination	\$ 50,850.00	SHSP			\$ 50,850.00
75											\$ -				
76											\$ -				
77											\$ -				
78											\$ -				
	Training Sub-Total						2000 3 of 4				\$ 118,350.00			\$ 11,250.00	\$ 107,100.00

RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS YOU PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EMP APPROVAL PLEASE SEE SCREENING MEMO

Line 73: Instructor pay for adjunct course delivery in support of NIMS and ICS. Working Lunches for training sessions.

Line 74: Contract staff pay for training and exercise specialist in support of both programs.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source	Reason	Reduction	New Total
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)													
79		curement / See 2nd tab to determine whether ect requires EHP Screening													
80		Conducting Exercises Statewide	Maintain	SHSP	Yes		1	23,820.00	Nevada DEM	Operational Coordination	\$ 23,820.00	SHSP			\$ 23,820.00
81		Exercise & Program Contractor Support	Maintain	SHSP	Yes		1		NIMS - State of Nevada DEM	Operational Coordination	\$ 8,000.00	SHSP			\$ 8,000.00
82											\$ -				
83											\$ -				
	Exercise Sub- Total										\$ 31,820.00			\$ -	\$ 31,820.00

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EMP, PLEASE SEE EMP SCREENING MEMO

Line 80: Conducting exercises statewide to include an Annual State Capstone exercise, AAR Workshops. Provide working lunches for exercises.

Line 81: The State Exercise Officer utilizes necessary Contractor Support for statewide Drills and exercises in planning, conduct, evaluation, controlling, and developing after action materials of such exercises.

			Budget Total			
			Request	\$ 715,130.30	\$ 213,202.30 \$	501,928.00
					29.81%	

Project P

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	HSGP Statewide NIM	HSGP Statewide NIMS Maintenance Project						
Funding Source:	SHSP	SHSP Funding Request:	501,928.00					
(SHSP, UASI, SHSP/UASI Split)	2µ2Ь	UASI Funding Request:	0					

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The outcome of this project sustains the continued delivery of the statewide training, exercise, planning, resource management, and technology programs needed to remain in compliance with federal NIMS requirements.

Maintaining NIMS compliance is necessary to ensure all organizations within the state remain eligible for Homeland Security grant funding.

How have you collaborated with other agencies to maximize the resource's capacity?

Services will be provided for all jurisdictions and agencies including state agencies, local jurisdictions, tribal governments, and non-governmental organizations.

State and UASI TEPW, Statewide Training and Exercise coordination, multi-agency and multi-jurisdiction planning coordination through task forces and workshops, resource management to include inventory for the purpose of mutual aid both intra and interstate, credentialing of first response resources, THIRA/SPR statewide support through conduct and analysis for tribes, jurisdictions, agencies, private sector and NGO's.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

There are no state funds provided for NIMS

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

DEM continues to work through the Nevada Commission on Homeland Security and the legislative process to advocate for state funding.

Project P

Please provide a five year funding summary for your project.

DEM is the agency responsible for the management, implementation and compliance with NIMS statewide. The strategy utilized to continue to advance the implementation of the statewide NIMS program contains the following components:

- 1. Utilizing the results of the THIRA/SPR/Consequence and Gap Analysis determine the planning, training, exercise and resource capability requirements of tribes, jurisdictions, agencies, private sector and NGO's within Nevada.
- 2. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies, private sector and NGO's with development of new plans and/or review and update of existing plans through workshops and task forces to ensure the widest, most appropriate collaboration as possible.
- 3. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies, private sector and NGO's and utilizing the annual TEPW, identify and conduct necessary training and exercises to improve NIMS compliance and community resilience.
- 4. As the requirements in #1 above are identified each year, assist tribes, jurisdictions, agencies with identification of local, regional and statewide resources available to assist in times of emergencies or disasters through resource typing, mutual aid inventory, and qualified and credentialed first response resources. Continue to build out a robust outreach and collaboration system to identify solutions for gaps in resource availability. Continue development of reimbursement processes and procedures through real world events and exercises. Full implementation of a First Responder Credentialing program will require a partnership between state and local jurisdictions for day to day deployment at the local level statewide.
- 5. Items 1-4 above are intended to build capacity to effectively respond to and recover from emergencies and disasters in Nevada.

Nevada Homeland Securit	y Grant Program (F	HSGP) RESUBMISSION	PROJECT ID:	Q
Project Proposal for FFY19			Date Submitted	4/30/19
1) PROJECT TITLE:	Statewide Interoperability		·	
PROPOSING/LEAD AGENCY:	DPS - Division of Emerge	ncy Management		
Project Manager Name/Title:	Melissa Friend - SWIC			
Project Manager Contact Info:	Phone: (775) 687-0371	Email: mnfriend@dps.state.nv.us	S	
Addl Project Manager Name/Title:				
Addl Project Manager Contact Info:	Phone:	Email:		
) Finance/Grant Contact Name/Title:	Kelli Anderson			
Finance/Grant Contact Info:	Phone: (775) 687-0321	Email: kanderson@dps.state.nv	.us	
cLASSIFICATION - Check the p	orimary intention of the Pr	oposed Project:		Choose one:
		ecently addressed this capability with ects in this category must align with		s.
MAINTAIN Project will MAINTA	AIN AN APPROVED FFY19 ST	RATEGIC CAPACITY*		<u> </u>
*All NEW projects are competitive				
Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hocapability); and <a (establish,="" expan<br="" href="https://www.wheeleveloper.com/wheeleveloper.com</th><th>le: " improve,="" to="">omeland Security (NCHS) FFY18 pr ographic locale; example: state-w	d, double, sustain, etc.)];	DRE CAPABILITY (or CAPAB he direct users/beneficiari .]. FIELD IS LIMIITED TO VI	BILITIES [consider ies of the ISIBLE TEXT BOX.	
communications plans and train	ing unoughout the state.			
PROPOSED STRATEGIC CAPA capability. Reference the Federa Capabilities to Core Capabilities h	l Emergency Management A	Agency (FEMA) list of Core Capabi	lities and the Crosswa	ılk of Target
FFY19 Strategic Capacity Mainta	ined*: OPERATION	AL COMMUNICATION		
HSGP Project Type Supporting Stra If OTHER, please choose FFY16-18		eroperability Coordinator [OPERATIC AL COMMUNICATIONS [Mission Are		N]
Core Capability aligned with Maint		AL COMMUNICATIONS [Mission Are	ea - RESP]	
*FFY19 Strategic Capacities are sul	bject to change pending Neva	da Commission on Homeland Secu ce of Funding Opportunity when rel	rity Approval on 3/26/1	19 and/or
		this project aligns with the stro maintained. If it does not, please justify		
	tate of Nevada under NTIA	ations agencies to insure interop ans DHS/FEMA. This strategic o		

lev	ada Homeland Secur	ity Grant Progr	am (HSGP) <mark>RESUBMISSI</mark>	ON	PROJECT ID:	Q
roj	ject Proposal for FFY	19 HSGP Fundin	g Description		Date Submitted	4/30/19
RO.	JECT TITLE REFERENCE:	Statewide Interop	erability Coordinator			
0)	PROCUREMENT - Indicate	the method of pro	curement associated with this	proj	ect:	
	Request for Proposal	Provide a brief explana	ition on your method of procurement	- FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source	urrent filled position				
	Internal					
l)			nd by whom, the Proposed Projectished, identifying who (i.e. staff, contractor		•	scribe
FIELD IS LIMITED TO VISIBLE TEXT BOX	Regional Emergency Comminuteroperability Coordinators	unications Coordination (NCSWIC). The SWIC PRE) Executive Commi	nications Interoperability Summit (Non Working Group (RECCWG) and to coordinates between Nevada government of the Nevada Commission of the Nevada	he Na ernan	ational Council of Sta ce structures along v	tewide vith the
2)	section is for you to tell us		e participating agency(s) and juris ng the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's y		ncy]
	12(a) DPS/DIvision of Emer		1		sa Friend	,
	12 (b)					
	12 (c)					
3)	SUSTAINMENT - Identify at	ny continuing financial	obligation created by the Project, a	and pr	roposed funding solu	tion
×	This program is currently in p	place and is funded by	SHSP, SLIGP 2.0 and state funding	g. Cu	rrent funding is 15%	SHSP funds.
FIELD IS LIMITED TO VISIBLE TEXT BOX			ram mission and to achieve the goa any communications related projects		hese services in sup	port of the
4)			t's funding percentage makeup of Sto 15g - PROJECT TOTALS' on Page #3	atewi	de -vs- UASI is noted b	elow for

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Q
Date Submitted 4/30/19

PROJECT TITLE REFERENCE:

Statewide Interoperability Coordinator

15)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	cific. Identify (<i>UASI and State</i> State-wide	<i>cost.</i> SubTotal
	SWIC travel 4 @ \$1200 = \$4,800 Communications Travel 8 @ \$800 = \$6,400 Technology 4 @ \$800 = \$3,200		\$ 14,400.00	\$ 14,400.00
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
box size				\$ 0.00
ext	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Fields are limitied to visible text box size	Cell Phone/VPN - \$60 x 12 = \$720 Supplies - \$500		\$ 1,220.00	\$ 1,220.00
Ii	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Fields are				\$ 0.00
	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
	Statewide Communications Exercise		\$ 6,000.00	\$ 6,000.00
	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
	SWIC Salary @15% = \$10,347.30 SWIC Fringe @ 15% = \$3,572.70		\$ 13,920.00	\$ 13,920.00
	15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
	109) 1 10 11 120	\$ 0.00	\$ 35,540.00	\$ 35,540.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Q
Date Submitted 4/30/19

PROJECT TITLE REFERENCE:

Statewide Interoperability Coordinator

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration	
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)	
1	Receive Funding	N/A	N/A	N/A	
2	Governance, project managment, training, outreach	10/01/19	09/30/21	24	
3	Plan and participate with first responders regarding improving communications	10/01/19	09/30/21	24	
4	Travel to meet with stakeholders	10/01/19	09/30/21	24	
5	Track and report on financial and programmatic activities	10/01/19	09/30/21	24	
6					
7					
8					
9					
10					
11					
12					

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. D	oes this pro	ject have a nexus to terrorism?	YES 💿	No 🔵	Explain below.

This project oversees all the communication projects in Nevada and has a direct connection to all Nevada Communication Stakeholders. Communications is a priority in the Homeland Security 911 Act as well as Nevada Homeland Security Commission 2018 priorities. Without the SWIC Nevada is unable to manage current and future communication programs and projects.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Communications is a priority in the Homeland Security 911 Act as well as Nevada Homeland Security Commission 2018 priorities. Without the SWIC Nevada is unable to manage current and future communication programs and projects.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

The salary is 15% of the salary amount, if necessary we can cut travel by 25%.

Neva	ada H	lomeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	Q
Proj	ect P	roposal for FFY19	HSGP Funding Description	Date Submitted	4/30/19
PROJ	ECT TI	ITLE REFERENCE:	Statewide Interoperability Coordinator		
	d. (Can this project continue w	ithout funding? YES NO 💿 Explain below.		
Fields "d" and "e" are limitied to visible text box size	It is a [DHS HSGP requirement to	o have a SWIC to manage communication projects.		
nitie	е. [Does this project provide a	MEASUREABLE statewide benefit? YES • NO • Ex	plain below.	
Fields "d" and "e" are l	The SV The SV	MIC is available to the ent MIC is available for asses:	ire State of Nevada, completes statewide plans, training and sment, review and planning of statewide communication sys	d exercises for comn stems	nunications.
18)	THIRA	A COMPLETION - Please	e indicate the participation level in completing the 2018 T	HIRA Survey. CHOO	SE ONE:
		YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) S	urvey
		NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR.	A) Survey
19)		TIONAL COMMENTARY d to the visible text box	l - Please indicate any additional project commentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	Agency Name	DPS Division of Emergency Management	Project Manager Name & Contact #	Melissa Friend 775-687-0371		Grant Manager Name & Contact #	Kelli Anderson 775-687-0321	1				Q
	IJ TITLE:	Statewide Interoperability Coordinator (SWIC)									
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Postitions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		SWIC Salary	Maintain	SHSP	68982	15%	1	\$ 10,347.30	Communication - DEM SWIC	Operational Communications		SHSP
2								\$ -				
3								\$ -	1			+
4	Personnel Sub-Total							\$ 10,347.30				
DEDSON		D FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND F	SELIVEDABLES I	NADDATIVE WILL	BE LICED TO ENGLIBE ITEMS LIS	TED WILL BE COM		CRANT CYCLE	ITEMS MAY NOT	DE DURCHASED O	LITCIDE THE ITEM

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

#1 The Statewide Interoperability Coordinator (SWIC) is a position required by th Homeland Security Grant Program (HSGP) Grant Guidence in order to fund any communications related projects. The SWIC is responsible for statewide communications governence, coordination, outreach and support. They maintain the Statewide Interoperability Plan (SCIP) which is also a requirement of the HSGP Grant Guidence. They maintain involvment with local, state, regional and national committees and working groups. They share information with tribes, counties and special districts, monitor grant performance and continually evaluate communications plans and training throughout the state.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		SWIC Fringe	Maintain	SHSP	23818	15%	1.00			Operational Communications	Personnel
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ 3,572.70			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

5 Fringe associated with #1

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9		SWIC stakeholder meetings	Maintain	SHSP	Planning	Stakeholder meetings to address Statewide Interoperability	4.00	1,200.00		Communication -	Operational Communications	SHSP
10		Communications Travel	Maintain	SHSP	Planning	Travel for communications meetings statewide	8.00	800.00		Communication - DEM SWIC	Operational Communications	SHSP
11		Technology Travel	Maintain	SHSP	Planning	Travel to address Interoperable technology needs statewide	4.00	800.00		Communication - DEM SWIC	Operational Communications	SHSP
12									-			ļ
13 14									-			
15									-			
16					1				-			†
	Travel Sub-Total	DR FACH LINE ITEM AROVE - PLEASE EXPLAINE IN DET							14,400.00			

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

#9 - Travel to Northeastern and Southern Nevada meet with communications stakeholders statewide, also included is out-of-state travel for confrences.
#10 - Travel for communications trainig and meetings statewide (UAWG, SNACC, coordination meetings)
#11 - Travel to address Interoperable technology needs statewide

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Supplies for SWIC	Maintain	SHSP	1	500.00	500.00	Communication - DEM SWIC	Operational Communications	SHSP
28		Technology support for SWIC	Maintain	SHSP	12.00	60.00	720.00	Communication - DEM SWIC	Operational Communications	SHSP
29							•			
30							-			
32							-			1
33										
34							-			
35	Diamina Cub Total									
	Planning Sub-Total						\$ 1,220.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

#27 Office supplies required to support the SWIC position #28 includes monthly cell phone and VPN costs for SWIC

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					1	-	\$ -			
37			·				\$ -			
38			•				\$ -			
39			•		•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL.									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40							\$ -				
41							\$ -				
42							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47			•				\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			_								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57		curement / See 2nd tab to determine whether ject requires EHP Screening										
58		State Communications Rodeo	Maintain	SHSP	Yes		1		Communication - DEM SWIC	Operational Communications	\$ 6,000.00	SHSP
59											\$ -	
60											\$ -	
	Exercise Sub- Total										\$ 6,000.00	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

#51 Statewide communications exercise. The SWIC and Exersice Officer will lwork together to have a statewide communications exersice with as many jurisdictions/agencies as we can allow. Printing and possible water/lunch costs. Planning meetings will occur VTC and in person, travel might occur.

L								
						Budget Total	1	
						Buuget Total	1	
						Request	\$ 35,540.00	n l
						request	φ 55,540.00	,

Project Q

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Statewide Interopera	ability Coordinator	
Funding Source:	SHSP	SHSP Funding Request:	\$35,540
(SHSP, UASI, SHSP/UASI Split	SHSF	UASI Funding Request:	0

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This project sustains the Statewide Interoperability Coordinator in compliance with federal HSGP grant requirements for the funding of communications related projects. This project also funds a statewide communications expo/drill

Maintaining this compliance is necessary to ensure all organizations within the state remain eligible for Homeland Security grant funding.

How have you collaborated with other agencies to maximize the resource's capacity?

Services are provided for all jurisdictions and agencies including state agencies, local jurisdictions, tribal governments, and non-governmental organizations.

Continued outreach will remain necessary to ensure that all jurisdictions have Interoperability.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

There is a 25% contribution using State funding that supports the SWIC position.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

DEM continues to work through the Nevada Commission on Homeland Security and the legislative process to advocate for additional state funding.

Project Q Please provide a five year funding summary for your project. DEM is the agency responsible for the SWIC position. The strategy utilized to continue to advance the implementation of the SWIC program contains the following components: 1. Salary funding requests for 2020-2025 are expected to rise by 5% per year to accommodate for the SWIC yearly increases. 2. It is also anticipated that there will be a slight increase in the funding required for the communications exercise. 2019 will be the first year the NDEM is the hosting agency so exact costs are unknown at this time.

Nev	ada Home	eland Security	y Grar	nt Program (I	HSGP) RESUBMISSION	PROJECT ID:	R					
Proj	ect Propo	sal for FFY19	HSGF	Funding De	scription	Date Submitted	5/13/19					
1) PR	OJECT TITL	E:	Emerge	ency Alerting Mas	s Notification							
2) PR	ROPOSING/L	EAD AGENCY:	City of	City of Las Vegas								
3) Pro	oject Manage	r Name/Title:	Carolyr	rolyn Levering, Emergency Management Administrator								
Pro	oject Manage	r Contact Info:	Phone:	(702) 229-0313	Email: clevering@lasvegasnevac	da.gov						
4) Ad	dl Project Mar	nager Name/Title:	N/A	N/A								
Ad	dl Project Mana	ager Contact Info:	Phone:		Email: N/A							
5) Fin	ance/Grant Co	ontact Name/Title:	Priscilla	Wdowiak								
Fin	ance/Grant Co	ntact Info:	Phone:	(702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov						
6)	CLASSIFICAT	ION - Check the p	rimary i	ntention of the Pr	roposed Project:		Choose one:					
	NEW*	,	,	, ,	ecently addressed this capability with ects in this category must align with I							
	MAINTAIN	Project will MAINTA	AIN AN A	PPROVED FFY19 ST	RATEGIC CAPACITY*		<u> </u>					

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

The city of Las Vegas has operated a mass notification system since 2005. The original system consisted of a locally-based server with out-of-area back-up capacity in the event a catastrophic emergency left the local system unusable. With the advent of "cloud" technology, the city has moved away from a local-based server to a subscription-based technology providing added assurance the emergency public information and warning capacity will exist when needed. Since the mass shooting attack in Las Vegas on 1 October 2017, local law enforcement, specifically the Southern Nevada Counter Terrorism Center, has learned more of what this existing system can provide, both from a Public Warning standpoint as well as an Intelligence and Information Sharing perspective. This increased interest in more frequent use of this system has created a requirement for the city to expand the current system capabilities from a per-unit usage system to an unlimited call, text, email system.

The system was expanded to unlimited call capacity as a result of funds re-obligated from the DHS FFY 2016 grant year. This project is to maintain that system expansion for another year.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: HSGP Project Type Supporting Strategic Capacity: If OTHER, please choose FFY16-18 NCHS Priority: Core Capability aligned with Maintained Project: PUBLIC INFORMATION AND WARNING Please select the appropriate FY16-18 NCHS priority aligned with your project PUBLIC INFORMATION AND WARNING [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Public Information and Warning is defined as: Deliver coordinated, prompt, reliable, and actionable information to the whole community through the use of clear, consistent, accessible, and culturally and linguistically appropriate methods to effectively relay information regarding any threat or hazard, as well as the actions being taken and the assistance being made available, as appropriate. This mass notification system is equipped to provide all services as described and we request it be extended another year.

Nev	ada I	lomeland Secur	ity Grant Progra	ım (HSGP) RESUBMISSI	ON	PROJECT ID:	R
Proj	ject P	roposal for FFY1	19 HSGP Fundin	g Description		Date Submitted	5/13/19
PRO.	JECT T	ITLE REFERENCE:	Emergency Alertin	g Mass Notification			
10)	PROC	UREMENT - <i>Indicate</i>	the method of prod	urement associated with this	s proje	ect:	
	Re	quest for Proposal	Provide a brief explanat	ion on your method of procuremen	t - FIELI	D IS LIMITED TO VISIE	BLE TEXT BOX:
	_			heres to all requirements of the R ojects and services of a certain de			
11)			•	nd by whom, the Proposed Project shed, identifying who (i.e. staff, contracto		•	scribe
ВОХ	contin Projec	ued operation of the cu	rrent system to meet e	on system, the city of Las Vegas is mergency alerting mass notification d training for end users to ensure	on need	ds.	
FIELD IS LIMITED TO VISIBLE TEXT BOX		et Manager Carolyn Leving is completed in acco		ancial Analyst, Priscilla Wdowiak urance requirements.	to ensi	ure all program and	financial
TED TO VI							
ITD IS TIMI							
Ħ							
12)		n is for you to tell us	WHO will be receiving	participating agency(s) and juri g the money for your project - If	fit's yo	ou, put in your age	ncy]
	I	Agency (FI	D, PD, etc.)	Political Jurisdiction (City, County, State, etc.)		Project Representative ((individual)
	12 (a)	City of Las Vegas		City of Las Vegas	Caroly	n Levering	
	12 (b)	N/A					
	12 (c)	N/A					
13)				obligation created by the Project,		·	
T BOX				rgency Management Performance 50% from local (city) resources.	e Gran	t funding awarded to	the city from
FIELD IS LIMITED TO VISIBLE TEXT BOX				bligated from UASI and SHSP FY eks to maintain this same level of			sures
14)				's funding percentage makeup of St 5g - PROJECT TOTALS' on Page #3	tatewid	le -vs- UASI is noted b	elow for

0%

Statewide

(SHSP)

100%

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

PROJECT IITLE REFERENCE:

| Emergency Alerting Mass Notification | Date Submitted | 5/13/19 |

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified.	ecific. Identify	<i>UASI and State</i> State-wide	cost. SubTotal
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies] N/A	LV-UA3I	State-wide	SubTotal
			\$ 0.00
			φ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
N/A	1 0/131	State Wide	Jabrotar
			00.00
			\$ 0.00
	11/ 11/01		0.17.1
15c) Equipment [Procurement and installation of equipment, systems, facilities] Subscription services for unlimited system use. AEL # 04AP-09-ALRT	LV-UASI	State-wide	SubTotal
Subscription services for uniffilted system use. ALL # 04AF-09-ALK I			
	\$ 71,135.00		\$ 71,135.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
N/A			
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
N/A			
			\$ 0.00
			Ψ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
139) TROJECT TOTALS	\$ 71,135.00	\$ 0.00	\$ 71,135.00

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION**Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: R

Date Submitted 5/13/19

PROJECT TITLE REFERENCE:

Emergency Alerting Mass Notification

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Per RFP and resulting contract, extend contract with existing vendor for an additional year.	06/01/19	07/31/19	2
3	Conduct additional system training courses (as needed) in collaboration with community partners.	08/01/19	12/31/19	5
4	Assist in development of administrators and databases in the system including contacts, groups, messages and, scenarios.	08/01/19	12/31/19	5
5	Comply with quarterly financial and program reporting requirements.	08/01/19	12/31/20	17
6	Complete final financial and program reports.	08/01/19	12/31/20	17
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this proj	ect have a nexus to terrorism?	YES 🕡	No 🔘	Explain below.

This system provides a pathway to access IPAWS capabilities and mass notification to the general public. Emergency Alerting and mass notification are part of a complex series of communications to the public to help keep people out of harms way during any kind of terror attack, barricaded suspect or suspect search, and protective actions to take during other types of emergencies as well.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, mass notification is a major component to an overall Emergency Alert System capability.

c. Can this project funding request be reduced? Is it scaleable? YES NO • Explain below.

Current contract pricing is for unlimited use of this system. Reducing use to a limited number of calls/texts/emails will result in inability to use the system once purchased units have been expended. Eliminating this system entirely will impact operations for city of Las Vegas, Clark County, Las Vegas Metropolitan Police Department, University Medical Center, ARES/RACES, State of Nevada Health & Human Services and others.

		DJECT ID:	R
ect Proposal for FFY19	HSGP Funding Description Date	Submitted	5/13/19
ECT TITLE REFERENCE:	Emergency Alerting Mass Notification		
d. Can this project continue v	vithout funding? YES NO 💿 Explain below.		
There is no other identified fund	ding for this project outside of grants.		
e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Explain b	elow.	
A monthly usage report is gene	rated to show the volume of system use by each participating agen	cy.	
	e indicate the participation level in completing the 2018 THIRA S		<u></u>
YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification Risk Assessm	ent (THIRA) Su	urvey
NO - Agency has NOT p	participated in the 2018 Threat and Hazard Identification Risk Asse	essment (THIRA	A) Survey
ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary you feel i	may be impor	tant. Field
Management has committed \$2 project this year. The city of La	iations for many projects funded via the UASI funding stream, the S20,000 from EMPG funds (either FFY17 or FFY18) to complete the s Vegas will commit to make the \$20,000 match required for this pure 9 UASI will complete the balance of this year's contracted service.	funding neede	ed for this

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LII1L I	EM DETAIL BODGET							
	Agency Name	City of Las Vegas	Project Manager Name & Contact #	Carolyn Lev (702) 229-0		Grant Manager Name & Contact #	Priscilla Wdo	owiak (702) 2	229-6045			R
	IJ TITLE:	Emergency Alerting Mass Notification										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3					-			\$ -		-		-
4								\$ -				
	Personnel Sub-Total							\$ -				
PERSONN	IEL COST NARRATIVE REQUIRED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	FLIVERABLES	NARRATIVE WILL	BE USED TO ENSURE ITEMS UP	STED WILL BE COM	IPI ETED IN THE	GRANT CYCLE	ITEMS MAY NOT	BE PURCHASED OF	ITSIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		 Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			-
14 15												
16									-			
17									_			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			
24									-			-
26												
27									-			+
	Travel Sub-Total								-			
TRAVEL		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	ALL EACH LINE ITEM AND DELIV	FRARIES NAG	PATIVE WILL BE II	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITEM	IS MAY NOT BE	PURCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.



Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27										
28						-	-			
29							-			
30							-			
31							-			
32							-			
33					_		-			
34							-			
35					_					
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39			•				\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40		Mass Notification Subscription Service -Unlimited	Maintain	UASI			\$ 71,135.00	vvarning -	Public Information and	04AP-09-ALRT Systems, Public Notification and Warning	UASI
41							\$ -				
42							\$ -				
43				-			\$ -				
44 45							\$ -				
46							\$ -				
47				1			\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 71,135.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Maintain existing mass notification system. This portion of funding represents 75% of the total annual cost. The remaining balance is requested in SHSP.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

1					Budget Total		
1					Request	\$ 71,13	5.00

Project R

Emergency Alerting Mass Notification 3-5 Year Budget Plan

Background

This system has provided mass communications solutions for many local agencies for many years. It features a list-driven system for notifications to specific contacts and groups as designated. It also includes a map-driven feature, which allows the user to target specific areas in the community in need of notification. For many years, the city hosted this system on a locally based server with a limited number of dial out lines. Over time, this proved to be less efficient and more labor intensive than expected. In conjunction with contract end-dates, the city issued an RFP for hosted services that would reduce local labor, increase call capacity, and add redundancy from servers located outside of the state. For cost-management purposes, the service was contracted for a limited number of call units, commensurate with usage rates at that time.

In anticipation of an increased level of system usage by participating agencies, the city sought additional funding to erase the limitation on call volume and offer unlimited text, calls and emails for both list-driven and map-driven activations. By consent of the Urban Area Working Group and the Finance Committee, a recommendation for funding from FY2016 deobligations was approved by the Nevada Commission on Homeland Security June 18, 2018.

Participating agencies*:
City of Las Vegas
Clark County
City of North Las Vegas
Las Vegas Metropolitan Police Department (several portals assigned)
Southern Nevada Health District
University Medical Center
ARES/RACES
Nevada State Health & Human Services
*Additional portals remain available to new users

Funding Requirements into the Future

The city of Las Vegas is proud to continue sponsoring the management of this system for such a diverse community of partners. This diversity, however, makes it impossible to justify the cost from the city general fund. Back-charging our partners for costs incurred is also labor-intensive and bureaucratic. Leveraging grant funds designed to support multiple public safety agencies at once continues to be the logical path for this project.

Current year funding consisted of three sources, the FY2018 EMPG grant managed by the city of Las Vegas and the FY2016 SHSP and UASI deobligations.

Years 2 & 3 – Fixed rate under contract \$91,135 (per year); proposed funding under Strategic Capability Public Information & Warning.

Years 4 & 5 – Existing contract expires. Must initiate new RFP managed by city of Las Vegas Purchasing. Cost for new contract unknown, but recent RFP processes have shown many mass notification systems to cost significantly more than the current rate. Proposed funding under Strategic Capability Public Information & Warning.

Nevada Homeland Security	PROJECT ID:	S			
Project Proposal for FFY19	scription	Date Submitted	4/30/19		
1) PROJECT TITLE:	TLE: Public Information and Warning				
2) PROPOSING/LEAD AGENCY:	GENCY: DPS - Division of Emergency Management				
3) Project Manager Name/Title:	Project Manager Name/Title: Gail Powell				
Project Manager Contact Info: Phone: (775) 687-0325 Email: gpowell@dps.state.nv.us					
4) Addl Project Manager Name/Title:					
Addl Project Manager Contact Info:	Phone:	Email:			
5) Finance/Grant Contact Name/Title:	Kelli Anderson				
Finance/Grant Contact Info:	Phone: (775) 687-0321 Email: kanderson@dps.state.nv.us				
6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:					
NEW* Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.				\sim	
MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*				O	

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe <u>HOW MUCH</u> [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; <u>OF WHAT CORE CAPABILITY</u> (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; <u>FOR WHO</u> (identify the direct users/beneficiaries of the capability); and <u>WHERE</u> (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. *FIELD IS LIMITED TO VISIBLE TEXT BOX.*

This project provides sustainment of the currently operating Emergency Alert System (EAS) and provides for an enhanced Public Information and Warning Program to the public, managed within DEM. This project is in direct response to the DHS core capability of Public Information and Warning. This project provides a common platform for Nevada's Public Safety Officials to quickly send out alerts and warnings. Additionally, the projects within this investment produce and deliver a broad range of public information and warning messaging. This includes video content for social media platforms, state websites, TV and radio broadcast. This messaging will cover the threats and hazards to Nevada as identified in the THIRA. This messaging promotes education, and awareness of the five cornerstones in emergency management: prevention, protection, mitigation, response and recovery to both public and private sectors. DEM will collaborate and share all content developed within this investment to partners in all jurisdictions and Tribal Nations across Nevada. The end goal is to better prepare all of Nevada in the event of an emergency through comprehensive public information and warning.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

If OTHER, please choose FFY16-18 NCHS Priority:

Core Capability aligned with Maintained Project:

PUBLIC INFORMATION AND WARNING [Mission Area - ALL]

PUBLIC INFORMATION AND WARNING [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project will sustain the current public warning system throughout the State allowing for quick and accurate alerts and warnings. In addition, the project directly provides public information through the development of a wide range of deliverables to be shared across multiple mediums and throughout all jurisdictions and Tribal Nations. Public Information sharing develops strong, resilient communities and has a direct correlation to the ability of a community to rebound from disaster. The ability to know, be aware of, and respond to an event lessens the impact to agencies who must respond. It also decreases the potential loss of property and life during an incident.

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION			PROJECT ID:	S		
Pro	ject Proposal for FF	Y19 HSGP Fundin	g Description		Date Submitted	4/30/19
PRO	PROJECT TITLE REFERENCE: Public Information and Warning					
10)	10) PROCUREMENT - Indicate the method of procurement associated with this project:					
	Request for Proposal	Provide a brief explana	tion on your method of procuremen	t - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source	RFP will be required for t	the EAS subscription. This process	s is cu	rrently in progress.	
	O Internal					
11)	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work					
FIELD IS LIMITED TO VISIBLE TEXT BOX	This project will begin with a thorough review of the current EAS system with input from its front line and end result users. The State will provide day to day coordination of the system. This project will be managed by key program managers within DEM under the leadership of an Emergency Management Program Manager (EMPM). Once approved and delivered, the various projects identified will be implemented under a "team" approach within the PIO Program and Technical Services Sections of DEM and placed within a schedule that identifies the phases of each project and their accompanying milestones. In some cases, where contractors are identified for either program support or for specific projects, the EMPM will assign a specific staff member to oversee their project and work performance to insure programmatic and financial compliance to their portion of the investment. Each individual program: PIO and Technical Services shall have their portions of the overall investment identified with a programmatic workplan and a budget to insure understanding and continual compliance with the investment. Quarterly reporting and grant compliance shall be maintained. State rules and regulation regarding purchasing and other areas shall be followed. We shall maintain an "audit-ready" posture throughout the life of the investment. At the conclusion of this investment we shall provide a report specific to the goals and eventual outcomes achieved by this investment.					
12)	section is for you to tell u		e participating agency(s) and juris g the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's ye		ncy]
	DDS Division of Er	mergency Management	State		Powell	individual)
	12(a) DF3 - DIVISION OF ET					
	12 (b)					
	12 (c)					
13)	SUSTAINMENT - Identify	any continuing financial	obligation created by the Project, a	and pr	oposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX		ere will be costs associate	s. The PSA portion and its content ed with the promotion of the materi			
14)		unt is derived from Field '1	t's funding percentage makeup of St 15g - PROJECT TOTALS' on Page #3	tatewio	de -vs- UASI is noted b	pelow for

(SHSP) (UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: S Project Proposal for FFY19 HSGP Funding Description Date Submitted 4/30/19 PROJECT TITLE REFERENCE: Public Information and Warning

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified by the second of the	ecific. Identify (UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
NV Broadcasters \$110,000 Social Media Dashboard: \$700 Advertising \$15,000 Video Productions \$ 30,000 Emergency Alert System Subscription \$40,000		\$ 195,700.00	\$ 195,700.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
EAS Trainer		\$ 20,000.00	\$ 20,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide State-wide	SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: S

Date Submitted 4/30/19

PROJECT TITLE REFERENCE:

Public Information and Warning

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE LIMITED TO TEXT BOX SIZE		From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Establish vendor contracts through State Purchasing	10/31/19	11/30/19	1
3	Begin EAS subscription	08/01/20	07/31/21	12
4	Deliver Media	10/31/19	10/31/21	24
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project have a nexus to terrorism?	YES NO	Explain below.

This project strengthens local and state agencies to quickly send out emergency alerts and warnings during acts of terrorism. This project also has the ability to help prepare citizens for situations where these events occur. The media produced will relate to all of the threats and hazards contained within the THIRA for the state of Nevada as reported in 2017.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with the strategic capacity of Public Alerts and Warning.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Funding requested covers the EAS subscription. Some of the deliverables in the media and the outreach programs are scalable.

Vev	ada Homeland Security	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	S
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/30/19
PROJ	ECT TITLE REFERENCE:	Public Information and Warning		
	d. Can this project continue w	ithout funding? YES NO NO Explain below.		
"e" are limitied to visible text box size	The State of Nevada EAS syste	m cannot exist without this funding.		
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	cplain below.	
Fields "d" and "e" are	This project allows local and sta	te government to send out alerts and warnings statewide.		
8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 T	HIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk A.	ssessment (THIRA) S	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTAR' limited to the visible text box	Y - Please indicate any additional project commentary yo	u feel may be impoi	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

	LINE II EM DETAIL BODGET													
	Agency Name	DPS Division of Emergency Management	Project Manager Name & Contact #	Gail Powell 775-687-032		Grant Manager Name & Contact #	Kelli Anders 775-687-032					S		
	IJ TITLE:	Public Information and Warning												
		One Budget Per Funding Stream												
		SHSP												
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source		
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.												
1								\$ -						
3								\$ -						
4								\$ -						
	Personnel Sub-Total							\$ -						
DEDSONN	IEL COST NADDATIVE DECLIIDEI	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOSITIONS AND D	ELIVEDABLES	NADDATIVE WILL	DE LICED TO ENGLIDE ITEMO LI	CTED WILL BE COM	ADI ETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITEMS		

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				_		-			
9		·	Maintain						-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
	Travel Sub-Total	R FACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET										

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line # CATEGORY PLANNING DETAIL DESCRIPTION Select Purchase Type Funding QUANTITY UNIT COST TOTAL Strategic Canability	Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requeste Funding Source
--	--------	----------	-----------------------------	----------------------	--	----------	-----------	-------	-----------------------------------	--------------------	-------------------------------

		DESCRIPTION OF PLANNING ACTIVITES MUST BE		1	1				1	1	1
		DETAILED OUT (GENERAL TERMS AND INFORMATION									
		WILL NOT BE ACCEPTED BASED UPON NON-									
		COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO									
		OVERTIME IN THIS CATEGORY									
		O TEIRTINE IN THIS SATESSAY							Public		
									Information &		
			Maintain						Warning -		
			waintain						Statewide	Public	
									Emergency Alert	Information and	
27		NV Broadcasters		SHSP		1	110,000.00	110,000.00		Warning	SHSP
									Public		
									Information &		
			Maintain						Warning -		
			··········						Statewide	Public	
		L								Information and	
28		Social Media Platform		SHSP		1.00	700.00	700.00		Warning	SHSP
									Public Information &		
									Warning -		
			Maintain						Statewide	Public	
									Emergency Alert	Information and	
29		Advertising		SHSP		1	15,000.00	15,000.00	System	Warning	SHSP
25		Advertising		01101			10,000.00	10,000.00	Public	vvairing	01101
									Information &		
									Warning -		
			Maintain						Statewide	Public	
									Emergency Alert	Information and	
30		Video		SHSP		1	30,000.00	30,000.00	System	Warning	SHSP
									Public	_	
									Information &		
			Maintain						Warning -		
			Waliitalii						Statewide	Public	
									Emergency Alert	Information and	
31		Emergency Alerting System		SHSP		1	40,000.00	40,000.00	System	Warning	SHSP
32								-			
33								-			
34								-			
35											
	Planning Sub-Total							\$ 195,700.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

#27 - Nevada Broadcasters - delivery of PSAs statewide, #28 - Social Media Service Platform for PSA delivery, #29 - Public Safety Advertising, #30 - PSA video production, #31 Statewide Emergency Alerting System

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Ownerinstien	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					1	,	\$ -			
37							\$ -			
38							\$ -			
39					•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL								
		ocurement / See 2nd tab to determine whether ject requires EHP Screening								
40							\$ -			
41							\$ -			
42							\$ -			
43							\$ -			
44							\$ -			
45							\$ -			

46					\$ -		
47					\$ -		1
48					\$ -		i
49					\$ -		1
	EQUIPMENT Sub-Total				\$ -		

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether ject requires EHP Screening									¢	
51	you pro	Training Coordinator	Maintain	SHSP	Yes	Yes	1	20,000.00	Emergency Alert	Public Information and Warning	\$ 20,000.00	SHSP
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56	Taskela a Oak Tatal										\$ -	
	Training Sub-Total										\$ 20,000.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

#51 - Training Coordinator (contract) to deliver EAS training throughout the state.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 215,700.00	i i

Project S

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Public Information ar	nd Warning	
Funding Source:	SHSP	SHSP Funding Request:	215,700
(SHSP, UASI, SHSP/UASI Split)	2H2h	UASI Funding Request:	0

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The State of Nevada THIRA and SPR evaluation processes identified communications as an important element of homeland security and government functions. These assessments form the foundational components of the state Emergency Management Program. A key item of these assessments is the emphasis of the need for Public Information and Warning. The evaluation processes (THIRA & SPR) have provided baseline capability levels for comparative analysis to gauge progress in planning, training, and exercise efforts under the NIMS requirements for the state, jurisdictions, and tribes.

This project provides sustainment of the currently operating Emergency Alert System (EAS) and provides for an enhanced Public Information and Warning Program to the public, provides for the ability to monitor and post social media messaging, and will be managed within DEM. This project is in direct response to the DHS core capability of Public Information and Warning. This project provides a common platform for Nevada's Public Safety Officials to quickly send out alerts and warnings.

Additionally, the projects within this investment produce and deliver a broad range of public information and warning messaging. This includes video content for social media platforms, state websites, TV and radio broadcast. This messaging will cover the threats and hazards to Nevada as identified in the THIRA. This messaging promotes education, and awareness of the five cornerstones in emergency management: prevention, protection, mitigation, response and recovery to both public and private sectors. DEM will collaborate and share all content developed within this investment to partners in all jurisdictions and Tribal Nations across Nevada. The end goal is to better prepare all of Nevada in the event of an emergency through comprehensive public information and warning.

How have you collaborated with other agencies to maximize the resource's capacity?

Yes, the Statewide Public Information and Warning Project Proposal a component under the Division of Emergency Management's Preparedness Section. This project meets the Nevada Commission on Homeland Security Approved Priority of Operational Coordination and the FEMA Core Capability of Operational Coordination.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

There are no state funds provided for the State of Nevada's EAS system and the system cannot exist without this funding.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

There are no state funds provided for the State of Nevada's EAS system and the system cannot exist without this funding.

Please provide a five year funding summary for your project.

DEM is the agency responsible for the management, implementation and execution of the Emergency Alert System to include public information and warning education statewide to include Tribal Nations. The strategy utilized contains the following components:

- The Statewide Public Information and Warning Project Proposal a component under the Division of Emergency Management's Preparedness Section. This project meets the Nevada Commission on Homeland Security Approved Priority of Operational Coordination and the FEMA Core Capability of Operational Coordination.
- 2. This project will sustain the current public warning system throughout the State and Tribal Nations for quick and accurate alerts and warnings.
- 3. This project directly provides public information through the development of a wide range of deliverables to be shared across multiple mediums and throughout all jurisdictions and Tribal Nations.
- 4. Public Information sharing develops strong, resilient communities and has a direct correlation to the ability of a community to rebound from disaster. The ability to know, be aware of, and respond to an event lessens the impact to agencies who must respond. It also decreases the potential loss of property and life during an incident.
- 5. The Statewide PSA program promotes education, and awareness of the five cornerstones in emergency management prevention, protection, mitigation, response and recovery to both public and private sectors.
- 6. The end goal for the Public Information and Public Warning program is to better prepare all of Nevada in the event of an emergency through comprehensive public information and warning and supporting the Governor's objective for a more resilient Nevada.

Nevada Homeland Securit	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	T						
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/17/19						
1) PROJECT TITLE:										
2) PROPOSING/LEAD AGENCY:	Washoe County Emerger	ncy Management and Homeland	Security Program							
3) Project Manager Name/Title:	Aaron R. Kenneston, Wa	shoe County Emergency Manage	r							
Project Manager Contact Info:	Phone: (775) 337-5898	Email: akenneston@washoecour	nty.us							
4) Addl Project Manager Name/Title:										
Addl Project Manager Contact Info:	Phone:	Email:								
5) Finance/Grant Contact Name/Title:	Kelly Echeverria, Washoe	e County Emergency Managemen	t Program Coordina	tor						
Finance/Grant Contact Info:	Phone: (775) 337-5898	Email: kecheverria@washoecou	nty.us							
6) CLASSIFICATION - Check the p	orimary intention of the Pr	roposed Project:	·	Choose one:						

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN

Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

◉

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To sustain and maintain planning through continuity of operations (COOP) and continuity of government (COG) for agencies Statewide.

This is a request to continue sustainment efforts and capabilities for this statewide project. During the initial phase of this project plans were developed for Counties, Cities, and Tribes throughout Northern Nevada. During Phase 2 of the project, sustainment began with Northern Nevada local government, while continuity plans were created for Clark County Metro to demonstrate the value of continuity plans for Southern Nevada terrorism preparedness, the City of Henderson, and the Moapa Tribe. The 3rd phase of the project completed additional State agencies and the City of Las Vegas. The 4th phase of the project focused on the UASI jurisdictions of Clark County, Clark County School District, and the Southern Nevada Health District; and continued the efforts to ensure that participants are trained to update plans, have access to planning tools, and refine continuity plans in the State of Nevada. The 5th phase added North Las Vegas and University of Nevada, Reno. Phase 6 developed Elko County and UNLV COOP plans in addition to securing the continued use of the planning tool through September 2021.

This phase will maintain the project through fiscal year 2022.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

PLANNIING

HSGP Project Type Supporting Strategic Capacity: Continuity of Operations (PLANNING)

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: PLANNING [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The COOP Plans ensure that jurisdictions and agencies can continue to operate and provide public safety after a terrorism incident or other crisis has occurred.

Originally, COOP was listed in the DHS "Target Capabilities List," it was also in the Nevada Commission on Homeland Security (NCHS) "Top Three" priorities. Over the last few years it has been integrated into a variety of DHS "Core Capabilities." National Security Presidential Directive (NSPD) 51 directed the DHS to develop and lead continuity activities and make available grants for continuity planning. The FEMA Continuity Guidance Circular (CGC) dated February 2018 stated "Continuity is an important element of preparedness and an integral part of each core capability across the five mission areas of protection, prevention, mitigation, response, and recovery within the National Preparedness System" (p.4).

			19 HSGP Funding	am (HSGP) RESUBI a Description	VII331014	Date Submitted	4/17/19				
	ECT TITLE RE		COOP Sustain	g Description		Date Submitted	4/17/19				
					ith this pro	iaati					
10)				curement associated w			DIE TEVT BOV.				
	Request foSole Source		Provide a briej explanat	tion on your method of proc	urement - FIE	LD IS LIMITED TO VISIE	SLE TEXT BOX.				
	O Internal	A	request for proposals w	vill be issued to secure the	most respon	nsive bidder.					
-				nd by whom, the Proposed shed, identifying who (i.e. staff, o	-	•	scribe				
FIELD IS LIMITED TO VISIBLE TEXT BOX	In addition to sustaining the Statewide Steering Committee consisting of key stakeholders from state, local, rural, tribes, urbar public jurisdictions, and the private sector (these are the administrators of the existing continuity plans); assistance will be given to one additional Northern Nevada agency (Reno-Tahoe Airport) and one additional State agency NDEP). When selecting this year's COOP planning vendor, additional tasks will be included in the Scope of Work (SOW). Workshop IS-526: Mission Essential Functions Course will be held in two locations around the State to train and/or refresh personnel with the COOP/COG planning process; additional training will be provided to one Northern Nevada and one State agency to assist them in bring their COOP plans online. Plans-writers will work one-on-one with jurisdictions and agencies to update and sustain the plans to ensure that they are successful. The collaborative website of NevadaContinuity.com will be continued along with a web-based COOP planning tool for resources. Best practices and the FEMA 2018 Continuity Guidance Circular dated February 2018 (which mentioned this initiative as a best practice on p.34) are being integrated into the plans, and outreach efforts conducted throughout the State. Upon completion of this project, sustainment of individual plans will be conducted by state-level and local agency planners.										
2)		you to tell us		participating agency(s) agency(s) agency(s) agency for your properties of the money for your properties of the your properties of the your properties of the your properties of the your properties of	oject - If it's y		ncy]				
	Washoe and Hor		gency Management	Washoe County	1	Echeverria	marviadaly				
:	12 (b)										
;	12 (c)										
13)	SUSTAINMEN	NT - Identify a	ny continuing financial d	obligation created by the F	Project, and p	roposed funding solu	tion				
FIELD IS LIMITED TO VISIBLE TEXT BOX	this assistance Upon completi	no longer be on of any phas jurisdictions c	available sustainment in se of this project, indivice an choose to sustain th	ntinuity funding to State, lon built into this project. Stall plan sustainment will be cloud-based tool usage,	be conducted	l by state-level and lo	cal agency				
FIELD IS I											

100%

Statewide

(SHSP)

0%

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description PROJECT TITLE REFERENCE: COOP Sustain

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Reestablish Statewide Steering Committee, hire tool/training vendors, plan workshops and sustainment activities. (Includes planning tool & software support, logistics vendor, and planning consultant)		\$ 100,000.00	\$ 100,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Conduct two, one-day workshops (IS-526: Mission Essential Functions Course) (Includes venue space, and trainers).		\$ 25,000.00	\$ 25,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS			

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: T

Date Submitted 4/17/19

PROJECT TITLE REFERENCE:

COOP Sustain

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE I	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Accept funds through Board of County Commissioners	09/02/19	11/29/19	3
3	Contracting- RFP, and selection	12/02/19	01/17/20	2
4	Begin Steering Committee Meetings and activities	02/03/20	01/04/21	11
5	Continue usage of a Continuity web-based portal Tool	02/03/20	09/29/21	20
6	Conduct COOP Training in 2 statewide locations (North & South)	04/03/20	01/04/21	9
7	Develop sustainment planning activities	01/04/21	09/29/21	9
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

a.	Does this pro	ject have a nexus to terrorism?	YES 💿 NO 🔵	Explain below.
а.	Does this pro	Ject have a nexus to terrorism?	AE2 (a) INO (Explain belo

Yes,

This project aligns with NSPD-51 to focus on preventing the failure of government after a terrorism event (but it is applicable to all-hazards, of course). The initiative ensures continuity of mission essential functions, orders of succession, alternate facilities, vital records, devolution, and reconstitution planning.

. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes,

The Nevada Commission on Homeland Security (NCHS) has been briefed on several occasions and is supportive of ensuring that State/Local Government have these plans in place prior to a terrorism event. This project is identified by FEMA as supporting the implementation of the Threat and Hazard Identification and Risk Assessment (THIRA), the National Incident Management System (NIMS) and the National Response Framework (NRF). In addition to Federal directives, this also supports actions mandated by NRS 239c. The NCHS has previously asked why more jurisdictions have not been completed.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Yes, training could be reduced- although not recommended. The most essential piece is to ensure continued access to the planning tool, and to keep moving forward on adding jurisdictions and agencies to the list of Nevada organizations with these plans in place.

CT TITLE REFERENCE	E: COOP Sustain				<u>.</u>
d. Can this project cor	ntinue without funding? YES	NO (Explain be	low.		
No,					
The current COOP Tool	expires at the end of the 2018 g	rant cycle.			
e. Does this project pr	ovide a MEASUREABLE statewide	benefit? Y	ES 💿 NO 🔘 Exp	lain below.	
es,					
	umbers of jurisdictions and ager	ncies who have vali	d continuity plans	, and can continue	to operate
ıfter a catastrophic ever	t.				
HIRA COMPLETION	Please indicate the participat	ion level in comple	eting the 2018 Th	IIRA Survey. <u>CHOO</u>	SE ONE:
VFS - Agency HA	S participated in the 2018 Three			· (TIUDA) C	
TEO rigericy in a		at ana Hazara laen	titication Risk Ass	sessment i i HIKAT S	urvev
NO Agansy has					
	NOT participated in the 2018 1	Threat and Hazard	Identification Risl	k Assessment (THIR	'A) Survey
ADDITIONAL COMME	NOT participated in the 2018 T	Threat and Hazard	Identification Risl	k Assessment (THIR	'A) Survey
	NOT participated in the 2018 T	Threat and Hazard	Identification Risl	k Assessment (THIR	'A) Survey
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ADDITIONAL COMME imited to the visible tea. This project provides be 'Today's threat environing organizations to continu	NOT participated in the 2018 To ENTARY - Please indicate any and the box The provided in the 2018 To ENTARY - Please indicate any and the box The provided in the 2018 To Entart in the 2018 To Enta	Threat and Hazard and Additional project da- jurisdictions and comprehensive comprehe	dentification Rish commentary you dagencies large o	k Assessment (THIR I feel may be impor or small, urban, rura enable communitie	rtant. Field
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ADDITIONAL COMME imited to the visible termined termined to the visible termined ter	ENTARY - Please indicate any and box nefit to the entire State of Nevadore essential functions and provide srupted. ning is the responsibility of the ward core capability across the final Preparedness System. Become, and services, continuity plannating structures that provide the powernment can perform essential government can perform essential provide the powernment can perform essential provide the powernment can perform essential provide the powernment can perform essential entire that provide the powernment can perform essential entire that provide the powernment can perform essential entire that provide the powernment can perform essential entire that provide the powernment can perform essential entire that provide the powernment can perform essential entire that the provide that the pro	comprehensive core critical services a vhole community. Cove mission areas of ause incidents may aning and operation dem. Enduring considetion of preparedrial functions and professional and profession and professional and profe	dentification Risk commentary you dentification Risk commentary you dentification Risk de	enable communities ectrum of emergence component of each may be important element of pention, mitigation, recation's or government, continuity of go	es and cies when coreparedness ability or core overnment all and oport of the
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ADDITIONAL COMME imited to the visible termined termined to the visible termined to the visible termined to the visible termined ter	ENTARY - Please indicate any and the box ment has increased the need for e essential functions and provide srupted. ming is the responsibility of the ward core capability across the final Preparedness System. Because, and services, continuity plannating structures that provide the possibility of the ward core capability across the final Preparedness System. Because, and services, continuity plannating structures that provide the possibility of the ward core capability across the final Preparedness System. Because and services, continuity plannating structures that provide the povernment can perform essenting essector entities, critical infrastructures that provide in the	comprehensive core critical services a vhole community. Cove mission areas of ause incidents may aning and operation dem. Enduring considerion of preparedrial functions and projecture, non-governing and coverning considerions and projecture, non-governing and coverning covernin	dentification Risk commentary you dentification Risk commentary you dentification Risk de	enable communities component of each may be important element of pention, mitigation, recation's or government, continuity of grand every individual ces without the supons, communities, ir	es and cies when coreparedne esponse, all ent's ability or core overnment all and eport of the ndividuals,

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

WC COOP SHSP LINE ITEM DETAIL BUDGET

			•			DETAIL BODGET						
	Agency Name	Washoe County EM&HS	Project Manager Name & Contact #		,		Kelly Echevo	erria (775) 33	37-5859			Т
		Statewide Continunity of Operation (CO	OP)									
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ -				
3								\$ -				
4	Personnel Sub-Total							\$ -				ļ
		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOOLTIONS AND D	SEL IVER A DI EQ. 1		- 11055 TO 51101155 IT5110 1 10	TED WILL DE 004	\$ -	ODANIT OVOLE UT		DUDOUAGED OUT	NOS TUS ITSMO

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9	Planning	Airline expense (2 airline tickets @ \$400 ea)	Maintain	SHSP	Planning	First face-to-face task force coordination meeting	1.00	800.00		Planning - Continuity of Operations	Planning	SHSP
10	Planning	Meal expense for LV (2 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day	Maintain	SHSP	Planning	п п	1.00	91.50		Planning - Continuity of Operations	Planning	SHSP
11	Planning	Rental Car & fuel in LV for 2 attendees	Maintain	SHSP	Planning		1.00	100.00		Planning - Continuity of Operations	Planning	SHSP
12	Planning	Airport Parking	Maintain	SHSP	Planning	п п	1.00	20.00		Planning - Continuity of Operations	Planning	SHSP
13		Airline expense (2 airline tickets @ \$400 ea)	Maintain	SHSP	Planning	Second face-to-face coordination meeting	1.00	800.00	800.00	Planning - Continuity of Operations	Planning	SHSP
15		Meal expense for LV (2 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day	Maintain	SHSP	Planning	п п	1.00	91.50	91.50	Planning - Continuity of Operations	Planning	SHSP
16		Rental Car & fuel in LV for 2 attendees	Maintain	SHSP	Planning		1.00	100.00		Planning - Continuity of Operations	Planning	SHSP
17 18		Airport Parking	Maintain	SHSP	Planning		1.00	20.00		Planning - Continuity of Operations	Planning	SHSP

19		Airline expense (2 airline tickets @ \$400 ea)	Maintain	SHSP	Training	Attendance at Training Workshop	1.00	800.00		Planning - Continuity of Operations	Planning	SHSP
20		Meal expense for LV (2 attendees) 1-1/2 day lunch excluded/provided & calculated at 75% for travel day	Maintain	SHSP	Training		1.00	157.00		Planning - Continuity of Operations	Planning	SHSP
21		Rental Car & fuel in LV for 2 attendees	Maintain	SHSP	Training		1.00	160.00		Planning - Continuity of Operations	Planning	SHSP
22		Airport Parking	Maintain	SHSP	Training		1.00	40.00		Planning - Continuity of Operations	Planning	SHSP
23		Hotel for 2 Attendees	Maintain	SHSP	Training		2.00	130.00	260.00			
24									-			
25									-			
26									-			
27									-			
	Travel Sub-Total								3,440.00			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This travel is for two WCEM&HS personnel to attend the three events scheduled for Southern Nevada (two coordination meetings and a workshop). This project spans a two-year grant cycle, so the vast majority of the task force and coordination meetings will occur on teleconferences and video-teleconference. However, these minimal physical onsite visits are necessary to ensure statewide project success.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27	Planning	Contractor- Continuation of Statewide access to Planning Portal	Maintain	SHSP	1	85,000.00	85,000.00	Planning - Continuity of Operations	Planning	SHSP
28	Planning	Project Logistics Vendor	Maintain	SHSP	1.00	10,000.00	10,000.00	Planning - Continuity of Operations	Planning	SHSP
29	Planning	Project Supplies (paper, printing, etc.)	Maintain	SHSP	1	5,000.00	3,000.00	Planning - Continuity of Operations	Planning	SHSP
30							-			
31 32							-			-
33							-			
34							-			
35										
	Planning Sub-Total						\$ 98,000.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			·		=		\$ -	·		
39			•				\$ -			
	Organization Sub-Total						\$ -	·		

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40							\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				-
46 47							ъ Ф				
48							\$ - \$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						_				
		curement / See 2nd tab to determine whether										
50	Training	icct requires EHP Screening Training Contractor for two, one-day training workshops (to address COOP tool use and S-526: Mission Essential Functions Course)	Maintain	SHSP	Yes	Yes	1	22,280.00	Planning - Continuity of Operations	Planning	\$ 22,280.00	
52		Lunch of at training workshops (40 attendees x \$19 GSA Rate)	Maintain	SHSP	Yes	Yes	80	16.00	Planning - Continuity of Operations	Planning	\$ 1,280.00	
53											\$ -	
54											\$ -	
55											\$ -	
56	Tooleday Out Total										\$ -	
	Training Sub-Total										\$ 23,560.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			•			·					\$ -	
61			·			·					\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget To	otal		
					Request		\$ 125,000.00	

Project T

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	COOP Sustainmer	nt	
Funding Source:	SHSP	SHSP Funding Request:	\$125,000
(SHSP, UASI, SHSP/UASI Split)	31131	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This project has over 30 jurisdictions and agencies participating from throughout the State. It has proven to be a statewide resource for creating, sustaining, and maintaining required Continuity of Operations and Continuity of Government (COOP/COG) plans in accordance with DHS/FEMA guidance.

How have you collaborated with other agencies to maximize the resource's capacity?

A statewide steering committee ensures that the project has representation from state, local government, tribes, and the public-sector. This project was recognized in the latest FEMA Continuity Guidance Circular (March 2018) as a best practice (p.34).

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The local/state government investments to date have been in-kind staff hours of the statewide project participants. Several jurisdictions have also provided facilities for meeting space. The project is designed so that participants learn the skill sets to be self-sustaining, albeit at a much reduced level, if grant funding is no longer available.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Project T

Although National Security Presidential Directive (NSPD) 51 directed the DHS to develop and lead continuity activities and make available grants for continuity planning, this initiative has anticipated that someday grant funds may not be available.

Please provide a five year funding summary for your project.

Although at the conclusion of this grant cycle the State of Nevada has successfully completed Continuity of Operations/Continuity of Operations (COOP/COG) training and planning for 35 different State, Local, and Tribal agencies; there are many more agencies within the State.

A reasonable five-year funding plan is:

FFY-19 = \$125,000 (addition of one Northern and one State agency)

FFY-20 = \$225,000 (NGO/Private Sector outreach, with addition of one Northern, and one Southern agency)

FFY-21 = \$75,000 (focus on sustainment training activities and one rural agency)

FFY-22 = \$125,000 (addition of one Southern and one rural agency)

FFY- 23 = \$225,000 (NGO/private sector outreach, with addition of one Northern and one Southern agency)

This pattern can be repeated until all applicable agencies have mature COOP/COG plans.

The pace is set so that this project has a rhythm of "big gains," medium activity, and smaller sustainment years to ensure equitable use of funds and a pattern that does not overextend project staff.

Nevada Homeland Sec	urity Gra	nt Program (I	HSGP) RESUBMISSION	PROJECT ID:	U		
Project Proposal for FF	Y19 HSG	P Funding De	scription	Date Submitted	4/25/19		
1) PROJECT TITLE:	Impler	mentation of Nevad	la's Statewide Resiliency Strategy	,			
2) PROPOSING/LEAD AGENO	CY: State	of Nevada DPS Em	nergency Management				
3) Project Manager Name/Title	: Kelli A	nderson					
Project Manager Contact Inf	fo: Phone:	(775) 687-0300	Email: kanderson@dps.state.nv.	us			
4) Addl Project Manager Name/1	Title: Sonja	Sonja Williams					
Addl Project Manager Contact I	nfo: Phone:	(775) 687-0300	Email: swilliams@dps.state.nv.u	S			
5) Finance/Grant Contact Name/	Title: Justin	Luna					
Finance/Grant Contact Info:	Phone:	(775) 687-0300	7-0300 Email: jluna@dps.state.nv.us				
6) CLASSIFICATION Charles	the primary	intention of the D	conceed Drainet.	•	Choose one:		

CLASSIFICATION - Check the primary intention of the Proposed Project:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

◉

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal of this project is to continue to support the Resilience Commission, Finance Committee, and Homeland Security Commission, DEM supports the Homeland Security Grant Program, commission members with travel, supplies, equipment and overtime to complete the review of the overall programmatic responsibilities. The direct user is NDEM and the beneficiaries of the funds are the Resilience Commission, Finance Committee, Homeland Security Commission, as well as the urban area. The funding supports the process of executive orders, federal statute, federal regulations, and current practices to ensure that strategic focus remains on building and sustaining resilience with the homeland security committees. This program will continue to implement strategic processes to focus on the homeland security. This process will be completed by UASI and State staff by meeting with Local, Tribal, State, Non Profit and Private for Profit stakeholders in our communities. This is comprised of face to face outreach, Emergency Management and Homeland Security resources and awareness level training.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

PLANNIING

HSGP Project Type Supporting Strategic Capacity: State of Nevada DEM [NIMS]

If OTHER, please choose FFY16-18 NCHS Priority: Please select the appropriate FY16-18 NCHS priority aligned with your project

Core Capability aligned with Maintained Project: PLANNING [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Homeland Security Working Group has been funded under NIMS and Planning for the past 5 years, we believe this fits in the overall "planning" core capability. This strategic capacity is to maintain processes within the program management of the resilience commission (RC), finance committee and commission. This investment supports travel for the committee, sponsoring national conference attendance from the UASI and State, training, overtime during peak grant season and software necessary to maintain the process,

Nev	ada Homeland Sec	urity Grant Progra	am (HSGP) RESUBMISSI	ON	PROJECT ID:	U				
Pro	ject Proposal for FF	Y19 HSGP Fundin	g Description		Date Submitted	4/25/19				
PRO	JECT TITLE REFERENCE	: Implementation of	Nevada's Statewide Resiliency St	trategy	/					
10)	PROCUREMENT - Indica	ate the method of pro	curement associated with this	s proj	ect:					
	Request for Proposal	Provide a brief explana	tion on your method of procuremen	t - FIEL	D IS LIMITED TO VISIB	LE TEXT BOX:				
	O Sole Source	processes will be comple	eted internally and if outside procu	remen	t NRS and NAC will I	oe followed				
	Internal									
11)			nd by whom, the Proposed Projec		•	scribe				
	, ,		ished, identifying who (i.e. staff, contracto		•					
E TEXT BOX	The RC project is a continuation of the current project, state grant staff will ensure that this project is carried out. Accomplishments will include travel to commission, finance and any sub committees approved by the commission as will as the RC and UAWG. This program also sponsor representatives to attend the National Homeland Security Conference yearly. This project will be implemented and managed by state staff and DEM and we will continue to work with all committees developed by the Homeland Security Commission.									
FIELD IS LIMITED TO VISIBLE TEXT BOX	which it should embrace e	xisting processes and po	following deliverable:new initiative licies that currently exist in executi course of 2018/2019 through a stra	ve ord	lers, statute, regulation	/ Report ons, and				
12)	section is for you to tell to		e participating agency(s) and juris g the money for your project - If Political Jurisdiction (City, County, State, etc.)	fit's y		icy]				
	12 (a) DEM		State		Anderson	·				
	12 (b)									
	12 (c)									
13)			obligation created by the Project,		·					
TEXT BOX			he funding decreases or is elimina Id scale back slowly and stretch ou							
FIELD IS LIMITED TO VISIBLE TEXT BOX	DEM is requesting addition Management functions.	nal funding through the Le	egislative process this year to assi	st with	the overall Emergen	су				
14)			t's funding percentage makeup of St 15g - PROJECT TOTALS' on Page #3	tatewi	de -vs- UASI is noted b	elow for				
	100% 0%									

Urban Area

(UASI)

Statewide

(SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Implementation of Nevada's Statewide Resiliency Strategy

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	rific. Identify	JASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips)= \$3,900.00, RC Members (5 people x 2 trips)= \$6,500.00 Homeland Security Conferences, UASI Members (4 members x 1 Trip) = \$8,000.00 State Staff (3 members x 1 Trip) = \$6,000.00 -Homeland Security & FEMA meetings Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5,200 Printing, Office Supplies and Updated software for Process = \$4,800.00 Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000		\$ 43,600.00	\$ 43,600.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00 SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] Overtime 2019/2020 process 100 hours x \$60.00 = \$6,000	LV-UASI	State-wide \$ 6,000.00	
	LV-UASI		SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: **Date Submitted** 4/25/19

PROJECT TITLE REFERENCE:

Implementation of Nevada's Statewide Resiliency Strategy

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive Funding and Board Approval	10/01/19	12/31/19	3
3	Receive Funding and Board Approval	10/01/19	09/30/20	12
4	Travel for Committees	01/01/20	03/31/21	18
5	Overtime for Resilience Commission Process	01/01/20	08/31/20	7
6	Attend Conferences	04/01/20	07/31/20	4
7	Maintain and update Resiliency Plan	10/01/19	03/31/20	12
8	Close out	07/01/21	08/31/21	2
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	This project supports all the projects submitted under this grant
size	
t bc	
tex	
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
are limitied to visible text box	Yes, this project supports the Nevada Commission of Homeland Security directly with the program management of the
ţo ſ	committees that make recommendations to the Commission.
pa	
mit	
e lii	
ູດ"	
and	
"b", a	c. Can this project funding request be reduced? Is it scaleable? YES (NO () Explain below.
"a",	Yes, however it will equal scaling back on the travel to the meetings which may affect the overall deliverable.
, sp	

		, , , , , , , , , , , , , , , , , , , ,	PROJECT ID:	U				
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/25/19				
PRO.	JECT TITLE REFERENCE:	Implementation of Nevada's Statewide Resiliency Strategy						
	d. Can this project continue v	vithout funding? YES NO 💿 Explain below.						
t box size		I, and we may be able to continue with the same level of suppose funding was spent, DEM would no longer be able to supposich we have in the past.						
d to visible tex	We would not be able to move to Resiliency Strategy.	forward for the Governor's executive order for the Implementa	ation of Nevada's St	atewide				
nitiec	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.					
Fields "d" and "e" are lin	using older funding, however once funding was spent, DEM would no longer be able to support the committees and sub committees in the manner in which we have in the past. We would not be able to move forward for the Governor's executive order for the Implementation of Nevada's Statewide Resiliency Strategy. P. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below. This project supports the entire State of Nevada with the Homeland Security Commission and monitors the program submission and recommendation process to the SAA.							
18)		e indicate the participation level in completing the 2018 The	<u> </u>					
		articipated in the 2018 Threat and Hazard Identification Ris		,				
10)	ADDITIONAL COMMENTAR	Y - Please indicate any additional project commentary you	u feel may be impoi	tant. Field is				

19) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

This request is to implement the Governor's Executive Order 2018-4 - Implementation of Nevada's Statewide Resiliency Strategy.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					I EIVI DE I AIL	DODGET					
	Agency Name	DEM	Project Manager Name & Contact #	Kelli Anders 775-687-030		Grant Manager Name & Contact #	Sonja Williams 775-687-0300				U
	IJ TITLE:	Implementation of Nevada's Statewide F	Resiliency Strategy								
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1		Overtime for 2019/2020 Process		SHSP	60	100%	100	\$ 6,000.00	Planning - Continuity of Operations	Planning	SHSP
2								\$ -			
3								\$ - \$ -			
	Personnel Sub-Total							\$ 6,000.00			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

L	ine #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
			Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	o. gamzation	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9		Attend UASI meetings (1 person)	Maintain		Planning		2.00	650.00		Planning - Continuity of Operations	Planning	SHSP
10		Attend Finance Committee Meetings (2 people x 3 trips)	Maintain		Planning		3.00	1,300.00		Planning - Continuity of Operations	Planning	SHSP
11		Attend Commission Meetings (2 people x 3 trips)	Maintain		Planning		3.00	1,300.00	3,900.00	Planning - Continuity of Operations	Planning	SHSP
12		Travel for Resilience Commission voting members (5 people x 2 trips)	Maintain		Planning		5.00	1,300.00	6,500.00	Planning - Continuity of Operations	Planning	SHSP
13		Homeland Security Conference (4 UASI members x 1 trip)	Maintain		Planning		4.00	2,000.00	8,000.00	Planning - Continuity of Operations	Planning	SHSP
14		Homeland Security Conference (Stat staff 3 members x 1 trip)	Maintain		Planning		3.00	2,000.00	6,000.00	Planning - Continuity of Operations	Planning	SHSP
15		Resiliency Outreach Meetings (2 people 5 days)	New / Enhance / Past / Competitive		Planning		4.00	1,300.00		Planning - Continuity of Operations	Planning	SHSP
16	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA	NI FACH LINE ITEM AND DELIVE	EDARI EC. NARI	DATIVE WILL BE US	SED TO ENGLIPE ITEMS LISTED I	WILL BE COMPLET	ED IN THE CRAI	34,800.00	MAY NOT BE D	IRCHASED OUTSID	E THE ITEMS

TRAVEL COST INARATIVE REQUIRED FOR EACH LINE THE MADVE-Y-FLEASE EXPLAINE IN DETAIL EACH LINE HEM AND DELIVERABLES. MARKATIVE WILL BE USED TO ENSURE HEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - HEMS MAY NOT BE PURCHASED OUTSIDE HE HEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Printing, Office Supplies and Software Updates	Maintain		1	4,800.00		Planning - Continuity of Operations	Planning	SHSP
28		Working lunches to support open meetings			10.00	400.00	4,000.00			
#REF!										
	Planning Sub-Total						\$ 8,800.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			•				\$ -			
38					-		\$ -			
39			•				\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE (ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY. NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40							\$ -				
41							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		ocurement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Budget Total		
				Request	\$ 49	9,600.00

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and Resilience Commission meetings noted above:

FFY19 Project Name:	Implementation of N	evada's Statewide Resilie	ncy Strategy
Funding Source:	100% SHSP	SHSP Funding Request:	\$49,600
(SHSP, UASI, SHSP/UASI Split)	100 % 31135	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The RC Commission is a multi-regional, multi-discipline coordination group that reviews various programs and collaborates to makes recommendations to DEM and other boards and commissions. The structure is evolving. However, we do not anticipate major changes to the funding needs to support the RC, Finance Committee, and the Nevada Commission on Homeland Security. This funding also sponsors travel and training for programmatic management of Homeland Security Grants.

How have you collaborated with other agencies to maximize the resource's capacity?

Yes, DEM Co-Chairs, the RC Commission with the Urban Area Administrator, along with all of the Commission members.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

DEM provides program and administrative management of all grants that reviewed by the Resilience Commission. DEM is only approx. 8-10% state funded; we have requested additional state resources. However, we have been unsuccessful.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

DEM will continue to request additional State funds to help support the mission. However, the next request to the legislature will not be heard until 2021.

Please provide a five year funding summary for your project.

Year 1

Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips) = \$3,900.00, RC Members (5 people x 2 trips) = \$6,500.00

Homeland Security Conferences, UASI Members (4 members x 1 Trip) = \$8,000.00

State Staff (3 members x 1 Trip) = \$6,000.00 -Homeland Security & FEMA meetings

Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5,200

Printing, Office Supplies and Updated software for Process = \$4,800.00

Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000

Overtime 2020/2021 process 100 hours x \$60.00 = \$6,000

Year 1 = \$49,600

Year 2

Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips) = \$3,900.00, RC Members (5 people x 2 trips) = \$6,500.00

Support of the Homeland Security National Conference = 15,000

Homeland Security Conferences, UASI Members (4 members x 1 Trip) = \$8,000.00

State Staff (3 members x 1 Trip) = \$6,000.00 -Homeland Security & FEMA meetings

Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5,200

Printing, Office Supplies and Updated software for Process = \$4,800.00

Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000

Overtime 2021/2022 process 100 hours x \$60.00 = \$6,000

Year 2 = \$64,600

Year 3

Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips) = \$3,900.00, RC Members (5 people x 2 trips) = \$6,500.00

Homeland Security Conferences, UASI Members (4 members x 1 Trip) = \$8,000.00

State Staff (3 members x 1 Trip) = \$6,000.00 -Homeland Security & FEMA meetings

Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5.200

Printing, Office Supplies and Updated software for Process = \$4,800.00

Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000

Overtime 2022/2023 process 100 hours x \$60.00 = \$6,000

Year 3 = \$49,600

Year 4

May be lowered depending on State fund approval request

Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips)= \$3,900.00, RC Members (5 people x 2 trips)= \$6,500.00

Homeland Security Conferences, UASI Members (4 members x 1 Trip) = \$8,000.00

State Staff (3 members x 1 Trip) = \$6,000.00 -Homeland Security & FEMA meetings

Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5,200

Printing, Office Supplies and Updated software for Process = \$4,800.00

Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000

Overtime 2023/2024 process 100 hours x \$60.00 = \$6,000

Year 4 = \$49,600

Year 5

May be lowered depending on State fund approval request

Attend UASI meeting (1 person x 2 trips) = \$1,300.00, Attend Finance Committee Meetings (2 people x 3 trips) = \$3,900.00, Attend Commission Meetings (2 people x 3 trips) = \$3,900.00, RC Members (5 people x 2 trips) = \$6,500.00

Homeland Security Conferences, UASI Members (4 members x 1 trip) = \$8,000.00

State Staff (3 members x 1 trip) = \$6,000.00 -Homeland Security & FEMA meetings

Resiliency Outreach Meetings 2 people x 5 days across the state of Nevada = \$1300 per person per week = \$5,200

Printing, Office Supplies and Updated software for Process = \$4,800.00

Working Lunch to support open meetings \$400 per meeting x 10 = \$4,000

Overtime 2025/2026 process 100 hours x \$60.00 = \$6,000

Year 5 = \$49,600

N	evada Homeland Security	HSGP) RESUBMISSION	PROJECT ID:	V		
P	roject Proposal for FFY19	HSG	P Funding De	scription	Date Submitted	4/26/19
1)	PROJECT TITLE:					
2)	PROPOSING/LEAD AGENCY:	State	of Nevada DPS DE	М		
3)	Project Manager Name/Title:	Suz C	oyote, State Recov	ery Officer		
	Project Manager Contact Info:	Phone:	(775) 745-6806	Email: scoyote@dps.state.nv.us		
4)	Addl Project Manager Name/Title:	Kelli A	nderson, Programs	Manager, Grants, Recovery and	Mitigation	
	Addl Project Manager Contact Info:	Phone:	(775) 687-0300	Email: kanderson@dps.state.nv.	us	
5)	Finance/Grant Contact Name/Title:					
	Finance/Grant Contact Info:					

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project is to improve the overall resiliency, capability and readiness of the core capability under operational coordination which covers the recovery core capability under the recovery initiative that was funded under FFY 2015 and the project was completed in the calendar year 2017. Washoe County EM took on the statewide initiative in FFY 2015 recovery project and completed the first draft of the Nevada Recovery Framework with stakeholder buy in along with the contract and training to roll out the preliminary damage assessment tool. The FFY 2018 project continued to build on the framework that was established in FFY2015 in alignment with the the DEM resilience strategy to include the following outcomes

Recovery Framework adoption, socialization, training and exercise

Recovery Support Function roll out and training

Preliminary Damage Assessment Tool and Training

Update to the Plan after the Exercise & After Action is complete

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

RECOVERY

HSGP Project Type Supporting Strategic Capacity: Nevada Disaster Recovery Framework [RECOVERY]

If OTHER, please choose FFY16-18 NCHS Priority: Please select the appropriate FY16-18 NCHS priority aligned with your project

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Operational Coordination is to establish and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities. The cross walk capability is to "to provide multi-agency coordination (MAC) for incident management by activating and operating an EOC for a pre-planned or no-notice event. EOC management includes EOC activation, notification, staffing, and deactivation; management, direction, control, and coordination of response and recovery activities; coordination of efforts among neighboring governments at each level and among local, regional, State, and Federal EOCs; coordination public information and warning; and maintenance of the information and communication necessary for coordinating response and recovery activities." The development and maintenance of a statewide PDA tool increases capacity of local governments to provide real-time situational awareness to the state EOC for inclusion in a potential emergency or disaster declaration. Additionally it provides the state with a tool for compiling the data required to support a request for a major disaster declaration.

Nev	ada Homeland Sec	ON	PROJECT ID:	V		
Pro	ject Proposal for FF	Y19 HSGP Fundin	ng Description		Date Submitted	4/26/19
PRO	JECT TITLE REFERENCE	: Statewide Recove	ery Plan Implementation Phase 3			
10)	PROCUREMENT - Indica	ate the method of pro	curement associated with this	proj	ect:	
	Request for Proposal	Provide a brief explana	ntion on your method of procurement	t - FIEL	D IS LIMITED TO VISIB	LE TEXT BOX:
	Sole Source	State of Nevada Purcha	sing has an existing contract with a	provi	ider of the ESRI/ArcG	GIS online tool.
	Internal					
11)		· ·	nd by whom, the Proposed Projec		•	scribe
			ished, identifying who (i.e. staff, contractor	r, or ?)	will perform what work	
ВОХ	and 20 licenses for use by	d-based, Geographic Info counties and tribal entition	g ormation System (GIS)-enabled too es statewide. The FEMA PDA over s in alignment with FEMA guideline	lay wi	GIS online with Surve II be used with the Su	y 123 app, ırvey 123 app
ВЬЕ ТЕХТ	A DEM partner, ,NDOT GI of the tool and licenses wil		itial set up of the tool and support a taff.	is nee	ded during an event.	Maintenance
FIELD IS LIMITED TO VISIBLE TEXT BOX	Statewide roll-out will inclu Recovery Guide. State will	ude full day training and e I leverage funding from F	exercise with the tool and update to Y18 grant for contractor to develop	the Pothe to	DA tool guidance in training and exercise.	he State
TELD !						
•						
12)	section is for you to tell to	us WHO will be receivin	e participating agency(s) and jurising the money for your project - If	it's y	ou, put in your ager	icy]
		y (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)		Project Representative (i	ndividual)
	12(a) DEM		State	Suz (Coyote	
	12 (b)					
	12 (c)					
13)			obligation created by the Project, a	-	·	
T BOX	The cost of the licenses ne forward.	eded to use the PDA too	ol and annual statewide training are	need	led to sustain this cap	pability going
FIELD IS LIMITED TO VISIBLE TEXT BOX			sustain the recovery program and or another year, if we are successfu			
14)			t's funding percentage makeup of St 15g - PROJECT TOTALS' on Page #3	atewi	de -vs- UASI is noted b	elow for
		_	13y - PROJECT TOTALS ON Page #3			
	100% 0%					

Urban Area

(UASI)

Statewide

(SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: V
Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Statewide Recovery Plan Implementation Phase 3

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
Hire a contractor to work with DEM to develop a conference, training and exercise for the PDA tool and update the State Recovery Guide. This contractor will be leveraged from FY18 Recovery Initiative funding. (\$0)			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses for use by counties and tribal entities.			
		\$ 11,250.00	\$ 11,250.
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.		\$ 16,000.00	\$ 16,000.
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	CulaTat
			SubTot
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	
	LV-UASI	State-wide	\$ 0.00
	LV-UASI	State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: V
Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Statewide Recovery Plan Implementation Phase 3

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive grant funding and process the grant to receive authority to spend funds	04/01/20	06/01/20	2
3	Review ArcGIS licenses	06/01/20	01/01/22	18
4	Draft and finalize training and exercise for regional conferences, training and exercising	06/01/20	09/01/20	3
5	Update Recovery Guide	10/01/20	04/01/21	6
6	Deliver Final plans to stakeholders	04/01/21	05/01/21	1
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

а	Does this project have a nexus to terrorism?	VEC () NO	Evalain bolow
а.	Dues this project have a nexus to terrorism:	I EO 🜘) NO C	explain below.

The recovery project/program has a nexus to terrorism. All types of emergencies must have the ability to recover regardless of the type of disaster. The tools must be in place to work towards recovery. If you review the core capability cross walk you will see a common theme throughout the crosswalk "recovery" is listed in almost every one of the core capabilities

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, recovery falls under Operation Coordination, however recovery is also a part of the communication, public warning and Information and intelligence.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The project is scalable depending on the deliverables. We are requesting 18 months of the PDA tool, 2 conferences to socialize and train on the PDA tool. A data collection person to roll out tools to all jurisdictions to assist with recovery (leveraged from FY18 grant).

Neva	ada Homeland Securi	ty Grant Program (HSGP) RESUBMISSION	PROJECT ID:	V
	•	9 HSGP Funding Description	Date Submitted	4/26/19
PROJ	ECT TITLE REFERENCE:	Statewide Recovery Plan Implementation Phase 3		
		without funding? YES NO Explain below.		
Fields "d" and "e" are limitied to visible text box size	At this time we do not have the	e funding necessary to complete this project.		
imiti		a MEASUREABLE statewide benefit? YES NO E		
Fields "d" and "e" are	Yes this is a statewide project disciplines will be included in t	meaning the end user is the local jurisdictions as well as the his process.	tribes and the State o	of Nevada. All
18)	THIRA COMPLETION - Plea	se indicate the participation level in completing the 2018 1	THIRA Survey. CHOO	SE ONE:
	YES - Agency HAS part	ticipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) S	urvey
	NO - Agency has NOT	participated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTA limited to the visible text box	RY - Please indicate any additional project commentary yo c	ou feel may be impoi	tant. Field is
	one significant State disaster. lessons learned to ensure we Thorough Preliminary Damag- statewide effort to support the financial support of Nevada's	mergency Management experienced several Federally Declar It is critical to ensure that we use all the tools afforded to use are better able to recover from disasters. e Assessment is key to the success of a request for federal file development of ,and participation in, a federal disaster declar recovery efforts.	e and look at all gaps nancial support. A co tration is the key to fu	with the pordinated ture federal

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	ENGLISHED DETAIL DODGET												
			Suz Coyote, State Project Manager Recovery Officer 775-745 Grant Manager										
	Agency Name	NV DEM	Name & Contact #	ct # 6806 Name & Contact #			Kelli Anderson, Prog	rams Mgr, Grants,	Recovery & Mitigati	on 775-220-1618		V	
	IJ TITLE:	Statewide Recovery Implementation Ph	ase 3										
		One Budget Per Funding Stream											
		SHSP										1	
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -					
2								\$ -					
	Personnel Sub-Total							\$ -	ODANIT OVOLE		DE BURGUAGES OF		

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9		State, local, trible partners travel to roll out, implementation, socialization of PDA tool	Maintain	SHSP	Planning		8.00	800.00		Nevada Disaster Recovery Framework - State Implementation	Operational Coordination	SHSP
10		PDA Tool Training Travel for local, tribal, state partners	Maintain	SHSP	Training		8.00	800.00	6,400.00	Nevada Disaster Recovery Framework - State Implementation	Operational Coordination	SHSP
11		State Training to stay up to date while rolling out the tool out to partners	Maintain	SHSP	Training		4.00	800.00	3,200.00	Nevada Disaster Recovery Framework - State Implementation	Operational Coordination	SHSP
12									-			
13	Travel Sub-Total								16,000.00			
TRAVEL (R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	All EACH LINE ITEM AND DELIV	FRARIES NAR	RATIVE WILL BE I	ISED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITE	MS MAY NOT BE	PURCHASED OUTS	DE THE ITEMS

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Contractor to develop the training & exercise of the PDA tool. This contractor will also assist with the update to the PDA tool guidance in the Response & Recovery Guide. Leveraging funds FY 2018 Recovery Grant- no funds requested.		SHSP		-			Operational Coordination	
28						-	-			
29							-			
30	Blancia a Oct. Tatal						-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40		Preliminary Damage Assessment Tool for 18 months. State leveraging the tool developed for FEMA damage assessment using ArcGIS Online Survey 123 app. State to purchase licence and users for 17 local jurisdictions with 3 additional for tribal partners.	Maintain	SHSP	18.00	625.00			Operational	04AP-03-GISS System, Geospatial Information (GIS)	SHSP
41							\$ -				
42							\$ -				
	EQUIPMENT Sub-Total						\$ 11,250.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total			
					Request	\$ 27	7,250.00	

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Statewide Recovery F	Plan Implementation Phas	se <u>3</u>
Funding Source:	CHCD	SHSP Funding Request:	<u>27,250.00</u>
(SHSP, UASI, SHSP/UASI Split)	<u>SHSP</u>	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

Yes this is a statewide project meaning the end user is the local jurisdictions as well as the tribes and the State of Nevada. All disciplines will be included in this process.

How have you collaborated with other agencies to maximize the resource's capacity?

Stakeholders throughout the state have requested this tool to train and prepare for recovery from disaster which is key to community resilience. A DEM partner, NDOT GIS staff will provide the initial set up of the tool and support as needed during an event. Maintenance of the tool and licenses will be managed by DEM staff.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

State of Nevada is requested additional funding to sustain the recovery program and other projects through the legislature, however we were not successful this session.

Staff time for planning, training, coordination and maintenance of this resource across the state is the primary investment provided by DEM.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

State of Nevada may request additional funding to sustain the recovery program and other projects through the legislature, next session, however we do not know if we will be successful. If we are successful we will not request additional funding.

Please provide a five year funding summary for your project.

FY 19

Equipment- PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses for use by counties and tribal entities. = \$11,250.00*

<u>Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.</u>

Total= \$27,250.00

FY 20

Equipment- PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses for use by counties and tribal entities. = \$11,250.00*

<u>Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.</u>

Total= \$27,250.00

FY 21

<u>Equipment- PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses</u> for use by counties and tribal entities. = \$11,250.00*

Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.

Total= \$27,250.00

FY 22

Equipment- PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses for use by counties and tribal entities. = \$11,250.00*

<u>Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.</u>

Total= \$27,250.00

FY 23

Equipment- PDA tool, ArcGIS online Creator license for state management of tool, 20 Field Worker licenses for use by counties and tribal entities. = \$11,250.00*

<u>Travel for the training and exercise for local jurisdictions, tribal nations and state agencies. (10 people to travel to each conference/training \$800 x 10 people x 2 trips = \$16,000.</u>

Total= \$27,250.00

*The State anticipates that 20 licenses will be sufficient to equip the counties and tribes. This number may increase depending on the capacity of the field worker licenses.

Nevada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	W					
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19					
1) PROJECT TITLE:	Mass Fatality Preparedness and Revise Mass Fatality Management Plan								
2) PROPOSING/LEAD AGENCY:	Clark County Office of the	e Coroner/Medical Examiner							
3) Project Manager Name/Title:	John Fudenberg, Corone	r							
Project Manager Contact Info:	Phone: (702) 455-3385	Email: FUD@clarkcountynv.gov							
4) Addl Project Manager Name/Title:	David Mills, Coroner Inve	stigative Forensic Supervisor							
Addl Project Manager Contact Info:	Phone: (702) 455-0852	Email: DMS@clarkcountynv.gov							
5) Finance/Grant Contact Name/Title:	Elizabeth Vorce								
Finance/Grant Contact Info:	Phone: (702) 455-1784	Email: C1210EJV@clarkcountyn	iv.gov						

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To review, revise, and update the Clark County Office of the Coroner/Medical Examiner (CCOCME) Mass Fatality (MF) response plan developed under previous HSGP funding in order to maintain a unified operation appropriately integrating stakeholders and supporting the integration of core capabilities: To update the list of pre-positioned MF response equipment and make available to statewide responder agencies; To provide refresher training to statewide responders and NGO collaborators on MF response; To conduct local and regional table top MF exercises to evaluate plan revisions and associated after-action training. To conduct a full-scale MF disaster portable morgue unit (DPMU) and disaster victim identification (DV) exercises. Revisions will further outline the operational response and handling of complex incidents; coordination of mutual aid; roles and responsibilities of the staff and agency core capabilities. Revisions will be adaptable to the Clark County Mass Casualty Incident Plan and as a resource to the rural areas within the State of Nevada. The revised plan would be exercised locally and/or during regional events to further train and improve our ability to effectively plan, organize, equip and to exercise the preparedness of our organization and community stakeholders. If granted the required funding, it will help develop new organizational capabilities, or significantly enhance existing capabilities through exercise and will directly expand the organization's ability to deliver core emergency management and disaster preparedness services and support to community.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

RECOVERY

HSGP Project Type Supporting Strategic Capacity: Mass Fatality [PLANNING]

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: FATALITY MANAGEMENT SERVICES [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request will align with Clark County's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan. It will allow the Urban Area to be better trained and prepared in responding to physical threats to local Southern Nevada organizations, which allows for increased ability to coordinate operational responses. After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. CCOCME will participate and assist with the coordinated efforts to train and exercise with the respective state and local entities during an annual or bi-annual county and/or statewide exercise in order to maintain statewide response proficiency.

11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

Clark County Office of the Coroner/Medical Examiner (CCOCME) will obtain quotes from vendors to provide the required services to revise the CCOCME Mass Fatality Management Plan. The revisions will be adaptable to the Clark County Mass Casualty Incident Plan; serve as a resource to the rural areas of Clark County and within the State of Nevada. The revised plan would be exercised locally and/or during regional events to further train and improve our ability to effectively plan, organize, equip and to exercise the preparedness of our organization and community stakeholders. If granted the required funding, it will help develop new organizational capabilities, or significantly enhance existing capabilities through exercise and will directly expand the organization's ability to deliver core emergency management and disaster preparedness services and support to community.

In order to affect the achievement of all goals we propose to hire an project manager/plans writer; The project manager reviews, revises, and updates existing CCOCME MF plans statewide; Project manager plans, coordinates, facilitates refresher training on plan and revisions; The Program manager will update and revise a comprehensive list of all pre-positioned MF equipment accessible to responders; Years 1-2, CCOCME will conduct semi-annual project meetings with the project manager/plans writer to coordinate and facilitate 3 regional MF table top exercises to evaluate plan revisions. The project manager will conduct additional training as needed per After Action Report (AAR) from table tops to address deficiencies; Conduct a comprehensive full-scale exercise to test portable morgue unit deployment and victim identification process, with AAR and further training recommendations to be sustained by respective agencies.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12 (a)	Clark County Office of the Coroner/Medical Examiner (CCOCME)	Clark County	John Fudenberg
12(b)			
12(c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. The state and local entities will coordinate a bi-annual statewide exercise in order to maintain statewide response CCOCME will require additional funding to conduct annual tabletop and/or field exercises to exercise the updated plan and to sustain a measurable level of preparedness with CCCOCME staff and Clark County/State stakeholders.

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

0%	100%
Statewide	Urban Area
(SHSP)	(IJASI)

FIELD IS LIMITED TO VISIBLE TEXT BOX

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description PROJECT TITLE REFERENCE: 15)

PROJECT ID: W **Date Submitted** 4/25/19

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost. LV-UASI State-wide SubTotal **15a) Planning** [Development of policies, plans, procedures, mutual aid agreements, strategies] Planning will include hiring a contract project manager functioning also as a plans writer to facilitate the review, revision, and updating of existing CCOCME mass fatality (MF) response plan and development of a county/statewide prepositioned mass fatality equipment tracking list. They will be required to plan, organize, and \$ 12,000.00 facilitate a county wide MF table top exercise and would be required to plan, \$12,000.00 organize, and facilitate a final HSEEP compliant disaster portable morgue unit (DPMU) and disaster victim identification (DVI) exercise in the final year of the grant, including after action reports with recommended training on reported deficiencies. Exercise would include executable goals to meet defined objectives. LV-UASI State-wide SubTotal **15b) Organization** [Establishment of organization, structure, leadership, and operation] Organization will consist of hiring a contract project manager functioning also as a plans writer to facilitate the review, revision, and updating of existing statewide MF response plans and development of the statewide prepositioned mass fatality equipment tracking list. The remainder of their duties fall under the Planning aspect \$ 15,000.00 \$ 15,000.00 of this grant proposal, where they will be required to plan, organize, and facilitate 2-3 MF table top exercises. They will also be required to plan, organize, and facilitate a final HSEEP compliant DPMU and DVI exercise in the final year of the grant, including after action reports with recommended training on reported deficiencies. LV-UASI **15c)** Equipment [Procurement and installation of equipment, systems, facilities] State-wide SubTotal Not expected to use funding for any organization. \$ 0.00 LV-UASI State-wide SubTotal **15d) Training** [Development and delivery of training to perform assigned missions and tasks] The project manager/plans writer will plan, coordinate, and facilitate training sessions for Clark County, State and local support agencies, and collaborative NGO agencies once the CCOCME MF plan revisions and equipment lists are in place. Future statewide training TBD from SHSP funding to be allocated for training sessions conducted outside Clark County. Additional training sessions will be \$12,000.00 \$12,000.00 scheduled after the conclusion of the planned MF incident table top exercise in Clark County is conducted. Due to the collaborative nature of the Nevada statewide MF response to incidents it is expected that training participants will require travel funds to attend various sessions. LV-UASI State-wide SubTotal **15e) Exercise** [Development and execution of exercises to evaluate and improve capabilities] MF table top exercises scheduled in various geographic areas of Clark County, which will be planned, coordinated, and facilitated by the program manager/plans writer. The table top exercises will be developed to test the revisions and updates to the MF response plans. The grant program manager will plan, coordinate, and facilitate an HSEEP compliant full scale MF DPMU and DVI exercise under approval of the DEM \$ 15,000.00 \$ 15,000.00 Exercise Management Officer. The primary location would be in Clark County. The purposes would be to exercise the full deployment and to evaluate CCOCME, state and local support capabilities to execute one or more portions of the MF response LV-UASI State-wide SubTotal **15f) Personnel** [Staff (not contractors) directly implementing project and programmatic capability] Not expected to use funding. Expand capabilities in MF management in conducting victim identification and management of ante-mortem data collection for the deceased and their families throughout the State of Nevada. Exercise coordinated \$ 0.00 training for local and statewide users; conduct needs assessment and plans writing to update MF plans, coordinate, facilitate, evaluate, and document postmortem and dental identification exercises in the UVIS/CME Case Management software. LV-UASI TOTAL State-wide 15g) PROJECT TOTALS

\$ 54,000.00

\$ 54,000.00

\$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: W

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funding approval	08/01/19	10/31/29	2
3	Hire Project Manager/Plans Writer	09/01/19	10/01/19	2
4	Provide updates for quarterly grant reports	12/01/19	04/01/20	4
5	Review, Revise, Update statewide Mass Fatality Response plans	10/01/19	10/01/20	12
6	Review, Revise, and Distribute MF equipment list statewide	10/01/19	04/01/19	6
7	Plan, Coordinate, Facilitate semi-annual meetings	10/01/19	10/01/20	12
8	Prepare and Conduct training on revised plans	12/01/19	03/31/20	4
9	Prepare and Conduct table top exercises	01/01/20	03/01/20	2
10	Review AAR and conduct additional training	06/01/20	06/01/22	24
11	Plan, Coordinate, Facilitate DPMU/DVI exercise	09/01/19	09/01/20	12
12	Complete the final grant report	08/01/20	11/30/20	3

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

During a terrorist or other mass causality/fatality incident, the revised CCOCME Mass Fatality Management Plan, with emphasis to planned exercises, will increase the effectiveness and preparedness of CCOCME and Clark County stakeholders. Exercising of the plan will increase the CCOCME core capability to respond to mass fatality incidents ranging from natural to man made disasters, which will provide sustainable services during a prolonged and complex recovery period. LV Strip had highest NYE terror threat level ("Sear 1") in nation after 1 Oct. Project would increase community preparedness to ensure increased capability to communicate, collaborate, and exchange information with the State, Local and Federal partners is crucial component of managing the event in an effort to deter, detect, protect citizens and visitors to Clark County.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with the State Resilience Commission identified "Recovery" as a Strategic Capacity, under which the Core Capability of Fatality Management specifically falls. The CCOCME Mass Fatality Management Plan plan update will also align with the county's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

These costs are limited to the essential aspects to adequately review, revise and update the CCOCME Mass Fatality Management response plan, with emphasis to panning and exercising the completed plan. Any reductions in funding would impact our ability to exercise the plan effectively with regard to deploying a full scale disaster portable morgue unit (DPMU).

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: **Project Proposal for FFY19 HSGP Funding Description**

Date Submitted

W 4/25/19

PROJECT TITLE REFERENCE:

and "e" are limitied to visible text box

<u>"</u>0"

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

d. Can this project continue without funding? YES NO NO Explain below.

After the reviews, revisions, trainings, and updates are made to the CCOCME MFMP, CCOCME and each local and/or state agency will self-sustain training and plans after the life of this grant. There was no corresponding budget for semi-annual status meetings for planned training with state oversight and the major community stakeholders and local multi-jurisdictional participants. Costs associated with such meetings, most likely at a government building or office environment, shows that no real costs with exception to travel for the participants is realistically expected. Most if not all materials can be delivered electronically, so the budget will be based on further planned exercises to be determined after completion of CCOCME MF revisions, tabletop exercise/full scale exercise and associated training costs: however, we anticipate a future funding stream will be acquired from SHSP or combined funding from UASI and SHSP grants.

Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below.

Mass fatality incidents of a large size almost always require a federal response, to include federal DMORT response in coordination with state mass fatality and NGO (Red Cross, private mortuaries, etc.) responders. The CCOCME MF plan is a statewide function, beyond a local government plan. It is designed to benefit the State of Nevada and enable an effective response, statewide, in times of crisis, and requires just as much operational coordination under an EOC, if not more, than other agencies that unquestionably fall under this and other priorities. We contend it would be detrimental to the state not to maintain the alliance, coordination, and effectiveness of these mass fatality response agencies to allow another cycle to pass without testing the Mass Fatality Preparedness response on a state wide level.

- THIRA COMPLETION Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:
 - YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
 - NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

CCOCME provides fatality management services, including decedent remains recovery and victim identification, working with local, state, tribal, territorial, insular area, and federal authorities to provide mortuary processes, temporary storage or permanent internment solutions, sharing information with mass care services for the purpose of reunifying family members and caregivers with missing persons/remains. A revised CCOCME Mass Fatality Management Plan (MFMP) will ensure that CCOCME can effectively respond and provide services during a mass fatality incident (MFI). A MFI occurs when the number and/or condition of human remains that must be managed during a response to an incident challenges local fatality management capabilities to the point that additional assistance is required to perform remains recovery, morgue services, and disposition of victims. Such high-consequence incidents are likely to occur with little or no warning and will require utilization of resources and procedures that go beyond those employed in day-to-day response.

Revising and exercising the CCOCME MFMP would provide clearer, practical guidance for responding to such incidents and to improve the sustainability of a prolonged recovery. The plan will be a step-by-step guide to the actions that need to be taken to respond to a MFI to reduce vulnerability to Clark County and the State of Nevada from increased preparedness. This guide can be used as a checklist to lead officials through the process from the time of initial notification to the return to normal operations. References within the CCOCME MFMP will provide additional information that clarifies and expands upon the required actions and resources required. Mass Fatality Preparedness is the Core Capability for CCOCME and the State Resilience Commission identified "Recovery" as a Strategic Capacity, under which the Core Capability of Fatality Management specifically falls. Fatality Management is also listed under the Strategic Capacity of Planning. The plan update will align with the Clark County's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan.

After the reviews, revisions, trainings, and updates are made to the CCOCME MFMP, CCOCME and each local and/or state agency will self-sustain training and plans after the life of this grant. The CCOCME MF response plan will be maintained by this agency after the life of this grant. The expectation is that CCOCME will conduct internal training and exercises in order to maintain proficiency. The CCOCME, along with state and local entities will coordinate an annual and/or bi-annual statewide exercise in order to maintain statewide response proficiency. We anticipate that the allocation of future funding will be acquired from SHSP or combined funding from UASI and SHSP grants.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	EM DETAIL E	BUDGET						
	Agency Name	Clark County Coroner/Medical Examine	37 00 1 1 11			Grant Manager Name & Contact #	David Mills, 702-455-085		estigative Fo	orensic Super	visor	W
	IJ TITLE:	Mass Fatality Preparedness										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Postitions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		A Project Manager/Plans Writer will be contracted under Organization. It is not anticipated that any staff will be hired under Personnel for this project.						\$ -				
2								\$ -				
3								\$ -				
4								\$ -				
	Personnel Sub-Total							\$ -				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		None.						\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-					
		Not expected to use funding for any organization.										
												
1									_			+
2									-			
3						İ			-			1
4									-			
5									-			
6									-			
7									-			
8												
10												+
11									-			
12						İ			-			1
13									-			
14									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY		7						
27		Mass Fatality Plan Review - Clark County	Maintain	UASI	1	2,000.00	2,000.00	Planning - Mass Fatality	Services	UASI
28		Semi-Annual Table Top Exercise planning - Clark County	Maintain	UASI	1.00	5,000.00	5,000.00	Planning - Mass Fatality	Services	UASI
29		Mass Fatality Pre-positioned Equipment List consolidation	Maintain	UASI	1	2,000.00	2,000.00	Planning - Mass Fatality	Services	UASI
30		Semi-Annual Coordination Meetings Facilitation in Clark County	Maintain	UASI	1	3,000.00	3,000.00	Planning - Mass Fatality	Fatality Management Services	UASI
31 32							-			
33							-			
34							-			
35	Planning Sub-Total						\$ 12,000.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36		Project Manager/Plans Writer: to facilitate the review, revision, and updating of existing CCOCME MF response plans and development of the state prepositioned mass fatality equipment tracking list.	Maintain	UASI	1.00	1.00		Planning - Mass	Fatality Management Services	
37							\$ -			
38			·		-		\$ -			
39			·		_		\$ -			
	Organization Sub-Total					·	\$ 15,000.00			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		None.					\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether ject requires EHP Screening									s -	
51	,	MF Training on Plan Revisions and NTE Courses AWR-232 and MGT-341 - Clark County			Yes		1	2,000.00	Planning - Mass Fatality	Fatality Management Services	\$ 2,000.00	
52		Semi-annual project meetings with the project manager/plans writer to coordinate and facilitate regional MF table top exercises to evaluate plan revisions			Yes		1	6,000.00	Planning - Mass	Fatality Management Services	\$ 6,000.00	
53		Follow Up MF Training on Table Top AAR and NTE Course MGT-901-Clark County			Yes		1	2,000.00	Planning - Mass Fatality	Fatality Management Services	\$ 2,000.00	
54		Training on designation/deployment of mass fatality equipment and the utilization of the CCOCME mass fatality equipment tracking list(s).			Yes		1	2,000.00	Planning - Mass Fatality	Fatality Management Services	\$ 2,000.00	
55 56				-							\$ - \$ -	
- 50	Training Sub-Total										\$ 12,000.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	County wide MF Table Top Exercise - Clark County	Maintain	UASI	Yes		1			Fatality Management Services	\$ 3,000.00	UASI
	2-Day Full Scale MF DPMU/DVI Exercise	Maintain	UASI	Yes		1				\$ 12,000.00	UASI
Exercise Sub- Total										\$ - \$ 15,000,00	
	Exercise EHP Required prior to proyour proj	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County 2-Day Full Scale MF DPMU/DVI Exercise	Exercise All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain 2-Day Full Scale MF DPMU/DVI Exercise	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI 2-Day Full Scale MF DPMU/DVI Exercise UASI	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI Yes	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI Yes Large With the State Frequired to be on the TEPW This request is required to be on the TEPW With the State Exercise Officer? With the State Exercise Produced to be on the TEPW TEPW With the State Exercise Produced to be on the TEPW With the State Exercise Produced to be on	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI Yes 1 UASI Yes 1	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI Yes This request is required to be on the Tequired Teq	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain UASI Yes This request is required to be on the COUNTY COST Approved Strategic Capacity Hamilton VIIII COST Approved Strategic Capacity VIIII COST Approved Strategic Capacity Flanning - Mass Fatality Planning - Mass Fatality Planning - Mass Fatality	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening County wide MF Table Top Exercise - Clark County Maintain Maintain Maintain Maintain With the State Exercise Previous Funding Purchase Type With the State Exercise officer, Must Support to be on the TEPW Core Capability Core Capability Planning - Mass Fatality Management See 2nd tab to determine whether Support Planning - Mass Plann	CATEGORY EXERCISE DETAIL DESCRIPTION Purchase Type Previous Funding Type All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Exercise County wide MF Table Top Exercise - Clark County Maintain UASI Yes This request is required to be on the Exercise Officer, and the Exercise Officer, and the Exercise Capability TOTAL Approved Strategic Capacity Core Capability TOTAL Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity TOTAL Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Strategic Capacity Finding Approved Capacity Finding Approved Capacity Finding Approved Capacity Finding Approved Capacity Finding Approved Capacity Finding Approved Capacity Finding Capacity Finding Approved Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Finding Capacity Find

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					E	Budget Total		
,					l li	Request	\$ 54.000.00	4

Project W

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name: Mass Fatality Preparedness and Revise Mass Fatality Management Plan										
Funding Source:	UASI	SHSP Funding Request:								
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	UASI 100%							

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This request will align with Clark County's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan. It will allow the Urban Area to be better trained and prepared in responding to physical threats to local Southern Nevada organizations, which allows for increased ability to coordinate operational responses. After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. CCOCME will participate and assist with the coordinated efforts to train and exercise with the respective state and local entities during an annual or bi-annual county and/or statewide exercise in order to maintain statewide response proficiency.

How have you collaborated with other agencies to maximize the resource's capacity?

To conduct local and regional table top MF exercises to evaluate plan revisions and associated after-action training; conduct a full-scale MF disaster portable morgue unit (DPMU) and disaster victim identification (DV) exercises. Revisions will further outline the operational response and handling of complex incidents; coordination of mutual aid; roles and responsibilities of the staff and agency core capabilities. Revisions will be adaptable to the Clark County Mass Casualty Incident Plan and as a resource to the rural areas within the State of Nevada. The revised plan would be exercised locally and/or during regional events to further train and improve our ability to effectively plan, organize, equip and to exercise the preparedness of our organization and community stakeholders. CCOCME will help develop new organizational capabilities, or significantly enhance existing capabilities through exercise and will directly expand the organization's ability to deliver core emergency management and disaster preparedness services and support to community. With respect to the Target Capabilities of CCOCME Mass Fatality preparedness and the absence of any for Fatality Management Service, we contend that participating and providing multi-agency training/coordination is essential to maximize resource capabilities to Clark County and State Mass Fatality Preparedness; with emphasis to a combination of various county agencies and NGO's working together as a pseudo state response force.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

Project W

CCOCME is a training and response entity that coordinates with numerous outside agencies and a variety of subject matter experts to ensure that Clark County and the State of Nevada has a rapidly deployable medicolegal response support capability that can provide assistance to local jurisdictions following mass fatality incidents that overwhelm local capabilities. The revisions, development and maintenance of the CCOCME Mass Fatality response plan requires a dedicated staff of personnel with specific roles related to management, training, logistics, and scientific research to ensure that the plan is exercised and updated periodically. The revised/completed plan will connect to the Clark County Mass Causality Incident plan and will support future mass fatality preparedness initiatives while being able to provide deployable resources and support services, and will be robust enough to remain valuable during and between multi-jurisdictional deployments. The ongoing maintenance and development of the plan and the resources required to deploy will be partially funded from Clark County general fund and from further grant opportunities when available. The continued funding to develop and support the response capabilities of CCOCME is essential with ensuring an increased readiness by exercising the plan, providing training and operational medicolegal support to local jurisdictions, particularly those that do not have a coroner/medical examiner's office.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. The state and local entities will coordinate an annual or bi-annual statewide exercise in order to maintain statewide response capabilities. CCOCME will require additional funding to conduct annual tabletop and/or field exercises to exercise the updated plan and to sustain a measurable level of preparedness with CCCOCME staff and Clark County/State stakeholders.

Please provide a five year funding summary for your project.

In order to affect the achievement of all goals we will require the following funding for the various phases: (1) Year 1 -Hire an project manager/plans writer; (2) Year 1 -Project manager reviews, revises, and updates existing MF plans statewide; (3) Year 1 – Project manager plans, coordinates, facilitates refresher training on plan and revisions; (4) Year 1 – 2 Program manager updates and revises a comprehensive list of all prepositioned MF equipment accessible to responders; (5) Year 2 - Project manager plans, coordinates, facilitates 3 regional MF table top exercises to evaluate plan revisions; (6) Year 2-3 Project manager conducts additional training as needed per AAR from table tops to address deficiencies; (7) Year 1-3 Conduct semi-annual project meetings with the project manager/plans writer, CCOCME, and Washoe County OME staff; (8) Year 3 - Conduct a comprehensive full-scale exercise to test portable morgue unit deployment and victim identification process. Year 4-5 to identify and apply for additional grant opportunities to augment HSGP FFY2019 UASI grant to replace and obtain equipment required to train and exercise during an event and/or response during a mass fatality incident.

Five year funding summary for the following services:

- # Task Description From To Duration
 1 Receive Funding \$64,000
- 2 Hire Project Manager/Plans Writer
- 3 Provide updates for quarterly grant reports
- 4 Review, Revise, Update Mass Fatality Response plans
- 5 Review, Revise, and Distribute equipment list
- 6 Plan, Coordinate, Facilitate semi-annual meetings
- 7 Prepare and Conduct training on revised plans
- 8 Prepare and Conduct table top exercises
- 9 Review AAR and conduct additional training
- 10 Plan, Coordinate, Facilitate statewide DPMU exercise
- 11 Review AAR and provide recommended training
- 12 Complete the final grant report

Nevada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	X								
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/24/19								
1) PROJECT TITLE:	Metropolitan Medical Res	sponse System (MMRS) - MAINT	AIN									
2) PROPOSING/LEAD AGENCY:	City of Las Vegas - Depa	rtment of Fire & Rescue										
3) Project Manager Name/Title:	Chris Sproule, Chief MMF	Chris Sproule, Chief MMRS Coordinator										
Project Manager Contact Info:	Manager Contact Info: Phone: (702) 303-0968 Email: csproule@lasvegasnevada.gov											
4) Addl Project Manager Name/Title:	Craig Cooper, Battalion C	Chief; Karl Rosette, Fire Training (Officer (702) 383-288	38								
Addl Project Manager Contact Info:	Phone: (702) 236-9597	Email: ccooper@lasvegasnevada	a.gov; krosette@las	vegasnevada∎								
5) Finance/Grant Contact Name/Title:	Priscilla Wdowiak	Priscilla Wdowiak										
Finance/Grant Contact Info: Phone: (702) 229-6045 Email: pwdowiak@lasvegasnevada.gov												

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal of this project is to maintain the Metropolitan Medical Response System (MMRS) and support the 2019 Strategic Capacity of CBRNE and the 2018 Nevada Commission on Homeland Security Approved Priorities of Operational Coordination and Intelligence and Information Sharing, MMRS also supports Mass Care Services.

MMRS supports the integration of law enforcement, fire, emergency management, health, and medical systems into a coordinated response to a mass casualty incident caused by a WMD, an incident involving hazardous materials, an epidemic disease outbreak, or natural disaster. The focus of the program is to decrease morbidity and mortality, and to increase survivability, during those first critical hours following a disaster. MMRS enhances the response and management capabilities, and improves the existing local operational systems of a community before an incident occurs.

MMRS achieves this mission by creating an operational system at the local level intended to respond to and manage the first 24-96 hours of any event that creates mass casualties, or casualties requiring unique care capabilities, until State or Federal response resources become available. MMRS creates this operational system by developing plans, conducting training and exercises, and acquiring pharmaceuticals, personal protective equipment, and other specialized response equipment.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: MASS CARE SERVICES [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

MMRS is an existing program that is in alignment with the 2019 Strategic Capacity of CBRNE and supports the response and management of an MCI caused by a CBRNE incident. MMRS also supports the following: Operational Coordination and serves to establish and maintain a unified and coordinated operational structure and process that integrates critical stakeholders. Intelligence and Information Sharing through the FirstWatch Syndromic Surveillance and Early Warning System. Operational Communications through continued use of the HAvBED System and All-Hospital Radio Channel.

ev	ada I	Homela	and S	ecurit	ty Grant	Progr	am (HSG	P) RESUBI	MISSION	PROJECT ID:	X
roj	ect P	roposa	al for	FFY19	HSGP F	undir	ng Descrip	Date Submitted	4/24/19		
SO)	IECT T	TITLE REI	FEREN	CE:	Metropoli	tan Med	ical Respons	e System (MN	/IRS) - MAIN	TAIN	
)	PROC	UREMEN	IT - Ind	licate t	he method	d of pro	curement a	ssociated w	ith this pro	ject:	
	Re	quest for	Propos	sal	rovide a brie	f explana	ntion on your	method of prod	curement - FIE	ELD IS LIMITED TO VISI	BLE TEXT BOX
	_	le Source								propriate, depending nd NVDEM requireme	
	O Int	ternal									
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FIELD IS LIMITED TO VISIBLE TEXT BOX	will we	ork closely	/ with th	ne City o	of Las Vegas	Office of	of Emergency	rcises, as it per Management ntability and d	t and Finance	project. The MMRS e Department to ensu n.	Coordinator re grant
)			ou to t		/HO will be		ng the mone		oject - If it's	ion(s) proposed for a you, put in your age Project Representative	ncy]
	12 (a)	Las Vega					City of Las		Chri	s Sproule (Primary), (ernate), Karl Rosette (Craig Cooper
	12 (b)										
	12(c)										
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FIELD IS LIMITED TO VISIBLE TEXT BOX	Susta	inment ac	tivities	for recur	ring costs w	vill includ		these costs f		proposed funding solu	
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Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

Χ Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Metropolitan Medical Response System (MMRS) - MAINTAIN

)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	-					
	15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota			
				\$ 0.00			
	15h) Organization (Statistical of Control of	LV-UASI	State-wide	SubTota			
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	Jubiolo			
				\$ 0.00			
	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota			
	FirstWatch Real Time Early Warning System Annual Maintenance \$50,100						
		\$ 50,100.00		\$ 50,100.0			
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota			
				\$ 0.00			
	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota			
				\$ 0.00			
	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota			
	MMRS Coordinator Salary and Benefits (12 months) Salary:\$45,610 (50% of \$91,220)						
	Benefits: \$35,575 (50% of \$71,150)	\$ 81,185.00		\$ 81,185.0			
		\$ 81,185.00	State-wide	\$ 81,185.0			

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: X
Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Metropolitan Medical Response System (MMRS) - MAINTAIN

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Schedule Training (NIMS/ICS, etc.)	01/01/20	02/01/20	1
3	FirstWatch Annual Maintenance Payment	01/01/20	02/01/20	1
4	Maintain MMRS Capabilities	01/01/20	10/01/20	9
5	Maintain Public Health, Fire, EMS, and Law Enforcement Integration	01/01/20	10/01/20	9
6	Conduct Training (NIMS/ICS, etc.)	02/01/20	10/01/20	8
7	Update Plans, Policies, and Procedures as Appropriate	07/01/20	10/01/20	3
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The MMRS Program was created in 1996, in response to the Tokyo mass transit Sarin gas attack by Aum Shinrikyo and the domestic terrorist bombing of the Alfred P. Murrah Building in Oklahoma City, both having occurred in 1995. The MMRS program assists Nevada in developing plans, conducting training and exercises, and acquiring pharmaceuticals and personal protective equipment to achieve the enhanced capability necessary to respond to a mass casualty incident caused by a WMD terrorist act, an incident involving hazardous materials, an epidemic disease outbreak, or a natural disaster. This assistance supports the jurisdictions' activities to increase their response capabilities during the first hours crucial to lifesaving and population protection, with their own resources, until significant external assistance can arrive.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

MMRS is an existing program that is in alignment with the 2019 Strategic Capacity of CBRNE and supports the response and management of a mass casualty incident caused by a CBRNE incident.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Yes, FirstWatch could be eliminated but it would result in a significant loss of established syndromic surveillance and emergency alerting capability.

Neva	ada Homeland Securit	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	Х
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/24/19
PROJ	ECT TITLE REFERENCE:	Metropolitan Medical Response System (MMRS) - MAINT	AIN	
	d. Can this project continue w	vithout funding? YES NO (•) Explain below.		
Fields "d" and "e" are limitied to visible text box size		program will not have an MMRS Coordinator to run the progion sharing resources that would be available to the commu		
nitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.	
Fields "d" and "e" are li	Yes, this project has a statewide	e benefit with deployable assets and appropriately trained ar	nd equipped personn	el.
18)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 To	HIRA Survey. CHOO	SE ONE:
		cipated in the 2018 Threat and Hazard Identification Risk As		
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	u feel may be impor	tant. Field is
	discrete grant programs within Activities funded under these p	ogram (CCP) and Metropolitan Medical Response System (NHSGP, SAAs may include IJs funding to support CCP and Morojects must meet the allowability requirements of the SHSP ents will remain in place for proposed activities that support in preparedness."	IMRS activities/progr and UASI programs	ams. . The
		Security (DHS), Notice of Funding Opportunity (NOFO), Fisca dix B – FY 2018 HSGP Program Priorities, Page 47 of 100.	al Year 2018 Homela	and Security

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

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One Budget Per Funding Stream UASI UASI PERSONNEL DETAIL DESCRIPTION Select Purchase Type Personnel Personnel Personnel Salary or Hourly Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Maintain UASI Salary or Hourly Wo of Effort Calculation (hours) Wo of Effort Calculation (hours) Approved Strategic Capacity Capacity Core Capability Capacity Operational Coordination UASI Salary for MMRS Coordinator - 12 Months Maintain UASI Salary or Hourly Wo of Effort Salary or Hourly Wo of Effort Salary or Hourly Solveek Strategic Capacity Core Capability Core Capability Solveek State of Core Solveek State of Core Capability Core Capability UASI Salary or Hourly Funding Source UASI Salary or Hourly Solveek State of Core Solveek State of Core Capability Core Capability Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek State of Core Capability Solveek Solveek State of Core Capability Solveek Solveek State of Core Capability Solveek Solveek State of Core Capability Solveek Solveek Solveek State of Core Capability Capability Solveek		Agency Name	City of Las Vegas - Dept. of Fire & Rescue	•	Project Manager 702.303.0968; Alt.: Craig Cooper 702.236.9597 / Karl Rosette Grant Manager						X	
UASI CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Personnel Personnel Personnel Salary or Hourly Personnel Personnel Salary or Hourly Personnel Salary or Hourly Personnel Salary or Hourly Salary or Hourl		IJ TITLE:	Metropolitan Medical Response System	- MAINTAIN								
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ine # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Salary for MMRS Coordinator - 12 Months Maintain UASI \$45,610 50% 20/week \$45,610 Coordinator - 12 Months Salary for MMRS Coordinator - 12 Months UASI \$45,610 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0			UASI									
Personnel Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. 1 Salary for MMRS Coordinator - 12 Months Maintain UASI \$45,610 500 20/week \$45,610 Coordination UASI 4 Secondary or Maintain UASI Salary for MMRS Coordinator - 12 Months Maintain UASI \$45,610 Secondary or Maintain UASI Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Secondary or Maintain Second	Line #	CATEGORY		Select Purchase Type	Funding		% of Effort	Calculation	Cost	Strategic	Core	
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\$ 45,510.00 \$ 45,610.00	4	Davagened Cub Total							\$ -			
ERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM									, .,			

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The goal of this project is to sustain MMRS to continue to support and enhance the integration of local emergency management, law enforcement, fire, health, and medical systems. Sustaining these capabilities will improve the regions ability to prevent, prepare for, and respond to a large-scale incident.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		Fringe Benefits for MMRS Coordinator - 12 Months	Maintain	UASI	\$35,575	50%	20/week	\$35,575		Operational Coordination	Personnel
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ 35,575.00			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The purpose of this line item is to cover fringe benefits provided to City of Las Vegas employees (Medical, dental, vision, etc.).

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									•			
17												
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEA LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-				
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35					<u> </u>					
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					i	-	\$			
37							\$ -			
38							\$ -			
39					•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		FirstWatch Annual Maintenance	Maintain	UASI	1.00	\$50,100	\$ 50,100.00			04AP-06-CBRN Software, CBRNE/Commercial Chemical/Hazard	UASI
41						, , , , ,	\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45 46							\$ -				
46							\$ - \$ -				
48							\$ -				
49				1			\$ -				
	EQUIPMENT Sub-Total						\$ 50,100.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FirstWatch Early Warning System helps identify hidden trends in data to improve situational awareness, operations, and clinical performance. It provides early warnings and automated alerts for incidents such as bomb threats, hazardous material incidents, structural fires, multi-casualty incidents and more

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60											\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Budget Total		
				Request	\$ 131,285,00	1 1

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Metropolitan Medica	ıl Response System (MMF	RS)
Funding Source:	UASI	SHSP Funding Request:	\$0
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	\$131,285

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

MMRS supports the integration of law enforcement, fire, emergency management, health, and medical systems into a coordinated response to a mass casualty incident caused by a WMD, an incident involving hazardous materials, an epidemic disease outbreak, or natural disaster. The focus of the program is to decrease morbidity and mortality, and to increase survivability, during those first critical hours following a disaster. MMRS enhances local, regional, and statewide operational systems before an incident occurs.

How have you collaborated with other agencies to maximize the resource's capacity?

MMRS has provided equipment, training, exercises, and/or planning support to almost every public safety entity in Southern Nevada. This includes, but is not limited to, the following: Las Vegas Fire & Rescue, Clark County Fire Department, North Las Vegas Fire Department, Henderson Fire Department, Mesquite Fire Department, Boulder City Fire Department, Pahrump Fire Department, Las Vegas Metropolitan Police Department, North Las Vegas Police Department, Henderson Police Department, all Southern Nevada hospitals, SNHD, AMR Ambulance, MedicWest Ambulance, Community Ambulance, Clark County Emergency Management, North Las Vegas Emergency Management, Henderson Emergency Management, and Las Vegas Emergency Management.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

Las Vegas Fire & Rescue has provided in-kind contributions since the program's inception in Las Vegas in 2000. This includes, but is not limited to, office space, office supplies, vehicles, and support personnel. Over the last few years, the City of Las Vegas has absorbed 50% of the MMRS Coordinator's salary and benefits in an effort to reduce reliance on grant funding for maintaining the MMRS Coordinator position and the program.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Since 2010, I have been working to eliminate the need for grant funding to maintain the MMRS Coordinator position by requesting that it be absorbed by the City of Las Vegas general fund. I have been successful in getting 50% covered by the general fund and have submitted every year thereafter for the remaining 50% to be absorbed by the general fund. The most recent request was for FY19.

Please provide a five year funding summary for your project.

Metropolitan Medical Response System 5-Year Projection Budget Estimate

• 2019

MMRS Coordinator: \$81,185
 FirstWatch: \$50,100
 Total: \$131,285

• 2020

MMRS Coordinator: \$82,185
 FirstWatch: \$50,100
 Total: \$132,285

• 2021

MMRS Coordinator: \$83,185
 FirstWatch: \$50,100
 Total: \$133,285

• 2022

MMRS Coordinator: \$84,185
 FirstWatch: \$50,100
 Total: \$134,285

• 2023

MMRS Coordinator: \$85,185
 FirstWatch: \$50,100
 Total: \$135,285

FFY 2019 HSGP PROJECT SUBMISSIONS

COMPETITIVE PROJECTS

[SHSP-Only, SHSP/UASI Split, AND UASI-Only]

Project ID	Funding Stream	Project Title
ı	UASI	Cyber Security Services
AA	SHSP	WCSO Northern Nevada Regional Intelligence Center (NNRIC)
ВВ	UASI	Henderson Multi Use EOC Sustainment - Enterprise Surveillance System
СС	UASI	Southern Nevada Counter Terrorism Center - Fusion Watch
DD	UASI	Radio Site Target Hardening
EE	UASI	LVMPD DOC Dispatch
GG	UASI	LVMPD Wireless Mesh Network and TRV Enhancement
нн	UASI	Bomb Squad Electronic Countermeasures
П	SHSP	WCSO Air Purifying Respirators and SCBA
IJ	UASI	Metropolitan Medical Response System (MMRS) - NEW
кк	UASI	Las Vegas Urban Area/Clark County Nevada Shelter Project
MM	SHSP	Homeland Security Program Assistant
NN	UASI	Southern Nevada Counter Terrorism Center - Tactical Response Equipment
00	UASI	CBRNE Mobility
PP	UASI	CBRNE Remote Monitor Platform
QQ	UASI	Southern Nevada Incident Management Team
RR	SHSP	Security Skills Professional Development for Information/Cyber Security Professionals
SS	UASI	UNLV Venue Security Enhancements
TT	UASI	Emergency Event Tracking System Maintenance
UU	UASI	Emergency Management Operational Coordination Maintenance
VV	UASI	Clark County Fire MACTAC Training
ww	SHSP/UASI	Statewide NIMS COMPETITIVE
XX	SHSP	NIMS - Communications
YY	SHSP	DEM Stop the Bleed

ВВВ	UASI [NOT FUNDED]	Henderson Multi Use EOC Sustainment - Enterprise Surveillance System Expansion
ccc	UASI	LVMPD Russell Corridor Camera Project
DDD	UASI [NOT FUNDED]	Southern Nevada Counter Terrorism Center - B
EEE	UASI	Bomb Squad Remote Operations
FFF	UASI	Clark County Rural Fire Stations Repeaters Project
GGG	UASI	Las Vegas Fire Special Operations Communications
ннн	UASI	University Police Services - Interoperable Communication Enhancements
III	UASI	CCSD Stop the Bleed
ווו	UASI [NOT FUNDED]	Henderson Regional Hazmat Response Capability Sustainment – HAZMAT Truck Camera
KKK	UASI	LVMPD Tactical Response / MACTAC - B
LLL	UASI [NOT FUNDED]	LVMPD Wireless Mesh Network and TRV Enhancement – B
000	UASI [NOT FUNDED]	Virgin Valley SNACC
PPP	UASI	Mass Fatality Preparedness and Revise Mass Fatality Management Plan [SPLIT OUT FROM PROJ W]

Nev	ada Homeland Security	Grant P	rogram (I	HSGP) RESUBM	MISSION	PROJECT ID:	I
	ject Proposal for FFY19					Date Submitted	4/25/19
	ROJECT TITLE:		rity Services	•			
2) P	ROPOSING/LEAD AGENCY:	Southern Ne	evada Health	District			
3) P	roject Manager Name/Title:	Jason Fram	e/IT Manage	r			
Р	roject Manager Contact Info:	Phone: (702	2) 759-1641	Email: frame@snhd.	org		
1) A	ddl Project Manager Name/Title:	Steven Krar	mer	-			
A	ddl Project Manager Contact Info:	Phone: (702	2) 759-1658	Email: kramer@snh	d.org		
5) Fi	nance/Grant Contact Name/Title:	Lynda Zielin	ski/Accounta	nt II			
Fi	nance/Grant Contact Info:	Phone: (702	2) 759-1245	Email: zielinski@snh	nd.org		
5)	CLASSIFICATION - Check the p	rimary intent	tion of the Pr	roposed Project:			Choose one:
			•	ecently addressed this c ects in this category mu			
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACITY*			O
	*All NEW projects are competitive						
	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and <u>WHERE</u> (identify the geodesic This project is for an off site Cyb	e: "To (establish, meland Security ographic locale; e	, improve, expar (NCHS) FFY18 p example: state-v	nd, double, sustain, etc.) riorities (See #10)]; FOR W vide, LV Urban Area, NE N]; OF WHAT CO VHO (identify to V, or Reno, etc	DRE CAPABILITY (or CAPAI he direct users/beneficiar .]. FIELD IS LIMIITED TO V	BILITIES [consider ies of the ISIBLE TEXT BOX.
3)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency N	/Janagement	Agency (FEMA) list of	Core Capabi	lities and the Crosswa	alk of Target
	FFY19 Strategic Capacity Maintai	ned*:	FUSION CEN	NTERS			
	HSGP Project Type Supporting Strat	tegic Capacity:					
	If OTHER, please choose FFY16-18 N			AL COORDINATION [M			
	Core Capability aligned with Mainta	ained Project:	INTELLIGEN	CE AND INFORMATION	N SHARING [Mission Areas - PREV/F	PROT]
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment	FICATION - L with the strategi	Describe how c capacity to be	r this project aligns we maintained. If it does not	vith the stro t, please justify	ategic capacity chose . FIELD IS LIMITED TO VI	Pn. Describe the SIBLE TEXT BOX .
	This is directly tied to the ability to prior to entry into the SNHD netw		real time off s	site any possible intru	sion to the s	ystem, be identified a	and blocked

Nev	vada Homeland Secu	urity Grant Pr	ogram (HSGP) RESUBMIS	SION PROJECT ID:	1			
Pro	ject Proposal for FF	Y19 HSGP Fur	nding Description	Date Submitted	4/25/19			
PRO	JECT TITLE REFERENCE:	: Cyber Secur	rity Services					
10)	PROCUREMENT - Indica	ite the method o	f procurement associated with tl	his project:				
	Request for Proposal	Provide a brief ex	planation on your method of procureme	ent - FIELD IS LIMITED TO VIS	IBLE TEXT BOX:			
	· · · · ·		selected vendor that was selected duri					
	Internal							
11)	PROJECT IMPLEMENTAT	TION - Describe ho	ow, and by whom, the Proposed Proj	ect will be implemented.)escribe			
	in rough order the process by whi	ch the project will be ac	ccomplished, identifying who (i.e. staff, contrac	ctor, or ?) will perform what work				
FIELD IS LIMITED TO VISIBLE TEXT BOX	partners working with local providers to determine the best service available. SNHD will continue with the selected Vendor that was identified during the RFP process awarded during the 2018 UASI grant cycle. SNHD received a lower amount of funding to begin the process and is requesting additional funding to complete the process.							
12)	section is for you to tell u	us WHO will be rec (FD, PD, etc.)	rfy the participating agency(s) and juceiving the money for your project - Political Jurisdiction (City, County, State, etc. County-Special District	If it's you, put in your ago	ency]			
	12(b)							
	12(b) 12(c)							
13) LIMITED TO VISIBLE TEXT BOX	12(c) SUSTAINMENT - Identify		ancial obligation created by the Projection. Currently not in SNHD budget, loo					

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description
PROJECT TITLE REFERENCE:

Cyber Security Services

Cyber Security Services

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Cyber Security Monitoring Service	\$ 87,000.00		\$ 87,000.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
			\$ 0.00
	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS			

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION	PROJEC
Project Proposal for FFY19 HSGP Funding Description	Date Subr

T ID: 4/25/19 mitted

PROJECT TITLE REFERENCE:

Cyber Security Services

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration	
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)	
1	Receive Funding	N/A	N/A	N/A	
2	Complete monitoring service for 1 full year with Vendor identified during 2018 RFP.	09/01/19	08/31/20	12	
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES () NO () Explain below.
	Intrusion to the Network that houses all SNHD information and HIPAA information.
size	
are limitied to visible text box	
je X	
)e 1	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
isik	System in place for Cybersecurity.
0	
pa 1	
niti	
ji i	
ູ່ເ	
and	
ë,	6. 6. 4h':
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
"a",	SNHD received funding less then the original project cost in 2018 and is requesting this amount to continue the project in its
S	entirety.
Spl	

ada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	<u> </u>
ect Proposal for FFY19 H	HSGP Funding Description	Date Submitted	4/25/19
IECT TITLE REFERENCE:	Cyber Security Services		
d. Can this project continue with	hout funding? YES NO 💿 Explain below.		
No funding available through othe			
e. Does this project provide a M The sharing of information related		xplain below.	
The sharing of information related	I to a public Health Event.		SE ONE:
The sharing of information related THIRA COMPLETION - Please in		HIRA Survey. <u>CHOO</u>	

ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is 19) limited to the visible text box

SNHD requested an amount for this project during the 2018 UASI grant process and was requested to take a lower amount to allow for the budgeting of another project from another agency during the 2018 grant year. SNHD was hoping the de-obligated funding would come available to bring the project up to full amount. Since there was no additional funding available, SNHD is requesting 2019 funding to complete the project.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

			LINE ITEM DETAIL BUDGET												
	Agency Name	Southern Hevada Health District			Grant Manager Name & Contact #	Lynda Zielinski-702-		1							
	IJ TITLE:	Cybersecurity Services													
		One Budget Per Funding Stream													
		UASI													
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source			
Perso	sonnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								¢				 			
3								\$ -				 			
4								\$ -							
Perso	sonnel Sub-Total	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN						\$ -							

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5											
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9												
10												
11									-			
12									-			-
13 14									-			
15												+
16												+
17									-			+
18									-			
19									-			1
20									-			
21									-			
22									-			
	Travel Sub-Total	OR EACH LINE ITEM AROVE. DI EACE EVEL AINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE (TEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE (TEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-				
29							-			
30							-			
31							-			
32							-			
33			`				-			
34							-			
35					<u> </u>					
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36	Contractual	Contractor Company for Off-site Cyber Security Monitoring	Maintain	UASI	1.00	87,000.00	\$ 87.000.00	Cyber - Threat Identification	Cybersecurity	UASI
37						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ 87,000.00			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40							\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 87,000.00	1

Project I

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Cyber Security Project									
Funding Source:	UASI	SHSP Funding Request:								
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	87,000.00							
How is your project a regional or statewide resource, or how do you intend for it to be so in the future?										
It is directly regional to SNHD in the fact that the project is designated to monitor the SNHD server for emails entering the system. This project is to provide real time monitoring for any potential intrusion into the system.										
How have you collaborated with other agencies to maximize the resource's capacity?										
No										
What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?										
NONE										
Is there a plan for increasing offset by your jurisdiction to support this project in the future?										
That would be a discussion upon the initial setup and trial of the process.										

Project I

110,0001	
Please provide a five year funding summary for your project.	
Currently the initial cost is 200,000 for the startup. There could be a yearly ongoing cost of 200k for subsequent years of service.	

	evada Homeland Security		·		2210IA	PROJECT ID:	AA				
	roject Proposal for FFY19	HSGP Fu	<mark>nding D</mark> e	scription		Date Submitted	4/24/19				
	PROJECT TITLE:	Washoe Cou	unty Sheriff's	Office- Northern Neva	da Regiona	al Inteligence Center	(NNRIC)				
	PROPOSING/LEAD AGENCY:	Washoe Cou	unty Sheriff's	Office							
	Project Manager Name/Title:	Max Brokaw, Lieutenant									
	Project Manager Contact Info:	Phone: (775) 328-2847	Email: mbrokaw@was	hoecounty	.us					
	Addl Project Manager Name/Title:										
	Addl Project Manager Contact Info:	Phone:		Email:							
	Finance/Grant Contact Name/Title:	Laura Daniel	s								
	Finance/Grant Contact Info:	Phone: (775) 328-3013	Email: Idaniels@wash	oecounty.ı	ıs					
)	CLASSIFICATION - Check the pl	rimary intent	ion of the Pi	roposed Project:			Choose one				
NEW* Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.											
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACITY*			0				
	*All NEW projects are competitive										
	aligning with Nevada Commission on Hoi capability); and <u>WHERE</u> (identify the geo	improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX. The Washoe County Sheriff's Office wants to continue sustainment and increase abilities of the Northern Nevada Regional									
	sustaining current specialized eq research and provide intelligence assessments for events, VIP visi local businesses to gather and p Nevada State demographics and and provides a quick and efficien	e to the regior	n as well as o her high prof	conduct investigations will functions in the Nort	vhere need hern Neva	led. NNRIC also pro da area. Working cl	vides threat				
				mpact the information s			evada.				
	PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities he	CITY - <i>Identi</i>	bute informa fy by name to lanagement to	mpact the information s tion over a greater area the proposed strategic Agency (FEMA) list of Co	capacity, pore Capabil	abilities. NNRIC brid project type, and as ities and the Crosswa	evada. Iges this gar Issociated co alk of Target				
1	capability. Reference the Federal	CITY - Identia Emergency Mere: https://fe	bute informa fy by name to lanagement to	mpact the information s tion over a greater area the proposed strategic Agency (FEMA) list of Co capabilities / https://ww	capacity, pore Capabil	abilities. NNRIC brid project type, and as ities and the Crosswa	evada. Iges this gap Issociated co				
	capability. Reference the Federal Capabilities to Core Capabilities to FFY19 Strategic Capacity Maintai HSGP Project Type Supporting Strat	CITY - Idential Emergency Mere: https://feined*:	fy by name to an agement of the anagement mpact the information s tion over a greater area the proposed strategic Agency (FEMA) list of Co capabilities / https://ww	capacity, pore Capabil	abilities. NNRIC brid project type, and as ities and the Crosswa v/pdf/prepared/cross	evada. Iges this gap esociated co alk of Target swalk.pdf					
	capability. Reference the Federal Capabilities to Core Capabilities to FFY19 Strategic Capacity Maintai HSGP Project Type Supporting Strate If OTHER, please choose FFY16-18 N	CITY - Idential Emergency Mere: https://feined*: tegic Capacity: NCHS Priority:	fy by name to the management of the management o	mpact the information stion over a greater area the proposed strategic Agency (FEMA) list of Co capabilities / https://www.e CE AND INFORMATION	capacity, _l ore Capabil ww.fema.go	abilities. NNRIC brid project type, and as ities and the Crosswa v/pdf/prepared/crosswa	evada. Iges this gap esociated co alk of Target swalk.pdf				
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)	capability. Reference the Federal Capabilities to Core Capabilities to FFY19 Strategic Capacity Maintai HSGP Project Type Supporting Strate If OTHER, please choose FFY16-18 N	CITY - Idential Emergency Nere: https://feined*: tegic Capacity: NCHS Priority: ained Project:	fy by name to the same and the	mpact the information stion over a greater area the proposed strategic Agency (FEMA) list of Cocapabilities / https://www.ee CE AND INFORMATION CE AND INFORMATION and Commission on Home	capacity, pore Capabil www.fema.go SHARING [N	project type, and as ities and the Crosswa v/pdf/prepared/crosswa sistem Areas - PREV/	evada. Iges this gap Esociated co alk of Target ESWAIK.pdf PROT]				
)	capability. Reference the Federal Capabilities to Core Capabilities to FFY19 Strategic Capacity Maintai HSGP Project Type Supporting Strat If OTHER, please choose FFY16-18 N Core Capability aligned with Mainta *FFY19 Strategic Capacities are sub	CITY - Idential Emergency Mere: https://feined*: tegic Capacity: NCHS Priority: ained Project: bject to change ogram guidance FICATION - L with the strategic	fy by name to the same specific product of the same specific product product of the same specific product of the same specific produ	mpact the information stion over a greater area when proposed strategic Agency (FEMA) list of Cocapabilities / https://www.ee CE AND INFORMATION CE AND INFORMATION CE AND INFORMATION CE AND INFORMATION CE AND INFORMATION CE OF Funding Opportunity of this project aligns with maintained. If it does not, provided the content of the cont	capacity, pore Capabil www.fema.go SHARING [N SHARING [project type, and as ities and the Crosswa v/pdf/prepared/crosswa v/	evada. Iges this gap Esociated co alk of Target EWAIK.pdf PROT] PROT] PROT] PROT] PROTI PR				

evad	la Homeland Secu	urity Grant Progr	am (HSGP) RESUBMISSI	ON PROJECT ID:	AA							
rojec	t Proposal for FF	Y19 HSGP Fundir	ng Description	Date Submitted	4/24/19							
ROJEC	CT TITLE REFERENCE:	: Washoe County :	Sheriff's Office- Northern Nevada Re	egional Inteligence Center	(NNRIC)							
) PR	ROCUREMENT - <i>Indica</i>	ite the method of pro	ocurement associated with this	project:								
0	Request for Proposal	Provide a brief explan	ation on your method of procurement	: - FIELD IS LIMITED TO VISIE	BLE TEXT BOX:							
0		All purchases will follow	by the Washoe County Grants Pur	chasing Guidelines								
•) Internal											
) PR	، ROJECT IMPLEMENTA	TION - Describe how, a	and by whom, the Proposed Projec	t will be implemented. De	escribe							
in r	ough order the process by whi	ich the project will be accomp	lished, identifying who (i.e. staff, contractor	r, or ?) will perform what work								
FIELD IS LIMITED TO WISIBLE TEXT BOX Mig to be on in to to to unit to to to to to to to to to to to to to	Project will be implemented by full time members of the Washoe County Sheriff's Office NNRIC. Personnel will procure necessary equipment and software. The grant funded equipment and software will allow for more efficient and thorough intelligence gathering and distribution. WCSO continues to assign full time personnel to NNRIC related matters including investigation, intelligence gathering and distribution, tracking trends and patterns and threat assessments. Supervisory and non-supervisory personnel are assigned to the NNRIC. WCSO has partnered with regional state and federal law enforcement on intelligence related matters. These partners include the FBI, RPD, SPD, and NTAC to name a few. WCSO will continue attempts to expand regional efforts to include more entities, drawing upon skill sets available. Over the past few years NNRIC has been utilizing a "GeoShield" software program that has significantly improved our ability to search, map and distribute intelligence, trends and patterns. NNRIC would benefit greatly with the ability to expand access to this program to more users within the county. The expansion of this program and supporting equipment will benefit a wide number of user, shortening the time to gather real time intelligence that will greatly benefit investigations of all types. With the implementation of 50 additional user license access to GeoShield can be given to patrol personnel. This would enable them to quickly research and access valuable investigative information.											
	ection is for you to tell u		ne participating agency(s) and jurising the money for your project - If Political Jurisdiction (City, County, State, etc.)		ncy]							
12	(a) Washoe County She	eriff's Office	Washoe County	Lt. Max Brokaw								
12	(b)											
12	(c)											
) SL	JSTAINMENT - Identify	any continuing financia	I obligation created by the Project, a	and proposed funding solu	tion							
ğ fu	SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution Equipment and/or software purchased with these funds will be supported by the Washoe County Sheriff's Office, once and if funding ceases, however the capabilities may be reduced. WCSO will commit personnel, additional equipment and/or software, and office space for the project.											
			ct's funding percentage makeup of St 15g - PROJECT TOTALS' on Page #3	atewide -vs- UASI is noted b	pelow for							
	100% 0%											

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: AA

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Fields are limitied to visible text box size

Washoe County Sheriff's Office- Northern Nevada Regional Inteligence Center (NNRIC)

15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	cinc. luciting	onor and state	0031.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
The Washoe County Sheriff's office provides a weekly T-CAR meeting which is attended by multiple jurisdictions. This is a meeting to share crime trends in the Washoe County/No. Nevada area compiled by the NNRIC division. In addition to this the Sheriff's Office has a quarterly ACES meeting which can be attended by invitation - a request to attend by an agency is submitted to executive staff.			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
The Washoe County Sheriff's office was established in 1861. The Washoe County Sheriff's Office provides law enforcement services for the unincorporated area of Washoe County. We also are responsible for operating the only adult detention facility for pretrial detainees and sentenced misdemeanants within Washoe County. The Sheriff's Office is divided into three Bureaus. While each Bureau has a unique function, they impact the operation of the other Bureaus. The Washoe County Sheriff's Office strives to ensure public safety by building trust and creating partnerships within the diverse communities in which we serve.			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
GeoShield software user license for 50 users = \$37,500.00 (per year). To enable patrol officers access to current crime data from the patrol vehicle MDTs Purchase of HP DesignJet SD Pro MFP-multifunction color printer, to support work being conducted with the GeoShield software. = \$15,858.55 (one time purchase).		\$ 53,358.55	\$ 53,358.55
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
N/A			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] N/A	LV-UASI	State-wide	SubTotal \$ 0.00
N/A	LV-UASI	State-wide State-wide	
N/A 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] The NNRIC division currently has 7 full time employees and 1 part time employee. These employees are a combination of Washoe County Sheriff's Office, Sparks			\$ 0.00
			\$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

AA 4/24/19

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office- Northern Nevada Regional Inteligence Center (NNRIC)

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE LI	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Board of County Commissioners acceptance of award	10/01/19	12/31/19	3
3	Competitive quote process	01/01/20	03/01/20	2
4	Order software/equipment	04/01/20	09/01/20	5
5	Install software/equipment	09/01/20	10/30/20	2
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES (•) NO () Explain below.
Often times tips or intelligence gathered has a possible terrorist nexus. It is quickly vetted by investigators or relayed to the
appropriate authorities such as the FRI

b. Does this project align with the FFY19 strategic capacities? YES
NO
Explain below.

The NNRIC's mission aligns directly with the sharing of information and intelligence throughout the Northern Nevada region. It has become the hub of information for many regionalized units in Northern Nevada and with plans to increase the number of regionalized units NNRIC will be relied upon even more so.

c. Can this project funding request be reduced? Is it scaleable? YES
NO Explain below.

Requested funding reductions can be reduced at various levels and still remain effective, but the number of users would be reduced and thus reducing the effectiveness of the program.

	Homeland Securit	y Grant Progran	n (HSGP) RESUBM	ISSION	PROJECT ID:	AA						
ject I	Proposal for FFY19	HSGP Funding	Description		Date Submitted	4/24/19						
JECT	TITLE REFERENCE:	Washoe County She	riff's Office- Northern Neva	ada Region	al Inteligence Center	(NNRIC)						
d.	Can this project continue w	vithout funding? YES	NO Explain below.									
the n collection	The project can continue without funding, but without funding the program can not expand therefore making it difficult to meet the needs that NNRIC provides. The Washoe County Sheriff's Office is the only entity in Northern Nevada capable of collecting intelligence and distributing it to such a large customer base. With the regionalization of many of the investigative units in Northern Nevada the need for a centralized intelligence center is becoming more of a necessity than ever to effect sound and efficient investigations.											
e.	Does this project provide a	MEASUREABLE statewid	e benefit? YES	NO O Ex	plain below.							
proje Office	project covers all of Northe ct allows for statewide colla e and partners have provide sharing of information is wher.	aboration and assistand ed intelligence and inve	e with local, state, and fed estigative information throu	deral partne ughout all o	ers. The Washoe Cou f Nevada and Northe	ınty Sheriff' rn Californi						
THIR	A COMPLETION - Please				<u> </u>							
			eat and Hazard Identifica			-						
	NO - Agency has NOT p	articipated in the 2018	Threat and Hazard Identi	ification Ris	sk Assessment (THIR)	A) Survey						
NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessmentary ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may												
	ITIONAL COMMENTAR ed to the visible text box	Y - Please indicate an	v additional project comn	nentary yo	u feel may be impor	tant. Field						
The more		governments cannot so en agencies and on a b	lely rely on information ga	thered by cations are r	one source. It is prov	en that the						
The more NNR The With effect	ed to the visible text box State of Nevada and local and information shared between	governments cannot so en agencies and on a b r Northern Nevada and office has committed ful re, expansion of existin	olely rely on information ga proader scale that investigated only wants to become even I time law enforcement per g software and addition of	athered by cations are ren more efformed and formed and	one source. It is proving a source officient and efficient and efficient. If analyst to provide the ment NNRIC can income	en that the ective. nis service. rease it's						
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The more NNR The With effect	State of Nevada and local of information shared betwee IC provides that service for the addition of new softwativeness in gathering and of	governments cannot so en agencies and on a b r Northern Nevada and office has committed ful re, expansion of existin	olely rely on information ga proader scale that investigated only wants to become even I time law enforcement per g software and addition of	athered by cations are ren more efformed and formed and	one source. It is proving a source officient and efficient and efficient. If analyst to provide the ment NNRIC can income	en that the ective. nis service. rease it's						
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The more NNR The With effect	State of Nevada and local of information shared betwee IC provides that service for the addition of new softwativeness in gathering and of	governments cannot so en agencies and on a b r Northern Nevada and office has committed ful re, expansion of existin	olely rely on information ga proader scale that investigated only wants to become even I time law enforcement per g software and addition of	athered by cations are ren more efformed and formed and	one source. It is proving a source officient and efficient and efficient. If analyst to provide the ment NNRIC can income	en that the ective. nis service. rease it's						
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The more NNR The With effect	State of Nevada and local of information shared betwee IC provides that service for the addition of new softwativeness in gathering and of	governments cannot so en agencies and on a b r Northern Nevada and office has committed ful re, expansion of existin	olely rely on information ga proader scale that investigated only wants to become even I time law enforcement per g software and addition of	athered by cations are ren more efformed and formed and	one source. It is proving a source officient and efficient and efficient. If analyst to provide the ment NNRIC can income	en that the ective. nis service. rease it's						

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

						IN DETAIL BODGET					
	Agency Name	Washoe County Sheriff's Office	Project Manager Name & Contact #			Grant Manager Name & Contact #	Laura Daniels, 775-3	28-3013			AA
	IJ TITLE:	WCSO Northern Nevada Regional Intelig	ence Center (NNRIC)								
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.		,							
1								\$ -			
2							1	\$ -			
3								\$ -			
4	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8						<u> </u>		\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Justification & Narrative for each trip must be included here	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
		THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPELANCE)	Select Type							
9							-			
10							-			
11							-			
13							-			
14										
15										
16							-			
17							-			
18							-			
19							-			
20							-			
21							-			
22							-			
23							-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA					-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Line #		PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-				
29										
30							-			
31							-			
32							-			
33							-			
34					·		-		<u> </u>	
35					·				<u> </u>	
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			·		-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40		50 user license for GeoShield	New / Enhance / Past / Competitive	Local Funds	1.00	37,500.00	\$ 37,500.00		Intelligence and Information Sharing	13IT-00-DACQ Data Acquisition	SHSP
41		HP DesignJet SD Pro MFP-printer	New / Enhance / Past / Competitive	Local Funds	1.00	15.858.55	\$ 15.858.55		Intelligence and Information Sharing	04HW-01-INHW Hardware, Computer, Integrated	SHSP
42						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		,		
43							\$ -				
44							\$ -				
45			·				\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 53,358,55				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

NNRIC compiles regional intelligence and distributes it accordingly, as well as conducting investigations on information and tips received. This information is shared in the weekly multi-jurisdictional T-CAR meetings. The 50 licenses will be issue to Patrol to enable the officers to update the data from their vehicles. By sustaining current special red

NNRIC compiles regional intelligence and distributes it accordingly, as well as conducting investigations on information and tips received. This information is shared in the weekly multi-jurisdictional T-CAR meetings. The 50 licenses will be issue to Patrol to enable the officers to update the data from their vehicles. By sustaining current specialize equipment, software and skills to law enforcement and analysts they will be better equipped to research and provide intelligence to the region as well as conduct investigations where needed. NNRIC also provides threat assessments for events, VIP visits and other high profile functions in the Northern Nevada area. Working closely with local businesses to gather and provide intelligence provides a safer environment for all residence of Northern Nevada.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	le Thie Poqueet on the	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		ocurement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55			•								\$ -	
56			•								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRES. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Budget Total Request	\$ 53,358.55	

Project AA

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Washoe County Sheriff's Office- Northern Nevada Regional Inteligence Center (NNRIC)						
Funding Source:	SHSP	SHSP Funding Request:	AA				
(SHSP, UASI, SHSP/UASI Split)	2µ2Ь	UASI Funding Request:					

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The Washoe County Sheriff's Office wants to continue sustainment and increase abilities of the Northern Nevada Regional Intelligence Centers (NNRIC) ability to provide real time intelligence to Northern Nevada. The Sheriff's Office continues to dedicate full time law enforcement personnel and civilian intelligence analyst to investigate and provided real time intelligence to assist Northern Nevada agencies on all crimes and incidents. NNRIC also provides threat assessments for events, VIP visits and other high profile functions in the Northern Nevada area. Working closely with local businesses to gather and provide intelligence provides a safer environment for all residence of Northern Nevada.

How have you collaborated with other agencies to maximize the resource's capacity?

The NNRIC division is a collaboration of Washoe County Sheriff's Office, Sparks Police Department, and the Reno Police Department. All agencies have an employee in this centralized office which enables them to share data throughout Northern Nevada.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

General funds are used for the day to day operation of this division

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Currently the NNRIC and its equipment/software is funded entirely by the Washoe County Sheriff's Office through general funds for or Special Operations Division. This grant would allow us to increase our capabilities that the current budgeting will not sustain.

Project AA

Please provide a five year funding summary for your project.
The Washoe County Sheriff's Office will continue to submit for funding through the Washoe County Commission to provide line item funding that will support and sustain programs associated with the Special Operations Division, more specifically NNRIC.

Nevada Homeland Security	levada Homeland Security Grant Program (HSGP) RESUBMISSION								
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19					
1) PROJECT TITLE:	Henderson Multi Use EO	enderson Multi Use EOC Sustainment - Enterprise Surveillance System							
2) PROPOSING/LEAD AGENCY:	City of Henderson	ity of Henderson							
3) Project Manager Name/Title:	Troy Westover, Facilties I	Froy Westover, Facilties Manager							
Project Manager Contact Info:	Phone: (702) 267-3290	Email: Troy.Westover@cityofhen	derson.com						
4) Addl Project Manager Name/Title:	Ryan Turner, Division Ch	ief of Emergency Management &	Safety						
Addl Project Manager Contact Info:	Phone: (702) 267-2212	Email: Ryan.Turner@cityofhende	erson.com						
5) Finance/Grant Contact Name/Title:	Heather Carson, Fire Department Business Analyst III								
Finance/Grant Contact Info:	Phone: (702) 267-2246	Email: Heather.Carson@cityofhe	enderson.com						

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

With funding from FFY16 Department of Homeland Security (DHS) Urban Area Security Initiative (UASI), the City of Henderson (COH) received funding to help build its Multi Use Emergency Operations Center (EOC). In 2017, DHS conducted a vulnerability assessment of multiple significant asset and areas (SAA's) within COH. As a result, the DHS Infrastructure Survey Security and Resilience Report identified that "closed circuit television (CCTV) coverage of facility perimeters was limited." They recommended COH "evaluate CCTV coverage of the facility perimeter to determine if it meets the facility's security requirements. Explore options to increase coverage as necessary." COH also participated in the Regional Resiliency Assessment Program in 2017, which focused on water reclamation facilities and made similar findings. Furthermore, on March 28, 2017, the Office of Intelligence and Analysis published an "Intelligence Note" that provided current intelligence on a specific threat to US Water and Wastewater systems. After reviewing the recommendations from these reports and the intelligence provided, COH conducted the necessary evaluations. As a result, COH seeks to mitigate findings from formal DHS sponsored assessments and to ensure the safety and welfare of COH's critical infrastructure/key resources, data, personnel as well as the citizens and vendors who frequent these facilities and depend on these critical systems and services. Therefore, COH is respectfully requesting the assistance of DHS UASI to help sustain its EOC through acquiring an enterprise surveillance system to strengthen its intelligence and information sharing as well as its operational coordination with partnering agencies within the Las Vegas urban area at key facilities such as Henderson City Hall, Water, and Wastewater facilities.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROTI

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This is a new project and aligns with the FY-16-19 core capabilities intelligence and information sharing along with operational coordination. The City of Henderson, Nevada's second largest city seeks to prevent, protect and respond to its critical infrastructure with the use of an enterprise surveillance system that will be monitored and coordinated from the Multi-Use EOC. In 2017, DHS conducted a vulnerability assessment of multiple significant asset and areas (SAA's) within COH. As a result, the DHS Infrastructure Survey Security and Resilience Report identified that "closed circuit television (CCTV) coverage of facility perimeters was limited." After reviewing the recommendations from these reports and the intelligence provided, COH conducted the necessary evaluations, which led to this proposal request. Through this proposal, COH seeks to mitigate findings from formal DHS sponsored assessments and to ensure the safety and welfare of COH's critical infrastructure/key resources, data, personnel as well as the citizens and vendors who frequent these facilities and depend on these critical systems and services.

evada H	omeland Sect	urity Grant Pro્	gram (HSGP) RESUBMISS I	ION	PROJECTID:	BB
oject Pr	oposal for FF	Y19 HSGP Fund	ing Description		Date Submitted	4/25/19
OJECT TI	TLE REFERENCE:	Henderson Mul	ti Use EOC Sustainment - Enterprise	e Surve	eillance System	
PROCU	IREMENT - Indica	te the method of p	rocurement associated with thi	is proje	ect:	
_	uest for Proposal		nation on your method of procuremen			BLE TEXT BOX:
_	· I		follow the RFP process.			
O Inte						
	l	CION Describe beau	and by whom the Dramond Drain		ha immlamanta d D	.,
			and by whom, the Proposed Project applished, identifying who (i.e. staff, contracto		•	scribe
and ass Qualific short-lis with oth	sociated cameras a cations (RFQ) will be sted applicants will la ner Emergency Man	nd equipment, will be perpublished and a team be scrutinized by staff agers in the region to	rveillance system, which consists of procured as outlined in Nevada Revin from the City will review and short to determine the best value for the C determine which system works best to be the consistency of the C determine which system works best the participating agency(s) and juri	ised sta list the City. Th with th	atutes. A Request Fo most qualified applic is process will includ e other municipalitie	r cants. These le coordinatio s.
	is for you to tell u		ring the money for your project - It Political Jurisdiction (City, County, State, etc.)	If it's yo		ncy]
12 (a)	Henderson Fire Dep	artment	City of Henderson		n White, Fire Chief	
12 (b)						
12 (c)						
			ial obligation created by the Project,		·	
subseq	uent grant years to sions with COH lead	fund the project in pha	project this grant cycle, COH may neases. If supported by grant funding, on the string of this project if additional fundings and maintenance.	COH w	rill of course continue	e to have
your cor		unt is derived from Field	iect's funding percentage makeup of S d '15g - PROJECT TOTALS' on Page #3	Statewic	de -vs- UASI is noted b	elow for

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION **Project Proposal for FFY19 HSGP Funding Description**

PROJECT ID: BB Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Henderson Multi Use EOC Sustainment - Enterprise Surveillance System

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Enterprise surveillance system, which consists of the Video Management System (VMS) and associated cameras and equipment: base license with one-year care plus for base license; materials, installation, supporting infrastructure unit; device license/camera; one-year care plus for device license/camera; network switches & infrastructure; and, video storage, work stations, 2 data storage sites/per camera.	\$ 503,543.00	\$ 0.00	\$ 503,543.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

Date Submitted

BB 4/25/19

PROJECT TITLE REFERENCE:

Henderson Multi Use EOC Sustainment - Enterprise Surveillance System

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive and Accept Sub-grant Award	10/01/19	11/30/19	2
3	Complete Environmental and Historic Preservation Screening Form Process	12/01/19	01/31/20	2
4	Design system	02/01/20	05/31/20	4
5	Procure Equipment in Compliance with Grant Guidelines	06/01/20	09/30/20	4
6	Equipment Inventory and Installation	10/01/20	03/31/21	6
7	Test Equipment	04/01/21	06/30/21	3
8	Put Equipment into Full Service	07/01/21	07/31/21	1
9	Closeout Grant	08/01/21	08/31/21	1
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.									
o o	Yes, through this proposal, COH will be able to identify, deter, detect, disrupt and prepare for terrorist events; reduce vulnerability of critical assets, systems and networks and mitigate potential consequences of critical infrastructure if a terrorist attack or subversive act did occur.									
are limitied to visible text box size										
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.									
O VISI	No, this is a new project and the explanation has been provided in section 9 of this grant proposal.									
itied t										
re lim										
ပ										
, and										
Q	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.									
a,	Yes, this project may be implemented in multiple phases.									
gp										

Nev	ada Homeland Security	<i>ı</i> Grant Program (HSGP) RESUBMISSIO N	PROJECT ID:	BB
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/25/19
PROJ	IECT TITLE REFERENCE:	Henderson Multi Use EOC Sustainment - Enterprise Sur	veillance System	
	d. Can this project continue w	ithout funding? YES NO 💿 Explain below.		
Fields "d" and "e" are limitied to visible text box size	a needs assessment to determine	OH to address critical needs that may not be addressed oth ne the highest priority demands for additional resources. Ere systems request has not been funded.		
nitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO NO	Explain below.	
Fields "d" and "e" are l	Yes, the project provides a measidentified as vulnerable in the Dh	surable "statewide" benefit as it supports the monitoring of IS assessments.	critical infrastructures	, which were
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018	THIRA Survey. CHOC	SE ONE:
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk A	Assessment (THIRA) S	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification F	Risk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	l - Please indicate any additional project commentary y	ou feel may be impol	rtant. Field is
	n/a			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

				LINE	II EWI DE I AII	L DODGE I					
	Agency Name	City of Henderson	Project Manager Name & Contact #	Troy Westo Facilties Ma (702)267-32	nager	Grant Manager Name & Contact #	Heather Cars Fire Departn (702)267-22	nent Business Ar	nalyst III		BB
	IJ TITLE:	Henderson Multi Use EOC Sustainmen	t - Enterprise Surveilla	ance System	1						
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3								s -			
4	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - I LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	(Input	Personnel	Approved Strategic Capacity	Core Capability	Requested Funding Source
							\$ -			
							\$ -			
							\$ -			
							\$ -			
Fringe Sub-Total							\$ -			
	Fringe Benefits	Fringe Benefits Positions Require: Fringe to be separate from Personnel Costs above	Fringe Benefits Positions Require: Fringe to be separate from Personnel Costs above Type	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Type Fringe Benefits Personnel Costs above Funding Type Fringe Benefits Personnel Costs above	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: Fringe to be separate from Personnel Costs above Salary Hourly	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type Fringe Benefits Positions Require: Fringe to be separate from Personnel Costs above Select Purchase Type Funding Type Hourly % of Effort Hourly % of Ef	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type Funding Type Funding Type Hourly % of Effort (Input hours)	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Formal Cost Amount Personnel Cost Amount Salary Hourly % of Effort (Input hours) Fringe Benefits Formal Cost Amount Personnel Cost Amount Salary Hourly % of Effort (Input hours) Fringe Benefits S	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Funding Type Formal Personnel Cost Amount Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity Strategic Capacity	CATEGORY FRINGE DETAIL DESCRIPTION Select Purchase Type Funding Type

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9												
10												
11												
12												
13									-			
14												
15												
16									-			
17									-			
18 19									-			
20												
21												
22												
23												
24												
25												
26												
27												
	Travel Sub-Total											

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-				
28						-				
29										
30										
31										
32										
33										
34							-			
35										
	Planning Sub-Total						\$ -	<u> </u>		

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HER

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VENLICE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37				-	·		\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
Eq	quipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
E		curement / See 2nd tab to determine whether ect requires EHP Screening									
40		Base license	Maintain	UASI	1	575.00	\$ 575.00		Information Sharing	14SW-01-VIDA Systems, Video Assessment, Security	UASI
41		One-year care plus for base license	Maintain	UASI	1	3,183.00	\$ 3,183.00		Information Sharing	14SW-01-VIDA Systems, Video Assessment, Security	UASI
42		Materials, installation, supporting infrastructure unit	Maintain	UASI	65	4,500.00	\$ 292,500.00		Information Sharing	14SW-01-VIDA Systems, Video Assessment, Security	UASI
43		Device license/camera	Maintain	UASI	65	329.00	\$ 21,385.00		Information Sharing	14SW-01-VIDA Systems, Video Assessment, Security	UASI
44		One-year care plus for device license/camera	Maintain	UASI	65	60.00	\$ 3,900.00		Information	14SW-01-VIDA Systems, Video Assessment, Security	UASI
45		Network switches & infrastructure	Maintain	UASI	65	700.00	\$ 45,500.00		Information Sharing	14SW-01-VIDA Systems, Video Assessment, Security	UASI
46		Video storage, work stations, 2 data storage sites/per camera	Maintain	UASI	65	2,100.00	\$ 136,500.00		Information	14SW-01-VIDA Systems, Video Assessment, Security	UASI
47					 		\$ -	-			
48							\$ -				
	QUIPMENT Sub-Total						\$ - \$ 503.543.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

After approval of grant funding, the enterprise surveillance system, which consists of the Video Management System (VMS) and associated cameras and equipment, will be procured as outlined in Nevada Revised statutes. A Request For Qualifications (RFQ) will be published and a team from the City will review and short list the most qualified applicants. These short-listed applicants will be scrutinized by staff to determine the best value for the City. This process will include coordination with other Emergency Managers in the region to determine which system works best with the other municipalities.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
50	your pro	ect requires EHP Screening									\$ -	
51											S -	
52											S -	
53											\$ -	
54											S -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			·					·		\$ -	
61										\$ -	
	Exercise Sub-Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
L					Request	\$ 503,543.00	

Project BB

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Henderson Multi Project ID: BB	Use EOC Sustainmen	t - Enterprise Surveillance System
Funding Source:	UASI	SHSP Funding Request:	0%
(SHSP, UASI, SHSP/UASI Split)	UASI	UASI Funding Request:	100% of \$503,543.00

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

The project provides a measurable regional and statewide benefit as it supports the monitoring of critical infrastructures, which were identified as vulnerable in the DHS assessments. In addition, the project will allow City of Henderson (COH) to establish and maintain a unified and coordinated operation by creating protocols to include all stakeholders in monitoring critical infrastructures by utilizing its EOC to facilitate incident activities via the Incident Command System (ICS), which is consistent with the National Incident Management System (NIMS). Furthermore, the project will allow COH to provide Intelligence and Information Sharing, to "anticipate and identify emerging and/or imminent threats;" "share relevant, timely, and actionable information and analysis with Federal, state, local, private sector, and international partners and develop and disseminate" appropriately; and, ensure these "partners possess or have access to a mechanism to submit terrorism-related information and/or suspicious activity reports to law enforcement." https://www.fema.gov/core-capabilities

How have you collaborated with other agencies to maximize the resource's capacity?

To maximize the resource's capacity, the City of Henderson (COH) has collaborated with other agencies in the Las Vegas urban area such as City of North Las Vegas, the Las Vegas Metropolitan Police Department, and the Clark County School District Police Department to inquire as to their current enterprise surveillance systems and which vendor(s) they chose and what type(s) of cameras and associated equipment they purchased. This will allow for easier intelligence and information sharing and operational coordination because personnel at these agencies will have the same basic knowledge of the software and equipment being used at each agency.

Project BB

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The current investment provided by the City of Henderson (COH) to offset reliance on grant funding for this project will depend on if COH is successful in receiving the full amount requested in both its original and supplemental proposals.

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

If COH only receives the amount requested in its original proposal, there will still be a need to complete the project in the next grant funding cycle. If COH receives all the requested funding in both its original and supplemental proposals, COH does not plan to return for further grant assistance to outfit its other facilities.

Please provide a five year funding summary for your project.

COH leadership has been briefed as to the potential of grant funding to be received in either this fiscal year or the next fiscal year. Therefore, if grant funding is received to fund COH's key facilities, COH leadership is prepared to prioritize and complete with City funds its remaining facilities as well as the entire system's on-going operations and maintenance.

N	evada Homeland Security	Grant Pr	rogram (I	HSGP) RESU	BMISSION	PROJECT ID:	CC
Ρı	oject Proposal for FFY19	HSGP Fu	nding De	escription		Date Submitted	4/25/19
1)	PROJECT TITLE:	Southern Ne	evada Counte	er Terrorism Cent	er		
2)	PROPOSING/LEAD AGENCY:	Las Vegas N	Metropolitan f	Police Departmen	nt		
3)	Project Manager Name/Title:	Chris Tomai	no / Captain				
	Project Manager Contact Info:	Phone: (702	2) 828-2281	Email: c4671t@l	vmpd.com		
1)	Addl Project Manager Name/Title:	Rachel Skid	more / Emer	gency Manager			
	Addl Project Manager Contact Info:	Phone: (702	2) 828-2257	Email: r14590s@	Very live of the l		
5)	Finance/Grant Contact Name/Title:	Joni Prucnal	, Director of I	Finance			
	Finance/Grant Contact Info:	Phone: (702	2) 828-8267	Email: J13700P	@LVMPD.COM		
5)	CLASSIFICATION - Check the p	rimary intent	tion of the Pi	roposed Project:			Choose one:
						hin the past five years; NCHS FY16-18 prioritie	
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACITY	/*		•
	*All NEW projects are competitive						
	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hocapability); and WHERE (identify the geometric product of the product	e Proposed Proje e: "To (establish, meland Security	ect in terms of C improve, expar (NCHS) FFY18 p	CAPABILITY. The state and, double, sustain, et priorities (See #10)]; <u>F</u>	ment should describtc.)]; OF WHAT CC OR WHO (identify the	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPA he direct users/beneficial	ABILITIES [consider ries of the
	infrastructure of the state of Nevicenter (SNCTC) will be able to s SNCTC is committed to intelliger Region IX. This project proposa and continue to operate as the D in the Fusion Watch program to 1	sustain curren nce and inforn I further susta NHS Primary f	t operations mation sharin ains our effort usion center	to meet the Fusion within the state to maintain nec for the State of N	on Center Baseli , regionally, and essary informati evada. We are	ine Capabilities / Coo I nationally, to includ- ion streams through	C's / EC's. The le FEMA out our state,
3)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency M	/lanagement	Agency (FEMA) lis	t of Core Capabi	lities and the Crossw	alk of Target
	FFY19 Strategic Capacity Maintai	ned*:	FUSION CEN	NTERS			
	HSGP Project Type Supporting Strat				rism Center [FUSI	ION]	
	If OTHER, please choose FFY16-18 N	NCHS Priority:	INTELLIGEN	CE AND INFORMA	TION SHARING [[Mission Areas - PREV/	/PROT]
	Core Capability aligned with Mainta	ained Project:	INTELLIGEN	CE AND INFORMA	TION SHARING [Mission Areas - PREV/	PROT]
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						'19 and/or
))	STRATEGIC CAPACITY JUSTIF justification of this project's alignment v						
	This project is the sustainment re	equest for the	Southern Ne	evada Counter Te	errorism Center.		

		am (HSGP) RESUBMIS	SION		CC
<u> </u>	FFY19 HSGP Fundin	g Description		Date Submitted	4/25/19
OJECT TITLE REFEREN	CE: Southern Nevada	Counter Terrorism Center			
PROCUREMENT - Inc	licate the method of prod	curement associated with tl	his proje	ect:	
Request for Propos	sal Provide a brief explana	tion on your method of procureme	ent - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
O Sole Source	All three are completed.				
Internal					
PROJECT IMPLEMEN	TATION - Describe how, as	nd by whom, the Proposed Prop	iect will	he implemented. Do	ecriba
	•	shed, identifying who (i.e. staff, contrac	,	,	SCI IDC
represented to include: - CFATS, Department of Department of Homelan County Fire Departmer Security - Office of Inte Hoover Dam Police De and the Clark County S information is collected supporting research sta	The Federal Aviation Admin of Homeland Security - ICE, and Security - Federal Security, Boulder City Police Departiligence and Analysis, Federal Police Department, Moapa Tribal Police Chool District Police Department, analyzed, and distributed to aff leverage technology and the security of the securit	the staff that are provided by LVM istration, Henderson Police Dep Transportation Security Administry, Department of Homeland Secutment, North Las Vegas Police I al Bureau of Investigation, RRG Department, Southern Nevadnent. It is through these partner of our consumers. The crime and the diverse data sets owned by the stakeholders and other custons.	partment, stration, No curity- PS Departme Privacy da Health rships with intellige the partic	Department of Hom- Nevada National Gua SA, Nevada Highway ent, Department of H Officer, Las Vegas (District, US State D th the various agenc nce analysts, along sipating agencies to	neland Securiterd, Patrol, Clark Iomeland City Marshals, epartment, ies that with
section is for you to to	ell us WHO will be receiving ency (FD, PD, etc.)	e participating agency(s) and jug the money for your project - Political Jurisdiction (City, County, State, etc.	c.)	ou, put in your age Project Representative (ncy]
12(a) Las Vegas Metro	opolitan Police Department	Clark County	Christ	opher Tomaino	
12 (b)					
12 (c)					
(9)					
SUSTAINMENT - Iden	tify any continuing financial	obligation created by the Projec	et and pr	onosed fundina solu	tion
We are currently lookin	g to sustain the existing proje	ects, programs, and procedures n HSGP funds, as well as host a	that are	already in place with	
your convenience. This a		t's funding percentage makeup of 5g - PROJECT TOTALS' on Page #3		de -vs- UASI is noted b	pelow for

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: CC Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism Center

Salar	Planning [Development of policies, plans, procedures, mutual aid agreements, strategies] ry for one FTE Fusion Watch Specialist for 18 months.	LV-UASI	State-wide	SubTotal
		\$ 127,890.52	\$ 0.00	\$ 127,890.5
1Eh\	Organization (5.44) 4.44	LV-UASI	State-wide	SubTotal
	Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
n.a		\$ 0.00	\$ 0.00	\$ 0.00
15c)	Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
n.a		\$ 0.00	\$ 0.00	\$ 0.00
15d)	Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
n.a		\$ 0.00	\$ 0.00	\$ 0.00
15e)	Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
n.a		\$ 0.00	\$ 0.00	\$ 0.00
15f)	Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
n.a		\$ 0.00	\$ 0.00	\$ 0.00
	PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

Date Submitted

CC 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism Center

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Hiring Process	01/01/20	03/01/21	3
3	Implement Training Programs, and Project Management	03/01/20	09/30/21	18
4				
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Yes, the Southern Nevada Counter Terrorism Center's primary purpose is to implement the National SAR initiative which is to combat terrorism within the United States.
ext box size	
p/e t	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
"b", and "c" are limitied to visible text box	Fusion centers are intelligence and information sharing at the core. We are currently seeking to build out the cybersecurity components within our center C. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
Fields "a", "b	We would have capability loss.

Neva	ada Homeland Securit	ty Grant Program (HSGP) RESUBMISSION	PROJECT ID:	CC
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/25/19
PROJ	ECT TITLE REFERENCE:	Southern Nevada Counter Terrorism Center		
	d. Can this project continue	without funding? YES NO (•) Explain below.		
Fields "d" and "e" are limitied to visible text box size	The LVMPD requires the grant	s to sustain this program.		
mitie	e. Does this project provide a	a MEASUREABLE statewide benefit? YES NO E	rplain below.	
Fields "d" and "e" are l	Yes the SNCTC is the state de	signated fusion center for the state of Nevada.		
18)	THIRA COMPLETION - Pleas	se indicate the participation level in completing the 2018 T	HIRA Survey. CHOO	SE ONE:
	YES - Agency HAS parti	cipated in the 2018 Threat and Hazard Identification Risk A.	ssessment (THIRA) Sเ	ırvey
	NO - Agency has NOT µ	participated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIRA	A) Survey
19)	ADDITIONAL COMMENTAR limited to the visible text box	RY - Please indicate any additional project commentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive 27.49967308 100% 3120 \$ 85,798.98 SNCTC Intelligence and Information Sharing UASI 2	LINE II EM DE I AIL BUDGE I												
One Budget Per Funding Stream UASI Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Personnel Require: How Many, type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive New / Enhance / Past / Competitive 27.49967308 New / Enhance / Past / Competitive New / Enhance / Past / Competitive 27.49967308 New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance / Past / Competitive New / Enhance /		Agency Name	LVMPD					Joni Prucnal 702 828		CC			
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive 27.49967308 100% 3120 \$ 85,798.98 SNCTC Intelligence and Information Sharing 1.00%		IJ TITLE:	SNCTC Enhancment										
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive Previous Funding Type New / Enhance / Past / Competitive 27.49967308 New / Enhance / Past / Competitive 27.49967308 New / Enhance / Past / Competitive 27.49967308 New / Enhance / Past / Competitive New / Enhance / Past / Co			One Budget Per Funding Stream										
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Tunding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive PETE Fusion Watch Specilaist - 18 months New / Enhance / Past / Competitive 27.49967308 100% 310 \$ 85,798.98 SNCTC Intelligence and Information Sharing UASI 4 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			UASI										
Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. New / Enhance / Past / Competitive 27.49967308 100% 3120 \$ 85,798.98 SNCTC Information Sharing UASI 2	Line #	CATEGORY		Select Purchase Type	Funding		% of Effort	Calculation	Cost	Strategic			Requested Funding Source
TEF Fusion Watch Specilaist - 18 months Competitive 27.49967308 100% 3120		Personnel	Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or										
3	1		FTE Fusion Watch Specilaist - 18 months			27.49967308	100%	3120					UASI
4									¢ .				
Personnel Sub-Total S 85 798 98	4								\$ -				
Ψ 00,100.30		Personnel Sub-Total							\$ 85,798.98				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This is the 18 month anticipated salary for two Fusion Watch Specialists.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		FTE Fusion Watch Specilaist - 18 months	New / Enhance / Past / Competitive		13.49087821	100%	3,120.00			Intelligence and Information Sharing	UASI
6											
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ 42,091.54			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This is the 18 month anticipated salary for one Fusion Watch Specialists.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						,			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19												
20									-			
	Travel Sub-Total	D EACH LINE ITEM ABOVE - DI EASE EVEL AINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
30							-				
31							-				
32							-				
33					_		-				
34							-				
35					_						
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					i	-	\$			
37							\$ -			
38							\$ -			
39					•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
		DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40											
41											
42											
43											
44											
45											
46 47											-
47											-
48											-
49											
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				В	udget Total		
1				R	equest	\$ 127,890.52	1 1

Nevada Homeland Security	y Grant Pi	rogram (l	HSGP) RESUBMIS	SION	PROJECT ID:	DD							
Project Proposal for FFY19	HSGP Fu	nding De	scription		Date Submitted	4/25/19							
1) PROJECT TITLE:	Radio Site T	arget Harde	ning										
2) PROPOSING/LEAD AGENCY:	LVMPD												
3) Project Manager Name/Title:	Brad Cupp/S	Sergeant											
Project Manager Contact Info:	Phone: (702) 828-4455	Email: b8104c@lvmpd.	com									
4) Addl Project Manager Name/Title:	Rachel Skid	more / Emer	gency Manager										
Addl Project Manager Contact Info:	Phone: (702) 828-2257	Email: r14590s@lvmpd	l.com									
5) Finance/Grant Contact Name/Title:	Joni Prucnal	, Director of	Finance										
Finance/Grant Contact Info:	Phone: (702) 828-8267	Email: J13700P@LVMI	PD.COM									
6) CLASSIFICATION - Check the p	rimary intent	tion of the Pi	roposed Project:			Choose one:							
			ecently addressed this capa ects in this category must a										
MAINTAIN Project will MAINTA													
*All NEW projects are competitive	*All NEW projects are competitive PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.												
7) PROJECT OUTCOME - Describe Describe the desired outcome goal of th improvement at a high level; for example aligning with Nevada Commission on Ho capability); and <u>WHERE</u> (identify the geo	e Proposed Proje e: "To (establish, omeland Security	ect in terms of C improve, expar (NCHS) FFY18 p	APABILITY. The statement shond, double, sustain, etc.)]; <u>Or</u> riorities (See #10)]; FOR WHO	ould describ F WHAT CO (identify th	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPAI he direct users/beneficiar	BILITIES [consider ies of the							
Vegas valley. Although these lo risk by anyone wishing to disrupt remotely monitor these radio site (10) LVMPD maintained radio sit through the Milestone Video Mai	t public safety es. This proje tes and allow	radio comm ct would pro for 24/7 vide	unications in the Las Ve vide for the installation of	gas valle f IP-base	 y. There is currently d surveillance camer 	no way to as at the ten							
8) PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	l Emergency N	lanagement .	Agency (FEMA) list of Cor	e Capabil	lities and the Crosswa	alk of Target							
FFY19 Strategic Capacity Maintai		Not Applicabl											
HSGP Project Type Supporting Strat			-										
If OTHER, please choose FFY16-18 I			AL COORDINATION [Missi	ion Area -	ALL]								
Core Capability aligned with Mainta	ained Project:	Not Applicabl	e										
*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or							
9) STRATEGIC CAPACITY JUSTII justification of this project's alignment													
This project provides an effective communications in the Las Vega		4/7 video mo	nitoring of critical infrast	ructure n	ecessary for public s	afety radio							

leva	ıda Homeland Seci	urity Grant Progra	am (HSGP) RESUBMISSIO	ON	PROJECT ID:	DD					
roje	ect Proposal for FF	Y19 HSGP Fundin	g Description		Date Submitted	4/25/19					
OJI	ECT TITLE REFERENCE	: Radio Site Target	Hardening								
)	PROCUREMENT - Indica	ite the method of pro	curement associated with this	proje	ct:						
(Request for Proposal	Provide a brief explana	tion on your method of procurement	- FIELD	IS LIMITED TO VISIE	BLE TEXT BOX					
(Sole Source	Procurement will be thro camera equipment.	ugh existing LVMPD competitively	bid cor	ntracts for camera a	and related					
(Internal	camera equipment.									
			nd by whom, the Proposed Project		•	scribe					
г	. ,		shed, identifying who (i.e. staff, contractor		· · · · · · · · · · · · · · · · · · ·						
	All work will be completed Squad (TASS), and the Co		s of the Emergency Management S	ection,	Technical and Sur	veillance					
š	Receive Funding										
XIB	 System Design EHP submission 										
! !	 Bid Equipment 	-									
VISIB	5. Issue Purchasing Orde6. Procure Equipment										
070	7. Install Equipment										
FIELD IS LIMITED TO VISIBLE TEXT BOX											
IS FI											
IELD											
L											
	SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]										
		(FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	_	roject Representative (
1	Las Vegas Metropol	litan Police Department	Clark County	Christo	pher Tomaino						
1	.2(b)										
1	L 2 (c)										
)	SUSTAINMENT - Identify	anv continuing financial	obligation created by the Project, a	and pro	posed fundina solu	tion					
-			cost associated with this network.		, ,						
r BOX	, , , , , , , , , , , , , , , , , , ,	-,									
E TEX											
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ITED TO											
FIELD IS LIMITED TO VISIBLE TEXT BOX											
FIELD											
L											
			t's funding percentage makeup of Sto 5g - PROJECT TOTALS' on Page #3	atewid	e -vs- UASI is noted b	elow for					
1		_	Jy - FROJECT TOTALS UIT Puye #3								
	0% 100%	ó									

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT Proposal for FFY19 HSGP Funding Description Date Su

PROJECT ID: DD

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Radio Site Target Hardening

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be sp	LV-UASI	State-wide	SubTota
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-OASI	State-wide	3001016
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
Computer Server, Milestone Licenses, Network switches, (20) Surveillance Cameras, and miscellaneous cabling and mounts			
	\$ 50,000.00		\$ 50,000.
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTot
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: **Project Proposal for FFY19 HSGP Funding Description**

DD **Date Submitted** 4/25/19

PROJECT TITLE REFERENCE:

Radio Site Target Hardening

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	System Design	10/01/19	10/31/19	1
3	Bid Equipment	10/01/19	11/30/19	2
4	Issue Purchasing Request	10/01/19	10/31/19	1
5	Procure Equipment	11/01/19	11/30/19	1
6	Install Equipment	12/01/19	06/30/20	6
7				
8				
9				
10				
11				
12				_

SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.
Infrastructure for public safety radio communications are an enticing target for terrorists and would potentially delay public safety response to a terrorist or major event.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project would allow the SNCTC Fusion Center to remotely monitor these critical infrastructure sites from the SNCTC Fusion Center.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Once the main server and managed switch is operational, the camera installations at each of the 10 camera sites can be scaled individually by location.

Neva	ada H	omeland Se	curity	y Grant I	Program (H	SGP) RESUBMISS	SION	PROJECT ID:	DD				
Proj	ect Pr	oposal for F	FY19	HSGP F	unding Des	cription		Date Submitted	4/25/19				
PROJ	ECT TI	TLE REFERENC	E:	Radio Site	Target Hardeni	ng							
	d. C	an this project con	itinue w	ithout fundir	ng? YES No	O (Explain below.							
Fields "d" and "e" are limitied to visible text box size	There is	s currently no ide	ntified fu	unding sour	ce for this projec	rt.							
mitie	e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below. This provides target hardening of communications for the Las Vegas valley.												
Fields "d" and "e" are l	This pro	ovides target hard	lening o	f communic	cations for the La	s Vegas valley.							
18)	THIRA	COMPLETION -	Please	e indicate th	ne participation	level in completing the	2018 T	HIRA Survey. CHOO	SE ONE:				
	()	/ES - Agency HAS	S partic	ipated in th	e 2018 Threat a	nd Hazard Identification	n Risk As	ssessment (THIRA) Si	urvey				
						at and Hazard Identifica							
19)		IONAL COMME to the visible te		l - Please ii	ndicate any ado	litional project commen	ntary yo	u feel may be impor	tant. Field is				

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

	LINE ITEM DETAIL BUDGET												
	Agency Name	LVMPD	Project Manager Name & Contact # Sgt. Brad Cupp 702-828-4455 Grant Manager Name & Contact #			Joni Prucnal 702 828		DD					
	IJ TITLE:	Radio Site Hardening Project											
		One Budget Per Funding Stream											
		UASI										ļ	
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -				ļ	
3								\$ -					
4								\$ -					
	Personnel Sub-Total		DETAIL THE DOCUTIONS AND D			DE LIGED TO ENGLIDE ITEMS LIG		\$ -			DE BURGUACER OF		

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line#	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			4
19									-			4
20	Travel Sub-Total								-			
		DR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET										

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref #	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-					
28						-					
29							-				
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Cameras	New / Enhance / Past / Competitive		20.00	1,500.00	\$ 30,000.00		Operational Communications	04MD-01-VCAM	UASI
41		Camera Mounts	New / Enhance / Past / Competitive		10.00	200.00	\$ 2,000.00		Operational Communications	04MD-01-VCAM	UASI
42		Video Server	New / Enhance / Past / Competitive		1.00	3,500.00	\$ 3,500.00		Operational Communications	04HW-01-INHW	UASI
43		Network Switches	New / Enhance / Past / Competitive		10.00	100.00	\$ 1,000.00		Operational Communications	04HW-01-INHW	UASI
44		Surveillance Cabinets/Nema Boxes	New / Enhance / Past / Competitive		10.00	300.00	\$ 3,000.00		Operational Communications	04HW-01-INHW	UASI
45		Milestone Licenses	New / Enhance / Past / Competitive		10.00	500.00	\$ 5,000.00		Operational Communications	04SW-04-NETW	UASI
46		Managed Network Switch	New / Enhance / Past / Competitive		1.00	2,000.00	\$ 2,000.00		Operational Communications	04HW-01-INHW	UASI
47		Misc hardware and Cat 6 Outdoor cabling	New / Enhance / Past / Competitive		1.00	1,500.00	\$ 1,500.00		Operational Communications	04HW-01-INHW	UASI
48		Camera Midspans	New / Enhance / Past / Competitive		10.00	200.00	\$ 2,000.00		Operational Communications	04MD-01-VCAM	UASI
49	FOURDMENT Cub Total						\$ -				
	EQUIPMENT Sub-Total						\$ 50,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The above equipment provides us target hardening at our repeater sites. This will allow us to install 20 cameras and the necessary equipment.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			<u> </u>			<u> </u>				\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total		
					Request	\$ 50,00	00.00

Ne	vada Homeland Security	y Grant Pi	rogram (l	HSGP) RESUBMISS	ION	PROJECT ID:	EE
Pro	oject Proposal for FFY19	HSGP Fu	nding De	scription		Date Submitted	4/25/19
	PROJECT TITLE:	LVMPD DO		•			
2) F	PROPOSING/LEAD AGENCY:	Las Vegas N	Metropolitan I	Police Department			
3) F	Project Manager Name/Title:	Jason Letkie	ewicz				
F	Project Manager Contact Info:	Phone: (702	2) 828-2281	Email: j4657l@lvmpd.com	l		
4) 4	ddl Project Manager Name/Title:	Rachel Skid	more / Emer	gency Manager			
A	ddl Project Manager Contact Info:	Phone: (702	2) 828-2257	Email: r14590s@lvmpd.co	om		
5) F	inance/Grant Contact Name/Title:	Joni Prucnal	, Director of	Finance			
F	inance/Grant Contact Info:	Phone: (702	2) 828-8267	Email: J13700P@LVMPD	.COM		
6)	CLASSIFICATION - Check the p	rimary inten	tion of the Pi	roposed Project:			Choose one:
				ecently addressed this capabil ects in this category must alig			
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACITY*			0
	*All NEW projects are competitive						
7)	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and WHERE (identify the geo	e Proposed Proje e: "To (establish, meland Security	ect in terms of C improve, expar (NCHS) FFY18 p	APABILITY. The statement should nd, double, sustain, etc.)]; OF w riorities (See #10)]; FOR WHO (id	d descril /HAT CC dentify th	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPA the direct users/benefician	BILITIES [consider ies of the
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency N	/lanagement	Agency (FEMA) list of Core (Capabi	lities and the Crosswa	alk of Target
	FFY19 Strategic Capacity Maintai	ned*:	Not Applicabl	e			
	HSGP Project Type Supporting Strat	tegic Capacity:	OTHER				
	If OTHER, please choose FFY16-18 N	NCHS Priority:	OPERATION	AL COMMUNICATIONS [Miss	sion Are	ea - RESP]	
	Core Capability aligned with Mainta	ained Project:	Not Applicabl	е			
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment of						
	In the case of a MCI, one dispate enhance our ability to ensure tim involved jurisdictions, allowing for	ely communi	cation with co	ommand staff, personnel re			

leva	ida H	lomeland Secu	urity Grant Progra	am (HSGP) RESUBMISSI	ON	PROJECT ID:	EE
roje	ect P	roposal for FF	Y19 HSGP Fundin	g Description		Date Submitted	4/25/19
ROJE	CT TI	TLE REFERENCE:	LVMPD DOC Disp	patch			
				curement associated with this			
	_	uest for Proposal آ		tion on your method of procurement	t - FIEL	D IS LIMITED TO VISI	BLE TEXT BOX:
	_		Internal procurement will	таке ріасе.			
(Integrate	ernal					
•			· ·	nd by whom, the Proposed Project shed, identifying who (i.e. staff, contractor		•	scribe
r f o	manag furnitu	er. Manager Adam re, electrical, and da sary to support the c	Wittman of LVMPD's fac ta ports. IT Manager Jar	Police Department (LVMPD) Commilities section will work with the civined Grant will oversee the installation Puglia will oversee the installation	ilian co	ontractors on the ins all LVMPD Compute	tallation of the systems
2) S	SUB-G section	n is for you to tell u	CIPIENTS - Identify the IS WHO will be receiving (FD, PD, etc.)	e participating agency(s) and juris g the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's y	on(s) proposed for a ou, put in your age. Project Representative	ncy]
1	. 2 (a)		itan Police Department	Clark County		Letkiewicz	individualy
1	2 (b)						
	. 2 (c)						
_							
3) S	SUSTA	INMENT - Identify	any continuing financial	obligation created by the Project, a	and pr	roposed fundina solu	tion
· -		D will sustain.					
] 1) s	our co		unt is derived from Field '1	t's funding percentage makeup of St 5g - PROJECT TOTALS' on Page #3	atewi	de -vs- UASI is noted b	elow for

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: EE Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD DOC Dispatch

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
This equipment costs include radio, communications, cubicle, and desk equipment to make an additional dispatching position within the LVMPD DOC.	\$ 14,370.40	\$ 0.00	\$ 14,370.40
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description

Date Submitted

ΕE 4/25/19

PROJECT TITLE REFERENCE:

LVMPD DOC Dispatch

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Request Bids	01/01/20	12/31/20	12
3	Procure Equipment	01/01/20	12/31/20	12
4	Installation	01/01/20	12/31/20	12
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Yes, the LVMPD is the law enforcement agency that serves the largest population within the state of Nevada. Dispatching during a terrorism event is a critical function.
size	
visible text box	
ole te	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
are limitied to visil	This project meets the needs of Operational Communication, and Intelligence and Information as this resides within the Department Operations Center for LVMPD.
", and "c"	
"Q	c. Can this project funding request be reduced? Is it scaleable? YES NO (•) Explain below.
ds "a",	No, without some items the dispatch station would not function.

Vev	ada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	EE
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/25/19
PROJ	ECT TITLE REFERENCE:	LVMPD DOC Dispatch		
	d. Can this project continue w	ithout funding? YES NO 💿 Explain below.		
"e" are limitied to visible text box size	DOC is currently seeking funds	to enhance their capabilities during a response.		
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.	
Fields "d" and "e" are	We dispatch for the largest popu	llation served within the state of Nevada, yes.		
8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 To	HIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) S	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	l - Please indicate any additional project commentary yo	u feel may be impoi	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

	LINE ITEM DETAIL BUDGET												
	Agency Name	Las Vegas Metropolitan Police Department	Project Manager Name & Contact #	Jason Letkiewicz 8	28 7172	Grant Manager Name & Contact #	Joni Prucnal, 702 828 8267					EE	
	IJ TITLE:	DOC Dispatch											
		One Budget Per Funding Stream											
		UASI											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -					
2								\$ -		 		 	
3								\$ -		 		 	
	Personnel Sub-Total							\$ -					
PERSONN	IEL COST NARRATIVE REQUIRED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	FLIVERABLES	NARRATIVE WILL	BE USED TO ENSURE ITEMS LIS	STED WILL BE COM	IPI ETED IN THE	GRANT CYCLE -	ITEMS MAY NOT	BE PURCHASED OF	ITSIDE THE ITEM	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9		·										T
10												
11												
12												
13									-			
14									-			<u> </u>
15									-			+
16 17									-			+
18												+
19									-			+
20									-			1
21						İ			-			1
22									-			
23									-			
24									-			
25									-			
26									-			
27									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27											
28											
29											
30							-				
31							-				
32							-				
33			`				-				
34							-			·	
35			`								
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36										
37			·			, and the second				
38			•							
39			•							
	Organization Sub-Total		•				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		ocurement / See 2nd tab to determine whether ject requires EHP Screening										
40		Desk equipment	New / Enhance / Past / Competitive		21GN-00-OCEQ	2357.00	1.00	\$ 2,357.00			21GN-00-OCEQ Equipment and Supplies, Information/Emergen cy Operations/Fusion Centers	
41		Dispatching Equipment and Supplies	New / Enhance / Past / Competitive		06CP-01-BASE	5724.48	1.00	\$ 5,724.48				UASI
42		Cubicle extension and equpiment	New / Enhance / Past / Competitive		21GN-00-OCEQ	4232.81	1.00	\$ 4,232.81				UASI
43		Dispatching Computer Equipment	New / Enhance / Past / Competitive		04HW-01-INHW	2056.11	1.00	\$ 2,056.11				UASI
44								\$ -				
45								\$ -		-		
46 47							 	\$ -		 		
48								\$ -				
49								\$ -				
	EQUIPMENT Sub-Total							\$ 14,370.40				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$	
	Training Sub-Total					_					\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total		
					Request	\$ 14,370.40	0

Nevada Homeland Security	evada Homeland Security Grant Program (HSGP) RESUBMISSIC							
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19				
1) PROJECT TITLE:	LVMPD Wireless Mesh N	letwork and TRV Enhancement						
2) PROPOSING/LEAD AGENCY:	LVMPD							
3) Project Manager Name/Title:	Brad Cupp/Sergeant	Brad Cupp/Sergeant						
Project Manager Contact Info:	Phone: (702) 828-4455	Email: b8104c@lvmpd.com						
4) Addl Project Manager Name/Title:	Rachel Skidmore / Emerg	gency Manager						
Addl Project Manager Contact Info:	Phone: (702) 828-2257	Email: r14590s@lvmpd.com						
5) Finance/Grant Contact Name/Title:	Joni Prucnal, Director of F	inance						
Finance/Grant Contact Info:	Phone: (702) 828-8267	Email: J13700P@LVMPD.COM						
				01				

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

LVMPD is seeking to build out a valley-wide wireless mesh network to add direct live feeds into the command post and Department Operations Center. This project will allow video feeds captured from drones, robots, and other cameras to be streamed real-time to the SNCTC, DOC or a command post in the field.

Additionally, a small portion of this project will be utilized to add additional radios to the TASS TRV which would allow the vehicle to serve as a regional asset capable of deploying real-time video and integrating air-to-ground video feeds in an operational area to a command post for increased situational awareness.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

HSGP Project Type Supporting Strategic Capacity: Southern Nevada Counter Terrorism Center [FUSION]

If OTHER, please choose FFY16-18 NCHS Priority: | INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]

Core Capability aligned with Maintained Project: Not Applicable

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project provides the capability to ingest video feeds from disparate systems such as a drone into the Fusion Center or another command post in real-time. This capability currently doesn't exist in southern Nevada and will provide increased situational awareness and real-time video intelligence during a major incident.

roject Proposal for I			ON PROJECTID:	GG
oject i roposal foi i	FFY19 HSGP Fundin	g Description	Date Submitted	4/25/19
ROJECT TITLE REFERENCE	CE: LVMPD Wireless I	Mesh Network and TRV Enhancem	nent	
) PROCUREMENT - Indi	icate the method of pro	curement associated with this	project:	
Request for Proposa	al Provide a brief explana	tion on your method of procurement	- FIELD IS LIMITED TO VISIE	BLE TEXT BO
Sole Source		ed through existing LVMPD contract	ts or through the GSA pur	rchasing
Internal	program.			
) PROJECT IMPLEMENT	L [ATION - Describe how_ar	nd by whom, the Proposed Project	t will he implemented. De	escribe
		shed, identifying who (i.e. staff, contractor	•	
	ed by LVMPD and members Communications Bureau.	s of the Emergency Management S	ection, Technical and Sur	veillance
1. Receive Funding 2. System Design 4. Bid Equipment 5. Issue Purchasing Ord 6. Procure Equipment 7. Install Equipment 8. Equipment Testing	der			
	RECIPIENTS - Identify the	e participating agency(s) and juris	diction(s) proposed for a	uvondo ETI
section is for you to te	ll us WHO will be receivin	g the money for your project - If Political Jurisdiction (City County State atc.)		ncy]
section is for you to te	III us WHO will be receiving ncy (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (ncy]
section is for you to te	ll us WHO will be receivin	Political Jurisdiction (City, County, State, etc.)		ncy]
section is for you to te	III us WHO will be receiving ncy (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (ncy]
Agei 12(a) Las Vegas Metro	III us WHO will be receiving ncy (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (ncy]
Agei 12(a) Las Vegas Metro	III us WHO will be receiving ncy (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (ncy]
12(a) Las Vegas Metro 12(b) 12(c)	oll us WHO will be receiving ncy (FD, PD, etc.) politan Police Department	Political Jurisdiction (City, County, State, etc.) Clark County	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c)	oll us WHO will be receiving ncy (FD, PD, etc.) politan Police Department	Political Jurisdiction (City, County, State, etc.)	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c) SUSTAINMENT - Ident There is no subscription	tify any continuing financial	Political Jurisdiction (City, County, State, etc.) Clark County	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c) SUSTAINMENT - Ident There is no subscription	tify any continuing financial	Political Jurisdiction (City, County, State, etc.) Clark County obligation created by the Project, a	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c) SUSTAINMENT - Ident There is no subscription	tify any continuing financial	Political Jurisdiction (City, County, State, etc.) Clark County obligation created by the Project, a	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c) SUSTAINMENT - Identi	tify any continuing financial	Political Jurisdiction (City, County, State, etc.) Clark County obligation created by the Project, a	Project Representative (Christopher Tomaino	ncy] (individual)
12(a) Las Vegas Metro 12(b) 12(c) SUSTAINMENT - Ident There is no subscription STATEWIDE and/or U	It us WHO will be receiving the property of th	Political Jurisdiction (City, County, State, etc.) Clark County obligation created by the Project, a	Project Representative (Christopher Tomaino	ncy] (individual)

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: GG Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Wireless Mesh Network and TRV Enhancement

)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
	This equipment is for outfitting a smart network that includes network switches, software, mounting hardware, wi-fi dongles, fixed infrastructure site wireless network nodes, accessories, batteries, GPS broadcaster.	\$ 604,400.00		\$ 604,400.00
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	1			
	15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: GG

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Wireless Mesh Network and TRV Enhancement

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	System Design	10/01/19	10/31/19	1
3	Bid Equipment	10/01/19	10/31/19	1
4	Issue Purchasing Request	10/01/19	10/31/19	1
5	Procure Equipment	11/01/19	11/30/19	1
6	Install Equipment	12/01/19	06/30/20	6
7	Equipment Testing	12/01/19	06/30/20	6
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES () NO () Explain below.
Real-time disparate video footage could play a critical role in a terrorist attack in terms of providing real-time intelligence information back to a command post or the Fusion Center.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project would allow the SNCTC Fusion Center to ingest and monitor the real-time video feeds from assets that are deployed to in the field.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

Failure to build out adequate infrastructure would not provide the coverage area necessary to support the objective of this project.

Neva	ada Homeland Securi	ty Grant Program (HSGP) RESUBMISSION	PROJECT ID:	GG
Proj	ect Proposal for FFY1	9 HSGP Funding Description	Date Submitted	4/25/19
PROJ	ECT TITLE REFERENCE:	LVMPD Wireless Mesh Network and TRV Enhancement		
	d. Can this project continue	without funding? YES NO NO Explain below.		
Fields "d" and "e" are limitied to visible text box size	There is currently no identified	funding source for this project.		
mitie	e. Does this project provide	a MEASUREABLE statewide benefit? YES NO	Explain below.	
Fields "d" and "e" are l	Once the equipment is installed	d assets can be deployed anywhere in the state to provide t	hese capabilities if the	e needs arises.
18)	THIRA COMPLETION - Pleas	se indicate the participation level in completing the 2018	THIRA Survey. CHOC	SE ONE:
	YES - Agency HAS part	icipated in the 2018 Threat and Hazard Identification Risk A	Assessment (THIRA) S	<i>`urvey</i>
	NO - Agency has NOT	participated in the 2018 Threat and Hazard Identification F	Risk Assessment (THIR	A) Survey
171	ADDITIONAL COMMENTAI limited to the visible text box	RY - Please indicate any additional project commentary y	ou feel may be impo	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEMIDETAIL	BUDGET					
	Agency Name	LVMPD	Project Manager Name & Contact #	Sgt. Brad Ct 702-828-445		Grant Manager Name & Contact #	Joni Prucnal 702 828	8267			GG
	IJ TITLE:	Air to Ground Link/TRV Enhancement P	Project								
		One Budget Per Funding Stream									
		UASI	Previous								
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Type Hourly		% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			1
3								\$ -			1
4								\$ -			
	Personnel Sub-Total		IE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE LISE			\$ -					

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
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TRAVEL (R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	All EACH LINE ITEM AND DELIV	FRABLES NAF	RATIVE WILL BE U	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITEM	AS MAY NOT BE	PURCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.



Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
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35					_						
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$			
37			·			, and the second	\$ -			
38					-		\$ -			
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	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		Fixed Infrastructure Sites 4x4, 8W MiMO wireless network nodes, sector antennas, and cabling.	New / Enhance / Past / Competitive		12.00	28,100.00	\$ 337,200.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
41		Drones	New / Enhance / Past / Competitive		4.00	12,000.00	\$ 48,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	030E-07-ROVL	UASI
42		GPS broadcaster	New / Enhance / Past / Competitive		6.00	3,500.00	\$ 21,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
43		4x2, 4W MiMo Dismount kits w/ 2 batteries	New / Enhance / Past / Competitive		6.00	13,300.00	\$ 79,800.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
44		Misc Accessory cables	New / Enhance / Past / Competitive		1.00	4,500.00	\$ 4,500.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
45		MBITR Dual Battery Charger	New / Enhance / Past / Competitive		6.00	800.00	\$ 4,800.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
46		Fixed Infrastructure Sites 4x4, 8W MiMO Wireless Network Nodes	New / Enhance / Past / Competitive		4.00	25,000.00	\$ 100,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
47		Wi-Fi Dongle	New / Enhance / Past / Competitive		3.00	450.00	\$ 1,350.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
		Misc Mounting Poles and Brackets	New / Enhance / Past / Competitive		1.00	950.00		Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI

48		RF Interference Detection Software	New / Enhance / Past / Competitive		4.00	500.00		Fusion Center -	Intelligence and Information Sharing	04SW-04-NETW	UASI
49		Network Switches	New / Enhance / Past / Competitive		16.00	300.00	\$ 4,800.00	Fusion Center -	Intelligence and Information Sharing	04HW-01-INHW	UASI
	EQUIPMENT Sub-Total						\$ 604,400.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The above equipment is for outfitting a smart network that includes network switches, software, mounting hardware, wi-fi dongles, fixed infrasturcture site wireless network nodes, accessories, batteries, GPS broadcaster.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
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56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
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60			·							\$ -	
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	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					Budget Total		
					Request	\$ 604,400.0	00

	Nevada Homeland	l Secu	irity Grant Pr	ogram (HSGP)	PROJECT ID:	HH							
	Project Proposal for	FFY1	9 HSGP Fund	ling Description	Date Submitted	4/10/19							
1)	PROJECT TITLE:	Bomb	Squad Electronic (Countermeasures									
2)	PROPOSING/LEAD AGENCY:	Las Ve	egas Fire & Rescue	Bomb Squad									
3)	Project Manager Name/Title:	Richar	nard Brooks										
	Project Manager Contact Info:	Phone:	(702) 232-6417	Email: rbrooks@lasvegasnevada	ı.gov								
4)	Addl Project Manager Name/Title:	Stever	n Poe										
	Addl Project Manager Contact Info:	Phone:	Phone: (702) 303-0773 Email: sbpoe@lasvegasnevada.gov										
5)	Finance/Grant Contact Name/Title:	Priscilla	a Wdowiak										
	Finance/Grant Contact Info:	Phone:	(702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov	_							

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Las Vegas Fire & Rescue Bomb Squad is the only Federal Bureau of Investigations (FBI) accredited Bomb Squad in Southern Nevada that has the capability to operate electronic counter measures. The squad supports Clark, Esmeralda, Lincoln and Nye Counties. Las Vegas Fire & Rescue also provides support for St George, UT Bullhead City, AZ and surrounding areas.

The goal of this project is to improve and expand the Las Vegas Bomb Squad by supporting the National Priority of: "Strengthening Chemical, Biological, Radiological/Nuclear and Explosive (CBRNE) Detection, Response, and Decontamination Capabilities".

The Focus of this project and equipment is to prepare for and respond to hazardous device incidents, unmanned aircraft systems with improvised explosives and large vehicle borne explosives with electronics present. This equipment would assist the Bomb Technicians by decreasing the mortality rate and increasing the survivability during hazardous device responses and unmanned aircraft system incidents.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

HSGP Project Type Supporting Strategic Capacity: Las Vegas Bomb Squad [CBRN,E]

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This specialized equipment is not generally budgeted in capital or general funds. Its necessity is specific to meeting our region's needs due to the terror threat level for our community. Equipment will be maintained by Las Vegas Fire and Rescue until it has reached end of useful life in approximately 7-10 years. The proposed equipment is a technological enhancement for current equipment. These electronic countermeasure devices will be used to defeat hazardous devices that are using unmanned aircraft systems and electronic component to arm or trigger hazardous devices activation. This provides physical protective measures by determining safe zones and areas of exclusion. This information also equips Incident Commanders with critical information needed to protect their personnel and public at-large.

PROJECT ID: HH

Date Submitted 4/10/19

PROJECT TITLE REFERENCE:

Bomb Squad Electronic Countermeasures

10)	PROCUREMENT -	Indicate the method	of procurement	associated with t	this project:
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Request for Proposal

Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:

O Sole Source

Internal

FIELD IS LIMITED TO VISIBLE TEXT BOX

Requested equipment will require an RFP (Request for Proposal). This process is time consuming, but a requirement to ensure funds are used most effectively. Once there is a qualified bidder, the Project Manager will proceed with the procurement process.

11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe

in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

Upon award and acceptance by City Council, project implementation will be conducted by Steven Poe, Richard Brooks and consist of procurement, training and delivering of the equipment to the Las Vegas Fire & Rescue Bomb Squad.

Requested equipment will require an RFP (Request for Proposal). This process is time consuming, but a requirement to ensure funds are used most effectively.

Once there is a qualified bidder, the Project Manager will proceed with the procurement process. Upon receipt, the Project Manager will ensure adequate training is conducted and equipment distributed to assigned units.

Quarterly Financial and Progress reports will be submitted to Nevada Department of Emergency Management as required by state grant assurances until the project has reached its conclusion.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

,	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12 (a)	Las Vegas Fire & Rescue	City of Las Vegas, NV	Richard Brooks
12 (b)			
12 (c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

Since this project is for the acquisition of equipment only, there are no ongoing sustainment expenses projected after the original purchase. The vendor will provide training as well as future software upgrades. Las Vegas Fire & Rescue general funds will be used to cover any expenses for maintenance, repairs or updates to the equipment purchased. Maintenance, repairs and updates to equipment is a widely accepted general fund allowance under government entities.

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

0%

FIELD IS LIMITED TO VISIBLE TEXT BOX

100%

Statewide Urban Area
(SHSP) (UASI)

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY19 HSGP Funding Description**

PROJECT ID: ΗН Date Submitted 4/10/19

PROJECT TITLE REFERENCE:

Bomb Squad Electronic Countermeasures

15a)	Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
				\$ 0.00
15b)	Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
				\$ 0.00
15c)	Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Disak enem devid	andheld Counter-Unmanned Aircraft System RF Sensor & Effector bles Unmanned Air Vehicles. Allows for bomb squads to thwart criminals and nies the use of drones for surveillance and direct attacks to activate hazardous ces. also be used to disable a drone being operated in restricted air space or when a e is interfering with their operations.	\$ 70,170.00		\$ 70,170.00
15d)	Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
				\$ 0.00
15e)	Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
				\$ 0.00
15f)	Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
15f)	Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00
	Personnel [Staff (not contractors) directly implementing project and programmatic capability] PROJECT TOTALS	LV-UASI	State-wide State-wide	

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: HH

Date Submitted 4/10/19

PROJECT TITLE REFERENCE:

Bomb Squad Electronic Countermeasures

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funding Received / Purchase Order Received	09/01/19	12/01/19	3
3	Bid/Order Equipment	09/01/19	12/01/19	3
4	Receive Equipment	12/01/19	03/01/20	3
5	Conduct User Training	03/01/20	04/01/20	1
6	Distribute Equipment	04/01/20	05/01/20	1
7				
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12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The Handheld Counter-Unmanned Aircraft System RF Sensor & Effector disables Unmanned Air Vehicles. Allows CBRNE task forces to thwart criminals and enemies the use of drones for surveillance and direct attacks to activate hazardous devices and improvised explosive devices (IEDs) on personnel.

Can also be used by First Responders and others to disable a drone being operated in restricted air space or when a drone is interfering with their operations.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Operational Coordination cannot be effectively achieved when the threat is an unknown. By sustaining the Las Vegas Fire and Rescue Department's capability to identify and defeat unmanned aircraft, the unknown become known and Unified Command is armed with the information necessary to make critical life and death decisions.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Although this project cannot officially go to bid until funding is assigned, the price is set for this unit unless 100 or more is purchased. The Project Manager is committed to leveraging the best pricing and can request reductions in the amount of units requested. The quantity of (6) each is the amount of units for deployment of (3) fully and properly equipped bomb squad teams.

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: HH

Date Submitted 4/10/19

PROJECT	TITL	E REI	FERE	NCE:
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Fields "d" and "e" are limitied to visible text box size

Bomb Squad Electronic Countermeasures

d. Can this project continue without funding? YES NO (Explain below.

This project will only move forward if it has the support and funding from the Nevada Homeland Security Grant Program (HSGP).

e. Does this project provide a MEASUREABLE statewide benefit?

YES NO Explain below.

This project is a continuing endeavor undertaken by the Las Vegas Fire & Rescue Bomb Squad, Federal Bureau of Investigations, and its community partners to create a unique asset that would provide service and support to all of southern Nevada in the event of an unmanned aircraft system hazardous device deployment, improvised explosive device with active assailants and chemical, biological, radiological nuclear devices (CBRNE). This project is unique in that it is not a routine operation. The project is characterized by well-defined parameters, specific objectives, common benefits, planned activities, a scheduled completion date, and an established budget with a specified source of funding.

- 18) THIRA COMPLETION Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:
 - YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
 - NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- 19) ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

This equipment would allow for (3) specialized Bomb Squad Teams to respond simultaneously to calls for service. These teams would consist of personnel from Las Vegas Fire & Rescue Bomb Squad, Federal Bureau of Investigations and its community partners allowing the teams to respond to prevent initial or follow-up on terrorist attacks. This equipment would also allow the Las Vegas Bomb Squad to conduct counter-terrorism operations in up to (3) separate locations.

The equipment that is being requested is extremely unique and Las Vegas Fire & Rescue Bomb Squad is the only authorized Bureau in Southern Nevada to obtain and operate this equipment. Although Las Vega Fire and bomb Squad and it's community partners have "made it work" in the past without this equipment, incidents in the US and abroad can no longer be tolerated. This is a vital piece of equipment that is needed in the Las Vegas Valley.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

	LINE II EM DE I ALL BUDGE I											
	Agency Name	Las Vegas Fire & Rescue Bomb Squad			Grant Manager Name & Contact #	Priscilla Wdowiak 702-229-6045					нн	
	IJ TITLE:	Electronic Countermeasures										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ -				
4								\$ -				
	Personnel Sub-Total							\$ -				
PERSON	IEL COST NAPPATIVE PEOLIPER	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND I	ELIVEDABLES	NADDATIVE WILL	DE LISED TO ENGLIDE ITEMS LIS	STED WILL BE COM	ADI ETED IN THE	CDANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITSIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
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	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.



Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
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32							-			
33							-			
34										
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					i	-	\$ -			
37			·				\$ -			
38							\$ -			
39					•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40	Handheld Counter-UAS RF Sensor & Effector	squads to thwart criminals and enemies the use of drones for surveillance and direct attacks to activate hazardous devices. Can also be used to disable a drone being operated in restricted air space or when a drone is interfering with their operations.	Maintain	UASI	2.00	35,085.00	\$ 70.170.00	CBRNE - Las Vegas Bomb Squad	Operational	02EX-03-ELCM Equipment, Electronic Countermeasures	UASI
41							\$ -				
42				ļ			\$ -				
43				1			\$ -	 	 		
45							\$ -	<u> </u>	1		
46							\$ -				
47							\$ -				
48							\$ -				
	EQUIPMENT Sub-Total						\$ 70,170.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56						·					\$ -	
	Training Sub-Total										\$	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			<u> </u>			·				\$ -	
60										\$ -	
61			<u> </u>							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

				Budget Total	
1				Request \$	70.170.00

Nevada Homeland Security	Grant Progr	am (ł	HSGP) RES	SUBMISSION	PROJECT ID:	II								
Project Proposal for FFY19	HSGP Fundir	ng De	scription		Date Submitted	4/25/19								
) PROJECT TITLE:	Washoe County Sheriff's Office - Air Purifying Respirators and SCBA													
PROPOSING/LEAD AGENCY:	Washoe County S	Sheriff's	Office											
Project Manager Name/Title:	Lt. Phil Jones													
Project Manager Contact Info:	Phone: (775) 321	-4940	Email: pjones	@washoecunty.us	3									
) Addl Project Manager Name/Title:														
Addl Project Manager Contact Info:	Phone: Email:													
) Finance/Grant Contact Name/Title:	Laura Daniels	Laura Daniels												
Finance/Grant Contact Info:	Phone: (775) 328	-3013	Email: Idanie	ls@washoecounty	.us									
) CLASSIFICATION - Check the pl	rimary intention o	f the Pr	roposed Proje	ct:		Choose one:								
					thin the past five years; NCHS FY16-18 prioritie	_								
MAINTAIN Project will MAINTA	IN AN APPROVED F	FY19 ST	RATEGIC CAPAC	CITY*		0								
*All NEW projects are competitive														
Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hoccapability); and <u>WHERE</u> (identify the geo	e: "To (establish, improvened meland Security (NCHS) graphic locale; example	ve, expan) FFY18 pi e: state-w	nd, double, sustai riorities (See #10) vide, LV Urban Ar	n, etc.)]; OF WHAT C ()]; FOR WHO (identify the ea, NE NV, or Reno, etc.)	ORE CAPABILITY (or CAPA the direct users/beneficiar c.]. FIELD IS LIMITED TO V	BILITIES [consider ries of the VISIBLE TEXT BOX.								
response to Chemical, Biological Washoe County Sheriff's Office (The desired outcome for the Nevada Homeland Security Grant Program (HSGP) grant is to continue the effective and safe response to Chemical, Biological, Radiological, High-Yield Explosive and Nuclear (CBRNE) related terrorism. Currently Washoe County Sheriff's Office (WCSO) has Air Purifying Respirators (APR's) that are out of date and will not be suitable to use during any CBRNE related terrorism incident.													
	The HSGP funding will help provide the WCSO with new, updated, APR's. This will strengthen, the ability of WCSO personnel to safely respond, contain and rescue citizens involved in a CBRNE related incident.													
The upgrades to the WCSO APR WCSO needs these APR's to sur Progress on the above objective will further develop prevention, re Nevada's Public Safety agencies Nevada's Public agencies, to inc	stain and strengthe will continue througesponse equipments with the appropria	en CBRI gh appl t capac ate equi	NE prevention ying funds to r ity, and proted pment to aded	n, deterrence and remeet the needs for trive equipment. Truetly prepare for	esponse. first responders. Eq his component is key a CBRNE incident.	ually, the gran to equipping								
PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities he	Emergency Manag	ement A	Agency (FEMA) list of Core Capab	ilities and the Crosswa	alk of Target								
FFY19 Strategic Capacity Maintai	ned*: Not A	Applicable	e											
HSGP Project Type Supporting Strat	egic Capacity: OTHE	ER												
If OTHER, please choose FFY16-18 N	,			TION [Mission Area -										
Core Capability aligned with Mainta	ined Project: ENV	RESPO	NSE/HEALTH A	ND SAFETY [Missio	n Area - RESP]									
*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or								
STRATEGIC CAPACITY JUSTIF justification of this project's alignment v														
N/A														

roje	ect Proposal for FFY	T9 HSGP Fur	naing Description	Date Submitted	4/25/19				
ROJE	ECT TITLE REFERENCE:	Washoe Cou	unty Sheriff's Office - Air Purifying Resp	irators and SCBA					
D) F	PROCUREMENT - Indicat	e the method o	f procurement associated with thi	s project:					
(Request for Proposal	Provide a brief ex	planation on your method of procuremen	nt - FIELD IS LIMITED TO VISIE	BLE TEXT BOX				
(O Sole Source	II purchases will a	abide by the Washoe County Grants Pu	rchasing Guidelines					
(Internal								
•	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work								
	The proposed project will be implemented by the WCSO by supplying the entire Agency with 100 APR's with filters and voice projection, 50 Replacement SCBA Bottles, 55 Medium Face Shields, and 55 Interface Voice Amplifier which our currently expired.								
EX	With any award money, the WCSO will be able to purchase new, reusable APR's along with SCBA equipment our first responders can utilize when deploying hazardous materials teams thus implementing this project into our CBRNE and WMD response.								
TO VISIBI	The Special Operations Division is called upon to assist neighboring counties in need of our capabilities. This equipment will allow us the ability to assist rural areas who may not have the training or equipment for these events.								
IMITED									
7 \$1 0									
FIELD									
L									
			fy the participating agency(s) and juri ceiving the money for your project - h						
•	•	D, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (
1	Washoe County Sher		Washoe County	Lt. Phillip Jones	•				
1	12(b)								
1	13(a)								
	12(c)								
	CLICTAININAENIT			16 11 1					
´ -			ancial obligation created by the Project,						
	The maintenance of the APF Office.	Rs and SCBAs pu	rchased with these funds will be mainta	ined by the Washoe County	y Sheriff's				
TEXT E									
SIBLE									
D 70 V									
FIELD IS LIMITED TO VISIBLE TEXT BOX									
SIGT									
FIE									
4)	STATEWIDE and/or IIASI	RENEELT - Your	project's funding percentage makeup of S	tatawida us IIASI is notad h	alow for				
•			ield '15g - PROJECT TOTALS' on Page #3	tutewide -vs- OASI is noted b	elow joi				
	100% 0%								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1							

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: **Project Proposal for FFY19 HSGP Funding Description**

Ш Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office - Air Purifying Respirators and SCBA

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	cific. Identify (UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
This investment will follow the same planning we have in place for our existing APR's and SCBA's. The Fire Safety Officer and the Special Operations Division will be in charge of organizing the APR's and getting them distributed to Special Operations The Fire Safety Officer will also ensure that everyone in Special Operations has an APR in the event there will be a CBRNE or WMD attack. The fire safety officer will ensure the SCBA replacement bottles along with masks are distributed needed units.			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
The Washoe County Sheriff's office was established in 1861. The Washoe County Sheriff's Office provides law enforcement services for the unincorporated area of Washoe County. We also are responsible for operating the only adult detention facility for pretrial detainees and sentenced misdemeanants within Washoe County. The Sheriff's Office is divided into three Bureaus. While each Bureau has a unique function, they impact the operation of the other Bureaus. The Washoe County Sheriff's Office strives to ensure public safety by building trust and creating partnerships within the diverse communities in which we serve.			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
The following equipment requested as a replacement due to expiration, physical condition or outdated: 140 APR's with filters and voice projection. 60 Replacement SCBA Bottles 60 Medium Face Shields 60 Interface Voice Amplifier		\$ 190,160.00	\$ 190,160.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Provided training for APR's is given to all first responders with the WCSO. SCBA Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving Operations Division new, updated equipment.			\$ 0.00
Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving	LV-UASI	State-wide	\$ 0.00 SubTotal
Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving Operations Division new, updated equipment.	LV-UASI	State-wide	
Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving Operations Division new, updated equipment. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] The investment will enable the WCSO to exercise and continue emphasis on our regional Special Operations response capacity to CBRNE and WMD attacks for our and rural counties. The investment will also improve our capabilities against advanced CBRNE and WMD attacks with newer equipment provided that can	LV-UASI	State-wide State-wide	SubTotal
Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving Operations Division new, updated equipment. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] The investment will enable the WCSO to exercise and continue emphasis on our regional Special Operations response capacity to CBRNE and WMD attacks for our and rural counties. The investment will also improve our capabilities against advanced CBRNE and WMD attacks with newer equipment provided that can withstand the new advanced types of agents that the WCSO can come in contact.			SubTotal \$ 0.00
Training provided to all Special Operations people. Continued training will also be an option for all first responders at the WCSO with this investment. This investment will also give our Agency the capability of giving Operations Division new, updated equipment. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] The investment will enable the WCSO to exercise and continue emphasis on our regional Special Operations response capacity to CBRNE and WMD attacks for our and rural counties. The investment will also improve our capabilities against advanced CBRNE and WMD attacks with newer equipment provided that can withstand the new advanced types of agents that the WCSO can come in contact. 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] The personnel that will be implementing the project will be the Fire Safety Officer and the Administrative Support Unit to maintain and distribute all the new APR's and			\$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: | I | Date Submitted | 4/25/19

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office - Air Purifying Respirators and SCBA

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funds accepted after BCC approval	10/01/19	12/31/19	3
3	Obtain quotes and necessary purchasing documents	01/01/20	01/31/20	1
4	Purchase APR's and Filters for the APR's	02/01/20	03/01/20	1
5	Receive and distribute APR's and Filters to Special Operations staff.	03/01/20	04/30/20	2
6	Purchase SCBA bottles with Masks and Voice Piece	05/01/20	05/31/20	1
7	Receive and distribute SCBA bottles and new masks with voice piece	06/01/20	08/31/20	3
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The WCSO Special Operations Division, whom are first responders, will need APR's and SCBA's that can withstand CBRNE agents that would be distributed in the areas that the first responders respond to.

These types of attacks are known to be conducted by terrorist organizations or during active shooting events. When there is a terroristic attack that falls under a CBRNE or WMD incident which could cause substantial disruption to our emergency services, our first responders at the WCSO will need adequate and proper equipment as their first line of defense against these types of terroristic attack.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Terrorism and Active Shooting events have seen a recent increase in threats and possible attacks. This proposal addresses the response to suspected incidents when they occur. The immediate preservation of life and property is critical during a CBRNE or WMD event and it is also critical to have the proper equipment for first responders that is in good condition and usable during these types of events.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The requested funding can be reduced at various levels and still remain effective, however, the WCSO Special Operations Division responders response will be limited to only a select few that would have adequate APR's and SCBA's in the event there is a CBRNE or WMD event.

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID:									
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/25/19					
PROJ	ECT TITLE REFERENCE:	Washoe County Sheriff's Office - Air Purifying Respirators	and SCBA						
	d. Can this project continue v	vithout funding? YES () NO () Explain below.							
Fields "d" and "e" are limitied to visible text box size	The project can continue without proposed funding, however, it will come with substantial risks. The elimination of funding would critically damage the capability to respond to CBRNE or WMD events due to the WCSO Special Operations Division not having the capability to give its first responders all of the necessary equipment to protect them during terroristic events. SWAT, EOD, K9 and other levels of Special Operations are the first line of controlling the spreading of these types of events.								
e. Does this project provide a MEASUREABLE statewide benefit? YES • NO Explain below.									
Fields "d" and "e" are l	event there is a terroristic attack	CSO Special Operations Division to be fully equipped for a Ck or a contaminated active shooter event, in the Washoe Coupe prepared to respond and help victims and contain the area	unty Community or su						
18)	THIRA COMPLETION Place	a indicate the participation level in completing the 2010 T	TUDA Survey CUOO	SE ONE.					
10)		e indicate the participation level in completing the 2018 T	<u> </u>						
	YES - Agency HAS partion	cipated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) S	urvey					
	NO - Agency has NOT p	participated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR)	A) Survey					
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	u feel may be impor	tant. Field is					
	The WCSO has committed full related criminal activity.	time Special Operations law enforcement personnel to response	and investigate a	ny terroristic					
		ire highly advanced equipment that are capable to combat the to our community and surrounding areas.	ne rapidly changing to	erroristic					
It is imperative that the WCSO Special Operation responders have the proper equipment available to them at all time their response to be efficient and affective during acts of terrorism. If this agency does not have adequate APR's or to use during a WMD attack or a CBRNE incident, it will prevent our Special Operations first responders from protein helping the citizens of Washoe County and its surrounding areas.									

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

			1		II LIVI DEI AIL	BODOLI					
	Agency Name	Washoe County Sheriff's Office	Project Manager Name & Contact #	Lt. Phillip Jo 4940		Grant Manager Name & Contact #	Laura Daniels, 775-3	128-3013			II
	IJ TITLE:	WCSO APRs & SCBAs									
		One Budget Per Funding Stream									
		Select Funding Stream									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.							-		
1								\$ -			
2								\$ -			
4								\$ -			
	Personnel Sub-Total							¢ -			

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16 17									-			
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23									-			
24									=			
25				•					-			
26									-			
27									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.



Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		•				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		ocurement / See 2nd tab to determine whether ject requires EHP Screening										
40		APRs with Filters and Voice Projection	New / Enhance / Past / Competitive	Local Funds		140.00	550.00	\$ 77,000.00		Operational Coordination	01AR-02-APR Respirator, Air- Purifying, Full-Face, Tight-Fitting, Negative Pressure, CBRN	SHSP
41		SCBA Bottles	New / Enhance / Past / Competitive	Local Funds		60.00	1,100.00	\$ 66,000.00		Operational Coordination	01AR-01-SCBA SCBA, CBRN	SHSP
42		Medium Face Shield	New / Enhance / Past / Competitive	Local Funds		60.00	250.00	\$ 15,000.00		Operational Coordination	01AR-02-APR Respirator, Air- Purifying, Full-Face, Tight-Fitting, Negative Pressure, CBRN	SHSP
43		Radio Direct Voice Amplifier	New / Enhance / Past / Competitive	Local Funds		60.00	536.00			Operational Coordination	06CP-04-WADN Network, Wide Area Digital	SHSP
44					•			\$ -				
45 46								\$ - \$ -	 	 		
46								\$ -	 			
48								\$ -				
49								\$ -				
	EQUIPMENT Sub-Total							\$ 190,160.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

nucetment will enable the WCSO to exercise and continue amphasis an every	colonal Special Operations response capacity to CRDNE and WMD attacks for our and unal countries. The investment will also improve our capabilities against advanced CRDNE and WMD attacks with source agricument would
ivestment will enable the WCSO to exercise and continue emphasis on our reithstand the new advanced types of agents that the WCSO can come in contributions of the contribution of the con	egional Special Operations response capacity to CBRNE and WMD attacks for our and rural counties. The investment will also improve our capabilities against advanced CBRNE and WMD attacks with newer equipment provide act.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your proj	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57		curement / See 2nd tab to determine whether ject requires EHP Screening										
58	your pro	ject requires EHP Screening									\$ -	+
59											\$ -	
60											\$ -	
61			•								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total Request	\$ 190,160,00	

Nevada Homeland Security	y Grant Program (ł	HSGP) RESUBMISSION	PROJECT ID:	JJ
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/24/19
1) PROJECT TITLE:	Metropolitan Medical Res	ponse System (MMRS) - NEW		
2) PROPOSING/LEAD AGENCY:	City of Las Vegas - Depa	rtment of Fire & Rescue		
3) Project Manager Name/Title:	Chris Sproule, Chief MMF	RS Coordinator		
Project Manager Contact Info:	Phone: (702) 303-0968	Email: csproule@lasvegasnevad	a.gov	
4) Addl Project Manager Name/Title:	Craig Cooper, Battalion C	Chief; Karl Rosette, Fire Training (Officer (702) 383-288	38
Addl Project Manager Contact Info:	Phone: (702) 236-9597	Email: ccooper@lasvegasnevad	a.gov; krosette@las	vegasnevada∎
5) Finance/Grant Contact Name/Title:	Priscilla Wdowiak			
Finance/Grant Contact Info:	Phone: (702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov	·

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal of this project is to enhance the Metropolitan Medical Response System (MMRS) and support the 2019 Strategic Capacity of CBRNE and the following Core Capabilities: Public Health, Healthcare, and Emergency Medical Services, Critical Transportation, and Mass Care Services.

MMRS supports the integration of law enforcement, fire, emergency management, health, and medical systems into a coordinated response to a mass casualty incident caused by a WMD, an incident involving hazardous materials, an epidemic disease outbreak, or natural disaster. The focus of the program is to decrease morbidity and mortality, and to increase survivability, during those first critical hours following a disaster. MMRS enhances the response and management capabilities, and improves the existing local operational systems of a community before an incident occurs.

MMRS achieves this mission by creating an operational system at the local level intended to respond to and manage the first 24-96 hours of any event that creates mass casualties, or casualties requiring unique care capabilities, until State or Federal response resources become available. MMRS creates this operational system by developing plans, conducting training and exercises, and acquiring pharmaceuticals, personal protective equipment, and other specialized response equipment.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: Not Applicable HSGP Project Type Supporting Strategic Capacity: OTHER If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: MASS CARE SERVICES [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

MMRS is an existing program that is in alignment with the 2019 Strategic Capacity of CBRNE and supports the response and management of an MCI caused by a CBRNE incident. It also supports the following:

Critical Transportation by providing Gators for special events for better deployment, enhanced mobility, and the strengthened ability to provide medical aid during a MCI.

Public Health, Healthcare, and Emergency Medical Services and Mass Care Services by providing Stingray Poleless Litters, Individual First Aid Kits (IFAK), and ballistic PPE to first responders rendering aid in a hostile environment.

vaua	Homeiand Sect	anty Grant Fic	graffi (11301) KE30bivi	IISSIUN	I NOJECT ID.	JJ
oject P	Proposal for FF	Y19 HSGP Fund	ding Description		Date Submitted	4/24/19
DJECT T	TITLE REFERENCE:	Metropolitan N	Medical Response System (MMR	S) - NEW		
PROC	CUREMENT - Indica	te the method of	procurement associated wit	h this proj	ect:	
⊙ Re	equest for Proposal	Provide a brief exp	lanation on your method of procur	rement - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX
O So			will go to bid or request for prop			
O Int	ternal	in accordance with the	he City of Las Vegas purchasing	process an	d NVDEM requireme	nts.
	L	TION 8 " '		- · · · · · · · · · · · · · · · · · · ·		
			v, and by whom, the Proposed I omplished, identifying who (i.e. staff, co	-	•	scribe
	· · · · · · · · · · · · · · · · · · ·		ct Manager and will be responsib		<u> </u>	-l -ll
requir	rements are met with	fiscal integrity and a	ce of Emergency Management a oppropriate accountability and doc	cumentation		
	on is for you to tell u		the participating agency(s) and iving the money for your projet Political Jurisdiction (City, County, Stat	ect - If it's y		ncy]
12 (a)	Las Vegas Fire & Re	escue	City of Las Vegas		Sproule (Primary), C nate), Karl Rosette (
12 (b)						
` '						
12 (c)						
Susta		ecurring costs will inc	cial obligation created by the Proclude transferring these costs from the services.			

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: JJ

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Metropolitan Medical Response System (MMRS) - NEW

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
13a) 1 Idining [Development of policies, plans, procedures, matual and agreements, strategies]		State wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
EMS Special Event Gators: 2-LVFR, 2-CCFD Rural, (4@\$30,000) \$120,000 Stingray Poleless Litter: (140@\$150) \$21,000 Individual First Aid Kit (IFAK) (60@\$150) \$9,000 Ballistic Helmets (175@\$325) \$56,875 Ballistic Vests (25@\$85) \$2,125 Ballistic Vest Steel Plates (175@\$190) \$33,250 Ballistic Equipment Bags (25@\$50) \$1,250	\$ 243,500.00		\$ 243,500.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: JJ

Date Submitted 4/24/19

PROJECT TITLE REFERENCE:

Metropolitan Medical Response System (MMRS) - NEW

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Spec. Equipment	01/01/20	02/01/20	1
3	Conduct RFP for equipment	02/01/20	06/01/20	4
4	Purchase equipment	06/01/20	07/01/20	1
5	Receive and inventory equipment	07/01/20	08/01/20	1
6	Interlocal Agreements in place for equipment transfers as appropriate	03/01/20	07/01/20	4
7	Distribute Equipment	08/01/20	09/01/20	1
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project have a nexus to terrorism? YES	5 6) NO (Explain below.
a.	Dues this project have a nexus to terrorish; TE) (I	י טעו עי) Explain be

The MMRS Program was created in 1996, in response to the Tokyo mass transit Sarin gas attack by Aum Shinrikyo and the domestic terrorist bombing of the Alfred P. Murrah Building in Oklahoma City, both having occurred in 1995. The MMRS program assists Nevada in developing plans, conducting training and exercises, and acquiring pharmaceuticals and personal protective equipment to achieve the enhanced capability necessary to respond to a mass casualty incident caused by a WMD terrorist act, an incident involving hazardous materials, an epidemic disease outbreak, or a natural disaster. This assistance supports the jurisdictions' activities to increase their response capabilities during the first hours crucial to lifesaving and population protection, with their own resources, until significant external assistance can arrive.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

MMRS is an existing program that is in alignment with the 2019 Strategic Capacity of CBRNE and supports the response and management of a mass casualty incident caused by a CBRNE incident.

c. Can this project funding request be reduced? Is it scaleable? YES
NO Explain below.

Yes, equipment could be eliminated or reduced.

Neva	ada	Home	eland	Sec	urity	/ Grai	nt Pro	ogram	n (HS	GP) R	RESUBIV	IISSION	PRC	JECT ID:	JJ
Proj	ect F	Propo	sal fo	or FF	Y19	HSG	P Fun	iding [Descr	riptio	n		Date	Submitted	4/24/19
PROJ	ECT 1	TITLE F	REFERI	ENCE	•	Metro	politan	Medical	Respo	nse Sys	stem (MMF	RS) - NEW			
	d.							YES 🢽	_		lain below.	1			
Fields "d" and "e" are limitied to visible text box size	Yes,	the MM	RS pro	gram (can co	ntinue v	without	any enh	nancem	ent.					
mitie	e.	Does th	nis proje	ct pro	vide a I	MEASUI	REABLE :	statewid	le benef	it?	YES (NO 🔘 E	xplain b	elow.	
Fields "d" and "e" are	Yes, t	this proj	ect has	a stat	ewide	benefit	t with de	eployabl	le asset	ts and a	appropriate	lly trained a	nd equi	pped person	nel.
18)	THIR	A CON	1PLETIC	ON - /	Please	indica	ite the p	participa	ation le	evel in c	completing	the 201 8 7	THIRA S	iurvey. CHO	OSE ONE:
	•	YES -	Agency	, HAS	partici	ipated i	in the 2	2018 Thre	eat and	d Hazarı	d Identific	ation Risk A	ssessm	ent (THIRA) :	Survey
		NO	Agency	has ∧	ІОТ ра	articipa	nted in t	he 2018	? Threat	and Ho	azard Iden	tification Ri	sk Asse	ssment (THII	RA) Survey
171		ITIONA ed to th				' - Plea	ase indi	cate any	y additi	ional pr	roject com	mentary yo	ou feel i	may be impo	rtant. Field is
	discre Activi follov	ete grar ities fun ving coc	nt progra ded und ordination	ams w der the on req	rithin F ese pro uireme	ISGP, S ojects n ents will	SAAs m	nay included the along the contract the along the contract the contrac	ide IJs f illowabi	funding lity requ	to support uirements o	CCP and Not the SHSP	MRS and U	are no longe activities/prog ASI programs casualty incid	rams. s. The
												NOFO), Fisc 47 of 100.		⁻ 2018 Home	and Security

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					IEWIDEIAILI	JUDULI						
	Agency Name	City of Las Vegas - Department of Fire & Rescue	Project Manager Name & Contact #	Primary: Chris S 702.303.0968; A 702.236.9597 / I 702.383.2888	ilt.: Craig Cooper	Grant Manager Name & Contact #	Chris Sproule 702	2-303-0968				JJ
	IJ TITLE:	Metropolitan Medical Response System	- NEW									
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3							 	\$ -		-		+
4							†	\$ -				†
	Personnel Sub-Total							\$ -				
DEDCOM	IEL COST NABBATIVE BEGLIBE	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOCITIONS AND D	ELIVEDADI EC. I	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMS LIC	TED WILL DE CON	IDLETED IN THE	CRANT CYCLE	ITEMS MAY NOT	DE BURGUACER OF	ITCIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			<u> </u>
12									-			<u> </u>
13									-			
14									-			
15									-			<u> </u>
16									-			<u> </u>
17									-			1
18									-			
	Travel Sub-Total								-			

LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #		PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-				
28						-	•			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39			•				\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY. MO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		Stingray Poleless Litter	New / Enhance / Past / Competitive	UASI	140.00	150.00	\$ 21,000.00		Public Health and Medical Services	09ME-05-LITR Litters/Stretchers	UASI
41		EMS Special Event Gators	New / Enhance / Past / Competitive	UASI	4.00	30,000.00	\$ 120,000.00		Critical Transportation	12VE-00-MISS Vehicle, Specialized Mission	UASI
42		Ballistic Helmets	New / Enhance / Past / Competitive	UASI	175.00	325.00	\$ 56,875.00		Public Health and Medical Services	01LE-01-HLMT Helmet, Ballistic	UASI
43		Ballistic Vests	New / Enhance / Past / Competitive	UASI	25.00	85.00	\$ 2,125.00		Public Health and Medical Services	03OE-01-VSTO Vests, Operational	UASI
44		Ballistic Vest Steel Plates	New / Enhance / Past / Competitive	UASI	175.00	190.00	\$ 33,250.00		Public Health and Medical Services	03OE-01-VSTO Vests, Operational	UASI
45		Individual First Aid Kit (IFAK)	New / Enhance / Past / Competitive	UASI	60.00	150.00	\$ 9,000.00		Public Health and Medical Services	09ME-01-BAGM Bag/Kit/Pack, Medical	UASI
46		Ballistic Equipment Bags	New / Enhance / Past / Competitive	UASI	25.00	50.00	. ,		Public Health and Medical Services	19GN-00-BGPK Bags / Packs	UASI
47 48				1		1	\$ -	ļ			\longleftarrow
48							\$ -				\vdash
	EQUIPMENT Sub-Total						\$ 243,500.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. CEASING SPECIAL PROPERTY IN THE PROPERTY

Stingray Poleless Litters for rapid patient movement and transport during MCI's.

Ballistic personal protective equipment (Helmets, vests, steel plates, and equipment bag) allow first responders to provide medical aid and conduct other life-saving operations in a hostile environment including, but not limited to, an active shooter.

First responder Individual First Aid Kits (IFAK) to treat life threatening bleeding wounds (knife/stab wounds, gunshots, or other serious bleeding injuries including arterial bleeding) during am MCI.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 243,500.0	0

Ne	vada Homeland Security	/ Grant Pr	rogram (I	HSGP) RESU	IBMISSION	PROJECT ID:	KK
Pro	oject Proposal for FFY19	HSGP Fu	nding De	scription		Date Submitted	4/23/19
1) P	ROJECT TITLE:	Las Vegas L	Jrban Area/C	lark County Nev	ada Shelter Proje	ect	
2) P	ROPOSING/LEAD AGENCY:	Clark County	y Office of Er	mergency Manag	jement		
3) P	roject Manager Name/Title:	Misty Richar	dson				
Р	roject Manager Contact Info:	Phone: (702) 455-5713	Email: richardso	nm@clarkcounty	ynv.gov	
4) A	ddl Project Manager Name/Title:						
Α	ddl Project Manager Contact Info:	Phone:		Email:			
5) F	inance/Grant Contact Name/Title:	Karen Taylor	r				
F	inance/Grant Contact Info:	Phone: (702) 455-6183	Email: KarenT@	clarkcountynv.g	gov	
5)	CLASSIFICATION - Check the pa	rimary intent	tion of the Pr	roposed Project:			Choose one:
	the project has been	n funded in the	past. All proj	ects in this catego	ry must align with	hin the past five years; NCHS FY16-18 prioritie	_
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACIT	Y *		0
	*All NEW projects are competitive						
7)	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hocapability); and <u>WHERE</u> (identify the geo	e Proposed Proje e: "To (establish, meland Security	ect in terms of C improve, expar (NCHS) FFY18 p	APABILITY. The state and, double, sustain, e priorities (See #10)]; I	ement should describetc.)]; OF WHAT CO FOR WHO (identify the	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPA he direct users/beneficiar	BILITIES [consider ies of the
	Develop and maintain a compreh non-traditional, temporary, migra responsibilities, resources, equip	tion, and mob	oile hospital),	command struct	ture and program	n, alignment of agend	
3)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency N	lanagement <i>i</i>	Agency (FEMA) li	st of Core Capabi	lities and the Crosswa	alk of Target
	FFY19 Strategic Capacity Maintai	ned*:	Not Applicabl	e			
	HSGP Project Type Supporting Strat						
	If OTHER, please choose FFY16-18 N			AL COORDINATIO	ON [Mission Area -	ALL]	
	Core Capability aligned with Mainta	ained Project:	MASS CARE	SERVICES [Missi	on Area - RESP]		
o)	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro	ogram guidanc	e per the Noti	ice of Funding Opp	oortunity when rel	leased.	
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment w						
	This request allows the Las Vega mass care with increased operat Nevada and adjacent jurisdiction	ional coordina					

Pro	ject Proposal for FF	Y19 HSGP Funding	g Description	Date Submitted	4/23/19								
PRO	JECT TITLE REFERENCE	: Las Vegas Urban	Area/Clark County Nevada Shelte	er Project									
10)	PROCUREMENT - Indica	ate the method of prod	curement associated with this	s project:									
	Request for Proposal	Provide a brief explanat	tion on your method of procuremen	t - FIELD IS LIMITED TO VISIB	BLE TEXT BOX:								
	Sole Source		as Vegas Urban Area/Clark Cour										
	Internal		mass care with increased operationse to incidents in Southern Never										
11)	in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work												
(12) FIELD IS LIMITED TO VISIBLE TEXT BOX	1) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work All phases of this project will be lead by contractor and supported by CCOEM staff. The breakdown of the project is as follows Phase 1 of this 5 phase project was gratis and included a baseline study and needs assessment. Phase 2 Tasks: 1. Conduct additional agency interviews not initially identified in phase 1. 2. Develop shelter type listings and												
	•	(FD, PD, etc.)	g the money for your project - It Political Jurisdiction (City, County, State, etc.)	Project Representative (-								
	12(a) Clark County Fire D	epartment/OEM	County	Misty Richardson									

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

-This project has been developed as scalable; however, updates and maintenance of the shelter catalog, on-going training, and exercise implementation are not included.

-Additionally, scope reductions were made to streamline the project and provide core deliverables to meet funding needs. The remaining scope has been blocked into tasks and phases to provide flexibility as funding becomes available.

-As part of the reduction exercise, the following operational coordination tasks are not provided including; policies and procedures development, temporary infrastructure commodity and services contract development, temporary infrastructure service level agreement development, facility use agreement development, and shelter drawings for every site (one site drawing per shelter type is provided – providing a template to apply to all sites of the same type, all sites will be typed and estimated capacities assigned in catalog).

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

0%	
Statewide	,

12(b)

12(c)



Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: **Project Proposal for FFY19 HSGP Funding Description**

 KK Date Submitted 4/23/19

PROJECT TITLE REFERENCE:

Fields are limitied to visible text box size

Las Vegas Urban Area/Clark County Nevada Shelter Project

15)	BUDGET - Describe objectives,	acquisitions, and quantities	within each category.	Be specific.	Identify UASI and State cost.
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1Ea) Planning (Social agrees to final links along ground and ground side agrees at the final links along ground and ground side agrees at the final links along ground side agrees at the final links are agreed as a ground side agree at the final links are agreed at the final links are agre	LV-UASI	State-wide	SubTotal
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UA3I	State-wide	SubTOtal
Phase Two - Programming. Additional agency interviews, confirmation of shelter types development of site catalog, site audits against the shelter type site plans. Allocation of space and agency space allocation layouts. Phase Three - Type A-G shelter site basic plan development	\$ 88,575.00		\$ 88,575.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
·			
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
15d) Training [Development and delivery of training to perform assigned missions and tasks] Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio visual materials, training aids, teacher lesson plans. Conduct training program to train the trainers.	\$ 38,500.00	State-wide	\$ 38,500.00
Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio		State-wide State-wide	
Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio visual materials, training aids, teacher lesson plans. Conduct training program to train the trainers.	\$ 38,500.00		\$ 38,500.00
Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio visual materials, training aids, teacher lesson plans. Conduct training program to train the trainers. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Phase 5 - Establish an Exercise Development Team. The team will be tasked with creating content for the exercise program including templates to be used in exercises to be planned at annual intervals. The team will approve exercise scenarios, select potential sites, identify exercise objectives and metrics; establish Exercise Evaluation Guides (EEGs); develop a Master Scenario Events List (MSEL); and propose	\$ 38,500.00		\$ 38,500.00 SubTotal
Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio visual materials, training aids, teacher lesson plans. Conduct training program to train the trainers. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Phase 5 - Establish an Exercise Development Team. The team will be tasked with creating content for the exercise program including templates to be used in exercises to be planned at annual intervals. The team will approve exercise scenarios, select potential sites, identify exercise objectives and metrics; establish Exercise Evaluation Guides (EEGs); develop a Master Scenario Events List (MSEL); and propose exercise injects Create Three-year Exercise Plan	\$ 38,500.00 LV-UASI \$ 21,100.00	State-wide	\$ 38,500.00 SubTotal \$ 21,100.00
Phase Four - Command training development. Outline of all project objectives including task analysis, task lists, terminal objectives for cognitive and behavioral tasks, performance objectives, and any pre-requisite skills required. Outline of test items or practical assessments, indicated level of instruction, and any reference materials as required. Develop specific number of modules based on identified objectives, including identifying any specific lesson plan layouts. Create lesson plans and training materials necessary to deliver training program. To include any audio visual materials, training aids, teacher lesson plans. Conduct training program to train the trainers. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Phase 5 - Establish an Exercise Development Team. The team will be tasked with creating content for the exercise program including templates to be used in exercises to be planned at annual intervals. The team will approve exercise scenarios, select potential sites, identify exercise objectives and metrics; establish Exercise Evaluation Guides (EEGs); develop a Master Scenario Events List (MSEL); and propose exercise injects Create Three-year Exercise Plan	\$ 38,500.00 LV-UASI \$ 21,100.00	State-wide	\$ 38,500.00 SubTotal \$ 21,100.00 SubTotal

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

KK 4/23/19

PROJECT TITLE REFERENCE:

Las Vegas Urban Area/Clark County Nevada Shelter Project

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funding approval	10/01/19	12/01/19	2
3	Purchasing process	12/01/19	03/30/20	3
4	Invoicing Process	04/01/20	06/30/20	4
5	Begin process again for new fiscal year	07/01/20	08/31/21	13
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Do	oes this proj	ject have a nexus to te	errorism? YES 💽) No 🔵	Explain below.

n the event of a terrorist or emergency incident in the Las Vegas Urban Area, specifically tourist areas – temporary sheltering will be required for large-scale populations. It is critical to establish and confirm locations, capacities, operational coordination requirements and resources to align mass care responsibilities to ensure safe sheltering.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with strategic capacities approved by the Resilience Commission for Mass Care under the strategic capacity for recovery and the Nevada Disaster Recovery Framework and supports the core capability of mass care services.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Since this is a multi phase project portions of the overall project can be completed with substantial outputs that will be beneficial to the overall progress of Mass Care planning.

	y Grant Program (HSGP) RESUBN			KK						
•	HSGP Funding Description	Date Subr	nitted	4/23/19						
ECT TITLE REFERENCE:	Las Vegas Urban Area/Clark County Nevada	Shelter Project								
d. Can this project continue w	rithout funding? YES 🔵 NO 💿 Explain below	•								
There are no other viable funding sources available.										
e. Does this project provide a	MEASUREABLE statewide benefit? YES (• NO () Explain below.								
The development of a regional of preparedness planning about Soresponse and coordination. Fur	comprehensive, strategic and coordinated shelte buthern Nevada's capabilities in the event of a r ther, the plans, tools and templates developed to cal and tribal governments across Nevada.	nigration event that requi	res state	ewide						
YES - Agency HAS particle NO - Agency has NOT particle ADDITIONAL COMMENTAR	e indicate the participation level in completing sipated in the 2018 Threat and Hazard Identific articipated in the 2018 Threat and Hazard Iden Y - Please indicate any additional project com	ation Risk Assessment (1 tification Risk Assessme	THIRA) So	urvey A) Survey						
limited to the visible text box										
incident in 2017. Compounded	elter services was a critical component to respo by recent mass care sheltering incidents across	s the United States and i	n respon							
government to respond to a she for providing shelter and mass of hotels and others who evacuate catalyst for developing a more of Urban Area/Clark County Neva	aken to assess the baseline preparedness and elter or mass care incident. Annex C states, "Locare services to protect local residents displaced into our jurisdiction due to emergency situation comprehensive approach to shelter and mass cada (LVUA). The baseline study has identified a standing of the resources that would be required	capabilities of resources cal government has the use from their homes, tourisms" (p. 3). The study was are operations throughous unmber of assumptions,	within Cultimate rests evacuintended	lark County esponsibilit lated from I to be the s Vegas						
Mass Care. A study was undert government to respond to a she for providing shelter and mass of hotels and others who evacuate catalyst for developing a more of Urban Area/Clark County Neval services, and incomplete under Additional concerns regarding proposality of shelter operations development project proposal is current large-scale event operations.	aken to assess the baseline preparedness and elter or mass care incident. Annex C states, "Locare services to protect local residents displaced into our jurisdiction due to emergency situation comprehensive approach to shelter and mass cada (LVUA). The baseline study has identified a standing of the resources that would be required solicy/legal considerations along with security are and the importance of approaching the issue was to establish a unified shelter and mass care plational planning and venue development practice and non-traditional sheltering sites, migration si	capabilities of resources cal government has the used from their homes, tourists" (p. 3). The study was are operations throughout the project of assumptions, dat a shelter operation. In the study was are operation. In the study was are operations of as a shelter operation. The aregional solution. The project will include the state of the study was a state of the stat	within C ultimate r sts evacu intended it the Las fundame illustrate his urger ithin the e scalab	lark County esponsibility uated from I to be the s Vegas ental gaps in d the nt shelter LVUA, usin le operation						
Mass Care. A study was undert government to respond to a she for providing shelter and mass of hotels and others who evacuate catalyst for developing a more of Urban Area/Clark County Nevas services, and incomplete under Additional concerns regarding proposal is current large-scale event operational site planning for traditional	aken to assess the baseline preparedness and elter or mass care incident. Annex C states, "Locare services to protect local residents displaced into our jurisdiction due to emergency situation comprehensive approach to shelter and mass cada (LVUA). The baseline study has identified a standing of the resources that would be required solicy/legal considerations along with security are and the importance of approaching the issue was to establish a unified shelter and mass care plational planning and venue development practice and non-traditional sheltering sites, migration si	capabilities of resources cal government has the used from their homes, tourists" (p. 3). The study was are operations throughout the project of assumptions, dat a shelter operation. In the study was are operation. In the study was are operations of as a shelter operation. The aregional solution. The project will include the state of the study was a state of the stat	within C ultimate r sts evacu intended it the Las fundame illustrate his urger ithin the e scalab	lark County esponsibilit uated from I to be the s Vegas ental gaps in d the nt shelter LVUA, usin le operation						

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	IEM DETAIL I	BUDGET						
	Agency Name	Clark County OEM	Project Manager Name & Contact #	Misty Richa	rdson	Grant Manager Name & Contact #	Karen Taylor				KK	
	IJ TITLE:	Clark County Shelter Project										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3							-	\$ -				
4								\$ -				1
	Personnel Sub-Total							\$ -				
PERSONN	EL COST NARRATIVE REQUIRED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	FLIVERABLES	NARRATIVE WILL	RELISED TO ENSURE ITEMS LIS	STED WILL BE COM	IPI ETED IN THE	GRANT CYCLE -	ITEMS MAY NOT	BE PURCHASED OF	ITSIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPELIANCE)	Select Type				-		_			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16 17									-			+
18									_			-
19									_			+
20									-			†
21									-			
22									-			1
23									-			1
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Hire Consultant to complete Shelter Study	New / Enhance / Past / Competitive		1	88,575.00	88,575.00	Approved Strategic Capacity	Mass Care Services	UASI
28		for Urban Area,development site catalog,develop				-	-			
29		shelter plan					-			
30							-			
31							-			
32							-			4
33							-			
34							-			
35										
	Planning Sub-Total						\$ 88,575.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Clark County will hire a consultant do complete a Shelter Study for the Urban Area, development of shelter sites catalog, develop shelter plan.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$ -			
37							\$ -			
38			·		-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40							\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49			·				\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity		TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether ject requires EHP Screening									\$ -	
51	your pro	Consultant develop training,assessments,training programs					1	38,500.00	Approved Strategic Capacity	Mass Care Services	\$ 38,500.00	
52											\$ -	
53									1	-	\$ -	
54 55									-		\$ - \$	
56									1		\$ -	
	Training Sub-Total										\$ 38,500.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Clark County will hire a consultant to develop a training programs and assessments for shelter operations.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57		curement / See 2nd tab to determine whether ject requires EHP Screening										
58		Consultant develop exercise program for shelter plan					1		Approved Strategic Capacity	Mass Care Services	\$ 21,100.00	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ 21,100.00	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Clark County will hire a consultant to develop an Shelter Plan exercise.

					Budget Total		
					Request	\$ 148,175,00	

Nevada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	MM
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/17/19
1) PROJECT TITLE:	Homeland Security Progr	am Assistant		
2) PROPOSING/LEAD AGENCY:	Washoe County Emerger	ncy Management and Homeland	Security Program	
3) Project Manager Name/Title:	Aaron R. Kenneston, Wa	shoe County Emergency Manage	er	
Project Manager Contact Info:	Phone: (775) 337-5898	Email: akenneston@washoecour	nty.us	
4) Addl Project Manager Name/Title:				
Addl Project Manager Contact Info:	Phone:	Email:		
5) Finance/Grant Contact Name/Title:	Kelly Echeverria, Washoe	County Emergency Managemen	nt Program Coordina	tor
Finance/Grant Contact Info:	Phone: (775) 337-5898	Email: kecheverria@washoecou	nty.us	

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To improve planning and implementation of NCHS priorities through Washoe County Emergency Management and Homeland Security engagement for regional and statewide projects with jurisdictions and agencies Statewide.

This project provides support for the Washoe County Emergency Management and Homeland Security Program to assist in implementing the Nevada Commission on Homeland Security FFY18/19 priorities for the unincorporated County, Cities of Reno and Sparks, Pyramid Lake Paiute Tribe, Reno-Sparks Indian Colony, and associated Special Districts. This assistance will include sustainment of the Statewide initiatives such as Continuity of Operations (COOP), Recovery, and Public Information and Warning, as well as administrative and operational support for homeland security projects that affect the region.

These new duties are the result of the creation of the Department of Homeland Security (DHS) and the steady creation of new laws and regulations over the past several years. After each major emergency, new directives and tasks have been enacted that affect workload. This project will be based out of the Regional Emergency Operations Center and will work with homeland security stakeholders throughout the State, meeting regularly with Northern, Southern, and Eastern counterparts to achieve the NCHS stated objectives. This project is absolutely essential to the success of the Washoe County region to sustain the capacity built over the last decade, meet the emerging resiliency projects, support regional and State stakeholders, as well as meeting the Nevada Commission on Homeland Security (NCHS) priorities and needs of our citizens.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:	PLANNIING
HSGP Project Type Supporting Strategic Capacity:	OTHER
If OTHER, please choose FFY16-18 NCHS Priority:	OPERATIONAL COORDINATION [Mission Area - ALL]
Core Capability aligned with Maintained Project:	OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This Homeland Security Program Assistant will provide operational coordination for homeland security initiatives within the Washoe County Region and in support of Statewide Initiatives.

The position will allow accomplishment of HSPD-5 directives, support the accomplishment of Statewide NIMS, and the resulting increased workload created by Department of Homeland Security (DHS) directives that do not align with the Emergency Management Program Grant (EMPG).

Although not able to be depicted on the FFY19 Strategic Capacity drop-down menu, this assistant will be working with, or on, every strategic capacity- NDEM, CERT, Mass Fatality, Public Warning, Recovery, COOP, Operational Communications, CyberSecurity, as well as other terrorism related Homeland Security issues. It is precisely because of these capacities that must be maintained in the region that this project is so critical to success to our second most populous County.

Nevada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	MM
Project Proposal for FFY19	HSGP Funding Description	Date Submitted	4/17/19
PROJECT TITLE REFERENCE:	Homeland Security Program Assistant		
10) PROCUREMENT - Indicate th	e method of procurement associated with this proj	ect:	
Request for Proposal Proposal	ovide a brief explanation on your method of procurement - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:

11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

When funding is received, it will be accepted by the Washoe County Board of County Commissioners and the Comptroller will allocate the funding for the Homeland Security Program Assistant. With this in place, the Human Resources Director will work with the Washoe County Emergency Management and Homeland Security Program to advertise and compete the position as widely as possible. Through a transparent and competitive process, the most viable candidate will be selected to fill the position.

This will be an advertised position with full and open competition. Although there will be no

relocation allowance, the applicant does not have to be a Washoe County resident.

Onboarding will be conducted to include security clearance, and then just in time training on any Homeland Security topics not in the selected individuals resume. An orientation with the Nevada Division of Emergency Management Homeland Security personnel as well as the Nevada Threat Analysis Center (NTAC) will also be accomplished to ensure this position adds value.

Once on board, the individual will serve as central point of contact for DHS grants and administration, assist with homeland security projects and NIMS plans updates, serve as a homeland security public awareness advocate, provide a much needed resource for County departments, as well as regional partners including cities, special districts, and tribes, to conduct essential training and exercises, as well as serve as a regional Staff Duty Officer in the absence of the Emergency Management and Homeland Security Administrator to include operation of technology for alerts and warnings.

This individual will act as primary contact for State homeland security initiatives and coordinate with other regions to ensure that homeland security activities are synchronized as NCHS priorities are addressed in an efficient and timely manner. These homeland security planning, operations, training, and exercising duties will continue as the initiative progress toward sustainment and a local government funded position.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12 (a)	Washoe County Emergency Management and Homeland Security Program	Washoe County	Kelly Echeverria
12(b)			
12 (c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

Although this project could simply end and the tasks be transferred back to the Washoe County Emergency Manager and other jurisdiction part-time/additional duty Emergency Managers; value would still have been added to the region and State with the accomplishment of numerous NCHS priorities. The work accomplished by this project will have lasting effect with the successful completion of projects within the POETE model. The region and State will be safer and better prepared for potential terrorism activities.

However, the Washoe County senior leadership has committed to develop a sustainment activities at the Regional Emergency Operations Center (REOC) with the goal of providing funding for this important position through the General Fund by year three of this project. Barring any catastrophic economic event, this project sets the conditions for sustainment into the next decade.

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

100%	0%
Statewide	Urban Area
(SHSP)	(UASI)

FIELD IS LIMITED TO VISIBLE TEXT BOX

Sole Source

Internal

LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: MM

Date Submitted 4/17/19

PROJECT TITLE REFERENCE:

Homeland Security Program Assistant

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be sp	ecific. Identify	UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide State-wide	
			\$ 0.00 SubTota
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] One Washoe County Homeland Security Program Assistant in support of regional		State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID:

Date Submitted

PROJECT TITLE REFERENCE:

Homeland Security Program Assistant

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Board of County Commissioners accepts funds and directs the comptroller to establish accounts	10/01/19	11/01/19	1
3	Human Resources and Emergency Management and Homeland Security Program will compete the position and select a candidate	11/04/19	12/30/19	2
4	Position will attend requisite on the job training (and formal classroom training) to integrate with NDEM, NTAC, and other Homeland Security partners.	01/01/20	03/02/20	3
5	Position will perform Homeland Security duties in accordance with NCHS priorities.	03/03/20	08/31/21	20
6				
7				
8				
9				
10				
11				
12			_	_

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES
NO Explain below.

This program is directly tasked with performing homeland security duties in accordance with the Nevada Commission of Homeland Security (NCHS) priorities. The position is funded by homeland security, and focused on homeland security. The individual will work closely with regional, state, and federal partners (to include acting as a Terrorism Liaison Officer [TLO] and coordinating closely with fusion and intelligence center personnel). This project is exclusively focused on the terrorism nexus, and NOT Mitigation, Response, Recovery, and Preparedness for natural hazards or man made issues other than terrorism.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This position is tasked with implementing the NCHS strategic priorities, initiatives, and capacities. The overarching reason for the position is to focus on homeland security and the accomplishment of strategic directives.

The day to day tasks will be the Planning, Organizing, Equipping, Training, and Exercising (POETE) of the Statewide strategic capacities of Citizen Corps, Mass Fatality, Public Warning, Recovery, COOP, Operational Communications, and CyberSecurity as well as other terrorism related Homeland Security issues that have been or will be priorities to the State of N

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The position is scalable; however, this should be viewed with a cost-benefit in mind. Reduced funding means an individual with less skill sets and/or less hours to devote to the project. Of course there is a tipping point where a significantly reduced amount of funds would not support a position to accomplish the myriad tasks backlogged withing the NCHS strategic priorities in the region. Because this is an important position, and the amount of funding requested in not excessive, it is requested that it be funded at the level specified in the justification.

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION **Project Proposal for FFY19 HSGP Funding Description**

PROJECT ID: **Date Submitted**

MM 4/17/19

PROJECT TITLE REFERENCE:

Homeland Security Program Assistant

d. Can this project continue without funding? YES NO Explain below.

This project is wholly dependent upon funding. Specifically, it must be funded with SHSP to ensure the purpose of the position and funding source are in concert. Although and EMPG or even CDC/ASPER position could help, because these are directly Homeland Security tasks and initiatives funded by Department of Homeland Security (DHS) State Homeland Security Program (SHSP) funds, the Program Assistant project should also be funded with SHSP to avoid any issues with appropriateness of funding source. Washoe County will pay an additional 10% above what is requested in this project so that should an Emergency Management Task related to a disaster activation occur, the SHSP funded position could assist without using SHSP funds for a local emergency not related to terrorism

Does this project provide a MEASUREABLE statewide benefit?

YES NO Explain below.

The project is easily measured in regional and statewide projects completed, NIMS objectives sustained, terrorism training accomplished, homeland security exercises completed, and homeland security plans updated/completed. Although the project will be based in Washoe County, the support of Statewide initiatives and support given to surrounding jurisdictions (some of which are even in California) ensures measurable benefit to citizens and quests throughout the State and beyond.

- THIRA COMPLETION Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:

Fields "d" and "e" are limitied to visible text box

- YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

This Homeland Security Program Assistant position is a key to both sustaining and enhancing the homeland security posture of the second largest jurisdiction in the State encompassing over 6,500 square miles, and over 550,000 citizens.

Despite the increased Homeland Security workload, Washoe County has remained an example of a model emergency management program. The program is one of only 100 counties in the nation to be accredited by EMAP, and is recognized to be a premier program. The program coordinates the region's preparedness, response, recovery and mitigation efforts for the City of Reno, City of Sparks, Reno-Sparks Indian Colony, Pyramid Lake Paiute Tribe, airport, RTC, TMWA, volunteers, private sector, and etc. However, this success has come at a price with only one Emergency Manager and a program coordinator with primary responsibilities in LEPC and County budget administration. This has resulted in a slow backlog of Homeland Security tasks. Examples of this steady increase over the past few years are Federal and State laws enacted to address Continuity, Animals in Disaster, Special Needs Populations, Cybersecurity, Resort-Hotel emergencies, Schools, and Utilities. All of these Homeland Security related mandates must be reviewed, coordinated, and addressed at a regional level to avoid causing failure at individual regional partner level given the lack of personnel resources in the Homeland Security profession. Clark County and the State are slightly better off, although not ideal, because at least they have a few Homeland Security positions funded. This is not the case in Washoe County.

Currently, these Homeland Security tasks are being covered by a single Emergency Management funded person (the Washoe County Emergency Manager) with the assistance of other regional Emergency Manager who are all part-time and/or additional duty personnel. Because of this, the volume of deferred tasks are increasing. The region must maintain the National Incident Management System (NIMS) Homeland Security specific standards without the appropriate resources. Again, Washoe County agencies are attempting to maintain compliance with part-time personnel to cover both Emergency Management AND Homeland Security directives. By implementing this proposal, all regional agencies will benefit, and Statewide projects will be more efficiently implemented as well.

The Washoe County Emergency Management and Homeland Security Program has given freely of time and energy to support Statewide initiatives for well over a decade. The Program is in dire need of assistance to ensure that the gains made thus far are not lost. Each year additional DHS Directives are received, and threats increase. This relatively modest proposal will allow the region to maintain the hard won gains in terrorism readiness, and to move forward on implementing and supporting the new initiatives in both the region and State of Nevada.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUIDGET

	LINE ITEM DETAIL BUDGET												
	Agency Name	Washoe County EM&HS	Project Manager Name & Contact #	Aaron Kenno 337-5898	(, , ,	Grant Manager Name & Contact #	Kelly Echeve	erria (775) 3	37-5859			MM	
	IJ TITLE:	Washoe County Homeland Security Ass	sistant										
		One Budget Per Funding Stream											
		SHSP											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1		Homeland Security Program Assistant	New / Enhance / Past / Competitive		33.088675	90%	2080		Planning - Community Resilience	Operational Coordination		SHSP	
2								\$ -					
4								\$ -				1	
	Personnel Sub-Total	FOR FACH LINE ITEM AROVE - PLEASE EXPLAINE IN						\$ 61,942.00					

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This position will perform duties associated with the Washoe County Emergency Management and Homeland Security Program's specific Homeland Security duties. The position will allow accomplishment of HSPD-5 directives and the resulting increased workload created by Department of Homeland Security (DHS) to serve as central point of contact for implementing the NCHS priorities.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above										
5		Homeland Security Program Assistant	New / Enhance / Past / Competitive		15.606837	90%	2,080.00		Planning - Community Resilience	Operational Coordination	SHSP	Personnel
6								\$ -				
7								\$ -				
8								\$ -				
	Fringe Sub-Total							\$ 29,216.00				

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COSTS required by State and local government to support the position to serve as central point of contact for DHS grants and administration, and to serve as a homeland security public awareness advocate.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									1			
10												
11									-			
12									-			
13									-			
14									-			
15									-			
16 17												+
18					<u> </u>							+
19									-			
20					İ				-			
	Travel Sub-Total								-			
TRAVEL C	OST NARRATIVE REQUIRED FO	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	AIL EACH LINE ITEM AND DELIV	/ERABLES. NAF	RRATIVE WILL BE U	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITEM	IS MAY NOT BE	PURCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	•			
28						-				
29							•			
30										
31							-			
32							•			
33										
34										
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40							\$ -				
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE (TEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Bu	udget Total		
				Re	equest	\$ 91.158.0	0

Project MM

FFY19 HOMELAND SECURITY GRANT PROGRAM (HSGP)

STRATEGIC PLAN SUPPLEMENTAL INFORMATION

For all FFY19 HSGP project submissions that **MAINTAIN** the **FFY19 approved Strategic Capacities**, the following information must be provided during your project presentations at the following meetings:

- Urban Area Working Group (UAWG) May 8, 2019 Time TBD
- Resilience Commission May 14, 2019 9:00 a.m.

Please fill out the following information, and be prepared to discuss at the UAWG and/or Resilience Commission meetings noted above:

FFY19 Project Name:	Homeland Securit	ty Program Coordinat	or
Funding Source:	SHSP	SHSP Funding Request:	\$91,158
(SHSP, UASI, SHSP/UASI Split)	SHOF	UASI Funding Request:	

How is your project a regional or statewide resource, or how do you intend for it to be so in the future?

This is a regional resource that will also be tasked with assisting statewide NCHS priorities and projects. The individual will be stationed at the Washoe County Regional Emergency Operations Center (REOC) and will be attending Nevada Commission on Homeland Security meetings, as well as outreach to Fusion/Intelligence centers, and participation in the various Homeland Security projects and initiatives to ensure synchronization of effort between regional and State homeland security efforts.

How have you collaborated with other agencies to maximize the resource's capacity?

The program currently coordinates (as limited personnel and resources allow) throughout the Region with the THIRA development, SPR input, TEPW, and HSEEP. The program operates from the Regional Emergency Operations Center (REOC) to ensure collaboration with the dozen separate disciplines (Fire, Law, EMS, etc.), to include the Private Sector across the two Cities (Reno, Sparks), two Tribes (Reno-Sparks Indian Colony & Pyramid Lake Paiute Tribe), Unincorporated County, as well as multiple special districts and regional agencies. The regional partners include several Nevada Counties supported by MOUs and California Counties as well. This position will allow sustainment of these efforts to provide a consistency and level of resource to accomplish NCHS priorities that often must be deferred due to lack of this position.

What is the current investment provided by your jurisdiction to offset reliance on grant funding for this project?

The County Pays for 50% of the County Emergency Manager (match for EMPG), as well as 100% of a Program Coordinator who has duties to support the Local Emergency Planning Committee (LEPC) and perform activities in support of the REOC. With the addition of this position, the County has pledged an initial 10% start-up investment.

Project MM

Is there a plan for increasing offset by your jurisdiction to support this project in the future?

Yes, the County's intent is to increase the investment incrementally with a goal of sustaining the position with local funds.

The plan is to then sustain this position through other funding streams such as the County General Fund no later than the conclusion of Year Three.

Please provide a five year funding summary for your project.

Again, the position is in support of the State goal of increasing resilience across the whole community by focusing on collaboration in policy development, building operational capacity, and maximizing financial resources throughout all four phases of the emergency management cycle.

This is in concert with the vision of building Nevada resilience through coordination and partnerships. It will build capacity through investment in regional partnerships through the statewide emergency management homeland security program (SHSP) with a continued focus on increasing strategic capacities though planning and coordination with statewide partners in support of NCHS priorities.

A reasonable five-year funding plan is:

FFY-19 = \$91,158

FFY-20 = \$65,000 (County increases investment and reduces reliance on SHSP)

FFY-21 = \$35,000 (County increases investment and further reduces reliance on SHSP)

FFY-22 = \$0 (County sustains project, if economic conditions do not require reductions in force)

FFY- 23 = \$0 (County sustains project, if economic conditions do not require reductions in force)

This project is planned to sunset as the County increases the investment.

Nevada Homeland Security	evada Homeland Security Grant Program (HSGP) RESUBMISSIO							
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/25/19				
1) PROJECT TITLE:	LVMPD Tactical Respons	se / MACTAC						
2) PROPOSING/LEAD AGENCY:	Police Department							
3) Project Manager Name/Title:	3) Project Manager Name/Title: Justin Van Nest							
Project Manager Contact Info:	Phone: (702) 828-3389	Email: j14198v@lvmpd.com						
4) Addl Project Manager Name/Title:	Rachel Skidmore / Emerg	gency Manager						
Addl Project Manager Contact Info:	Phone: (702) 828-2257	Email: r14590s@lvmpd.com						
5) Finance/Grant Contact Name/Title:	inance							
Finance/Grant Contact Info:								

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

LVMPD and CCFD are seeking to exercise the operational coordination and communication plans defined in the Hostile Event policy. This policy was revised following the 1 October shooting and further supported by recommendations outlined in the Joint FEMA AAR. This project will improve coordination and communications within both agencies, by focusing on multi-agency response to critical incidents that require a Unified Command structure. Law enforcement participation will prioritize LVMPD Convention Center Area Command (CCAC) and supporting resources. Fire Department participation will prioritize resources geographically proximal to the Las Vegas Resort Corridor and Command Level Officers (Battalion Chiefs) from Southern Nevada Fire Departments that have adopted the Hostile Event Policy. Convention Center Area Command and the respective CCFD Stations were determined based on the geographical location. Being that these properties are located along Las Vegas Blvd it is deemed to be critical infrastructure. Las Vegas Blvd houses over 20 mega resort style properties and is the one of largest resort corridors in the world housing 40 million visitors a year. Historically and presently numerous threats are made to Las Vegas throughout terrorist propaganda, making it the #2 most mentioned target. This training is a counter-terrorism measure ensuring multi-agency coordination during critical incidents. This grant request also includes tactical response equipment for our SWAT team and our TAC vehicle outlines in the equipment category.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:	Not Applicable
HSGP Project Type Supporting Strategic Capacity:	OTHER
If OTHER, please choose FFY16-18 NCHS Priority:	OPERATIONAL COORDINATION [Mission Area - ALL]
Core Capability aligned with Maintained Project:	Not Applicable

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project aligns with several of the 1 October, FEMA After Action Report recommendations, both that need implemented and those that need to be sustained. Identified recommendations encourage both agencies to develop training that furthers operational coordination and communication.

,					PROJECT ID:	NN				
					Date Submitted	4/25/19				
ROJ	ECT T	ITLE REFERENCE:	LVMPD Tactical R	esponse / MACTAC						
0)	PROC	PROCUREMENT - Indicate the method of procurement associated with this project:								
	Request for Proposal Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:									
	O So	le Source	Internal							
	Int	ernal								
1)	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe									
i F	in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work Training will be a joint effort from both CCFD and LVMPD personnel. Training staff will include LVMPD Multi Assault Counter									
Terrorism Action Capabilities unit. A thorough train the trainer program will ensure consistency among training staff during multiple training modules. CCFD company officers whom are familiar with LVMPD joint training will be selected as core instructors alongside the MACTAC unit.										
2)	SUB-(section	on is for you to tell u	CIPIENTS - <i>Identify the</i> is WHO will be receiving (FD, PD, etc.)	participating agency(s) and juris g the money for your project - If Political Jurisdiction (City, County, State, etc.)	it's yo	on(s) proposed for all ou, put in your ager Project Representative (ncy]			
:	12 (a)	Las Vegas Metropol	itan Police Department	Clark County	Christ	opher Tomaino				
1	12 (b)									
1	12 (c)									
3)	CLICT	NINIMENIT Idantifu	any continuing financial	obligation created by the Project, a	and nr	anasad funding salu	tion			
FIELD IS LIMITED TO VISIBLE TEXT BOX	This tr	raining was designed	to be completed within p	proposed limits. Upon completion to take the project, and the project project, and the project project, and the project p		·				
	your co		unt is derived from Field '1	t's funding percentage makeup of Sto 5g - PROJECT TOTALS' on Page #3	atewio	de -vs- UASI is noted b	elow for			

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: NN
Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Fields are limitied to visible text box size

LVMPD Tactical Response / MACTAC

15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
This cost includes \$40,343.60 for 10 members to conduction 12 x four-hour sessions of a MACTAC training courses, and one 5 hour Train-the-Trainer course.	\$ 40,343.60	\$ 0.00	\$ 40,343.60
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Bullhorns for Tac vehicles, and simunition rounds.	1 0/131	State Wide	Jubiotai
	\$ 4,600.00	\$ 0.00	\$ 4,600.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
5e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
n.a 15g) PROJECT TOTALS	\$ 0.00	\$ 0.00 State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSIO	N
Project Proposal for FFY19 HSGP Funding Description	

NN **Date Submitted** 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Tactical Response / MACTAC

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive Funding	01/01/20	12/31/20	12
3	Define Training Objectives	01/01/20	12/31/20	12
4	Procure Training Materials	01/01/20	12/31/20	12
5	Identify instructors	01/01/20	12/31/20	12
6	Train the Trainer	01/01/20	12/31/20	12
7	Identify Training Dates and Implement Training	01/01/20	12/31/20	12
8				
9				
10				
11				
12				_

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Absolutely, patrol is the first responders on scene during an event.
size	
s xoq	
text	
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
are limitied to visible text box	This directly supports Operational Coordination.
ied to	
limi	
and "c"	
, a	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
"a",	Yes, but it would change the number of who gets them and who doesn't.
Fields	
ΕĬ	

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: N							NN		
Proj	ect P	roposal for F	FY19	HSGP Fu	unding D	escriptior	1	Date Submitted	4/25/19
PROJ	ECT T	ITLE REFERENC	E:	LVMPD Ta	ctical Respo	nse / MACTA	С		
	d.	Can this project con	tinue w	vithout fundin	g? YES	NO Expla	in below.		
Fields "d" and "e" are limitied to visible text box size	There	is no funding for th	ese sh	ields					
mitie	e.	Does this project pro	ovide a	MEASUREAB	LE statewide	benefit?	YES NO Ex	plain below.	
Fields "d" and "e" are	You ca	an show how many	items	were procure	ed.				
18)	THIRA	A COMPLETION -	Please	e indicate th	e participati	ion level in co	mpleting the 2018 T	HIRA Survey. CHOO	SE ONE:
		YES - Agency HAS	partio	cipated in the	e 2018 Threa	nt and Hazard	Identification Risk As	ssessment (THIRA) S	urvey
		NO - Agency has	NOT p	articipated ii	n the 2018 T	hreat and Haz	ard Identification Ris	sk Assessment (THIR.	A) Survey
19)		TIONAL COMME d to the visible tex		Y - Please in	dicate any a	additional pro	ject commentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	TEM DETAIL	BUDGET	•					
	Agency Name	Las Vegas Metropolitan Police Departme	Project Manager Name & Contact #			Grant Manager Name & Contact #	Joni Prucnal 702 828	8267				NN
	IJ TITLE:	LVMPD Tactical Response										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60				
			New / Enhance / Past /									
3		MACTAC Cadre MACTAC Cadre	Competitive New / Enhance / Past / Competitive		69.2 69.2	100%	53					
4		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60				
4		MACTAC Cadre	New / Enhance / Past / Competitive New / Enhance / Past /		69.2	100%	53	\$ 3,667.60				
5		MACTAC Cadre	Competitive		69.2	100%	53	\$ 3,667.60				
6		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60				
7		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60				
8		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60			-	
9		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53	\$ 3,667.60				
10		MACTAC Cadre	New / Enhance / Past / Competitive		69.2	100%	53					
	Personnel Sub-Total	D FOR EACH LINE ITEM AROVE - PLEASE EXPLAINE IN						\$ 40,343.60				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This cost includes overtime of \$40,343.60 for 10 members to conduction 12 x four-hour sessions of a MACTAC training courses, and one 5 hour Train-the-Trainer courses.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

There is no fringe payments for these employees. That is their overtime cost.

Line #		PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9		·							-			
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
30							-				
31							-				
32							-				
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40											
41		Bullhorns	New / Enhance / Past / Competitive		36.00	50.00	\$ 1,800.00		Operational Coordination	03OE-03-MEGA	UASI
42		Simunition Rounds	New / Enhance / Past / Competitive		1.00	2,800.00	\$ 2,800.00		Operational Coordination		UASI
43											
44											
45											
46											ļ
47							•				
48						-	\$ -				
	EQUIPMENT Sub-Total						\$ 4,600.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Bullhorns for Tac vehicles, and simunition rounds. Sims don't have an AEL and require a controlled euqipment request form.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			<u> </u>			<u> </u>				\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total			
					Request	\$ 4	4,943.60	

Nevada Homeland Security	y Grant Program (ł	HSGP) RESUBMISSION	PROJECT ID:	00
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/30/19
1) PROJECT TITLE:	CBRNE Mobility			
2) PROPOSING/LEAD AGENCY:	Las Vegas Fire Rescue			
3) Project Manager Name/Title:	Karl Rosette Fire Training	g Officer		
Project Manager Contact Info:	Phone: (702) 271-0480	Email: krosette@lasvegasnevada	a.gov	
4) Addl Project Manager Name/Title:	Craig Cooper			
Addl Project Manager Contact Info:	Phone: (702) 236-9597	Email: ccooper@lasvegasnevad	a.gov	
5) Finance/Grant Contact Name/Title:	Priscilla Wdowiak			
Finance/Grant Contact Info:	Phone: (702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov	

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This proposal is to enhance the Utility Task Vehicle (UTV) portion of the CBRNE response. This unit is recognized as a response partner to the FBI and LVMPD by MOU. Approval of this project is critical to sustain and expand operational capability.

The goal of this project is to replace the Las Vegas Fire & Rescue John Deere Gator UTV. The original Gator was purchased with UASI funds and has been in-service and maintained by city of Las Vegas. The current unit only seats two personnel. This limits the ability of the team to transport personnel, limiting operational coordination and capability. The HazMat/WMD entry component consists of a minimum of 3 personnel to follow a facilitator, sampler and over-watch model of staffing. More seating capacity will also allow the Task Force the ability to carry personnel from partnering agencies in the roles of prevention, mitigation and protection.

This unit is frequently used in protection and mitigation missions at events involving The Southern Nevada CBRNE Task Force as identified in the Nevada PRND plan. These missions are at events including Las Vegas New Years Eve (2017 SEAR 1 Event), The Rock and Roll Marathon, NASCAR Races, Electric Daisy Carnival and the Life is Beautiful Music Festival. These events are geographically large and require motorized surveillance to successfully prevent, mitigate and respond to incidents.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: Not Applicable HSGP Project Type Supporting Strategic Capacity: OTHER If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL] Core Capability aligned with Maintained Project: Please choose the core capability that aligns with your MAINTAINED project

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Las Vegas Fire Rescue is a named response partner in the Nevada Preventative Radiological/Nuclear Detection (PRND) program. Las Vegas Fire Rescue is also recognized in the Memorandum of Understanding between Las Vegas Metropolitan Police Department, City of Las Vegas Fire and Rescue and The Federal Bureau of Investigation concerning Chemical, Biological, Radiological, Nuclear and Explosives Incidents. This proposal seeks equipment to increase capability in this mission space.

 Request for Pr Sole Source Internal PROJECT IMPLET in rough order the production This project will be carried out by City be selected. Items 	roposal Prov. The Ciequipm WENTATION - Tess by which the process implemented by of Las Vegas, is will be procure	c method of p ide a brief explaity of Las Vegas nent. Describe how, roject will be accompy Karl Rosette Priscilla Wdowied through City	<u> </u>	arement - FIEL and hold an operation of the financial indeveloped an ocess. Items	en bid process to pur be implemented. Desemble perform what work management of this part of the part o	rchase this scribe roposal will be nning bid will aining on the
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O Sole Source O Internal 1) PROJECT IMPLE! in rough order the proof this project will be carried out by City be selected. Items	The Ciequipm MENTATION - tess by which the presented by of Las Vegas, is will be procure	ty of Las Vegas nent. Describe how, roject will be accon by Karl Rosette Priscilla Wdowi ed through City	and by whom, the Proposed of Las Vegas Fire Rescue. Tak. Bid specifications will be of Las Vegas procurement professional and the second control of Las Vegas procurement professional and the second control of Las Vegas procurement professional and the second control of Las Vegas procurement professional and the second control of Las Vegas procurement professional and the second control of Las Vegas procurement professional and the second control of the secon	I Project will ontractor, or ?) the financial indeveloped an ocess. Items	be implemented. Desemble perform what work management of this part of the posted for bid. Wire will be received. Tra	rchase this scribe roposal will be nning bid will aining on the
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This project will be carried out by City be selected. Items	eess by which the properties implemented by of Las Vegas, Is will be procure	roject will be accon by Karl Rosette Priscilla Wdowi ed through City	of Las Vegas Fire Rescue. Tak. Bid specifications will be of Las Vegas procurement pro	ontractor, or ?) ontractor, or ?) ontractor, or ?) on the financial management of the	will perform what work nanagement of this p id posted for bid. Wir s will be received. Tra	roposal will be nning bid will aining on the
This project will be carried out by City be selected. Item	e implemented by of Las Vegas, las will be procure	by Karl Rosette Priscilla Wdowi ad through City	of Las Vegas Fire Rescue. Tak. Bid specifications will be of Las Vegas procurement pro	he financial n developed an ocess. Items	nanagement of this p ad posted for bid. Wir will be received. Tra	nning bid will aining on the
carried out by City be selected. Item	of Las Vegas, l s will be procure	Priscilla Wdowi ed through City	 ak. Bid specifications will be of Las Vegas procurement pro 	developed an ocess. Items	d posted for bid. Wir will be received. Tra	nning bid will aining on the
section is for you		O will be received	the participating agency(s) at ving the money for your proposition (City, County, State of Las Vegas	ject - If it's ye		ncy]
12 (b)						
12 (c)						
· _			ial obligation created by the P			
Maintenance fueli	ng and storage	of these units w	ial obligation created by the Parill be carried out by City of Lat be in a weather resistant enc	s Vegas. The		
Maintenance fueling ensure that storage that	ng and storage e conditions for	of these units will these units will	vill be carried out by City of La	s Vegas. The losure.	e trailers included in t	this proposal

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

PROJECT TITLE REFERENCE:

CBRNE Mobility

CBRNE Mobility

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
2- 6 seat UTV's marked for use by Las Vegas Fire Rescue with emergency lighting and lockable storage. 2- 8.5 x 20 foot enclosed trailers for transport and storage of UTV's.	\$ 70,600.00		\$ 70,600.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
TOUT TO TALL	\$ 70,600,00	\$ 0.00	\$ 70,600,00

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION**Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

<u>OO</u> 4/30/19

PROJECT TITLE REFERENCE:

CBRNE Mobility

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Specification Development	10/01/19	10/31/19	1
3	Bid Development	10/31/19	11/29/19	1
4	Bid Posted	11/29/19	01/02/20	2
5	Selection of Bid	01/02/20	02/03/20	1
6	Procurement	02/03/20	03/02/20	1
7	Manufacture Time	03/02/20	09/02/20	6
8	Receive	09/02/20	10/02/20	1
9	Place in service.	10/02/20	11/02/20	1
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to terro	rism? YES 💿 N	10 🔘 E	xplain below.

The role of Las Vegas Fire and Rescue in a WMD response is as a member of the Southern Nevada CBRNE Task Force as recognized in the State of Nevada PRND, LEPC Plan and MOU's. Utility Task Vehicle units are a critical part of the response provided in increasingly complex areas to access.

b. Does this project align with the FFY19 strategic capacities? YES NO (Explain below.

Las Vegas Fire Rescue is not named in the Strategic Capacities, Las Vegas Fire and Rescue does work with LVMPD ARMOR and Las Vegas Fire and Rescue Bomb Squad as a response partner as recognized in MOU.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

This proposal is for 2 units and trailers. The scalability is by number of units.

Neva	ada Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	00
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/30/19
PROJ	ECT TITLE REFERENCE:	CBRNE Mobility		
	d. Can this project continue wi	thout funding? YES NO • Explain below.		
Fields "d" and "e" are limitied to visible text box size	This project will not move forwar capability for normal operations.	d without funding. Less effective units will be rented for spo	ecial events leaving n	ninimal
nitie	e. Does this project provide a I	MEASUREABLE statewide benefit? YES NO 💿 Ex	xplain below.	
Fields "d" and "e" are li	This project will remain in Southe	ern Nevada. CBRNE is a regional response unit.		
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018 T	HIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partice	pated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) St	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR)	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

		Las Vegas Fire Rescue 500 North Casino Center Las Vegas NV 89101	Project Manager Name & Contact #			Grant Manager Name & Contact #	Priscilla Wdowiak- 7	02-229-6045			00
	IJ TITLE:	CBRNE Mobility				•					
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3							+	\$ - \$ -		-	+
4	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11									-			
12									-			
13 14									-			
15												+
16									_			+
17									-			
18									-			1
19									-			
20				•					-			
21									-			
	Travel Sub-Total	OR EACH LINE ITEM AROVE - PLEASE EXPLAINE IN DET		· ·				· ·	-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	•			
28						-	1			
29							•			
30							1			
31							•			
32							-			
33							-			
34										
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40	UTV	6 seat UTV outfitted to support CBRNE mitigation and response mission.	New / Enhance / Past / Competitive	UASI	2.00	22,000.00	\$ 44,000.00		Operational	12VE-00-MISS Vehicle, Specialized Mission	UASI
41	Trailers	Trailer for the storage and trasnportation of UTV.	New / Enhance / Past / Competitive	UASI	2.00	13,300.00	\$ 26,600.00		Operational Coordination	12TR-00-TEQP Trailer, Equipment	UASI
42							\$ -				
43							\$ -				1
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 70,600.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The goal of this program to equip Las Veags Fire Rescue with 2, 6 seat UTV's outfitted for CBRNE response. Included in this budget are 2 enclosed trailers to store and move the UTV's to areas of operation.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 70,600.00)

PROJECT TITLE: PROPOSING/LEAD AGENCY: Project Manager Name/Title: Project Manager Contact Info: Addl Project Manager Name/Title: Addl Project Manager Contact Info: Phone: (702) 271-0480 Email: krosette@lasvegasnevada.gov Craig Cooper Phone: (702) 236-9597 Email: ccooper@lasvegasnevada.gov Priscilla Wdowiak Phone: (702) 229-6045 Email: pwdowiak@lasvegasnevada.gov	evada Homeland Security	y Grant Prograr	n (HSGP) RESUBMISSION	PROJECT ID:	PP
PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated compability. Reference the Federal tempency and winter (dentify the proposed strategic capacity) will all for for Nove, capability. Ferson or operating picture allows for more accurate mitigation facilic employment of common operating picture allows for more accurate mitigation facilic employment and response objective development. PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated cocapability. Reference the Federal tempency Manager Agency (FEMA) list of Core Capabilities here: https://fema.gov/core-capabilities/ https://www.fema.gov/pdf/prepared/crosswalk.pdf FFY19 Strategic Capacity Maintained*: Not Applicable PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal tempency Manager may be project to the capacity (NCAS) FYT19 projects and Rescue CBRAIL with the strategic capacity, project type, and associated core capability. Reference the Federal tempency Manager and Rescue CBRAIL with with a remotely operated robotic platform with integrated HazaMay CBRAIC monitor capabilities. This capabilities will will allow for faster development of common operating picture allows for more accurate mitigation tactic employment and response objective development. PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated cocapability. Reference the Federal tempency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ https://www.fema.gov/pdf/prepared/crosswalk.pdf FFY19 Strategic Capacity Maintained*: Not Applicable PROPOSED STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with your MAINTAINED project FFY19 Strategic Capacity Strategic Capacity to be maintained. If the Strategic capacity ch	oject Proposal for FFY19	HSGP Funding	Description	Date Submitted	4/30/19
Project Manager Name/Title: Project Manager Contact Info: Add Project Manager Name/Title: Phone: (702) 271-0480 Email: krosette@lasvegasnevada.gov Craig Cooper Add Project Manager Name/Title: Phone: (702) 236-9597 Email: cooper@lasvegasnevada.gov Craig Cooper	PROJECT TITLE:	CBRNE Remote Mor	nitor Platform		
Project Manager Contact Info: Add Project Manager RomerTitle: Craig Cooper Phone: (702) 271-0480 Email: krosette@lasvegasnevada.gov Add Project Manager Contact Info: Craig Cooper Phone: (702) 236-9597 Email: cocoper@lasvegasnevada.gov Project is New Info Project Info	PROPOSING/LEAD AGENCY:	Las Vegas Fire Reso	ue		
Add Project Manager Name/Title: Craig Cooper Emails Crooper@lasvegasnevada.gov	Project Manager Name/Title:	Karl Rosette Fire Tra	ining Officer		
Add Project Manager Contact Info: inance/Grant Contact Info: inance/Grant Contact Info: CLASSIFICATION - Check the primary intention of the Proposed Project: CLASSIFICATION - Check the primary intention of the Proposed Project: CCASSIFICATION - Check the primary intention of the Proposed Project: CCASSIFICATION - Check the primary intention of the Proposed Project: CCASSIFICATION - Check the primary intention of the Proposed Project: CCASSIFICATION - Check the primary intention of the Proposed Project: CCASSIFICATION - Check the primary intention of the Proposed Project in this category must align with NCHS PY16-18 priorities. MAINTAIN Project will MAINTAIN AN APPROVED FFV19 STRATEGIC CAPACITY* PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement. Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HDM MUCH (quantify the capability improvement at a high lavel for example: "10 (stablish), improve, example, etc.) of WAINTAIN ARCH (Quantify the Capability improvement at a high lavel for example: "10 (stablish), improve, example, etc.) of WAINTAIN CORE CAPABILITY (or CAPABILITIES (crossic aliquing with Nevada Commission on Homeland Security (NCHS) FTV18 priorities (See #10)]. EOR WAID (dentify the direct users/beneficaties of the capability): and WAIREE (identify the geographic locale: example: state-wide, LV Urban Area, NE NV. or Reno, etc.). FELD IS LIMITED TO VISIBLE TEXT BC. The goal of this project is to equip the Las Vegas Fire and Rescue CBRNE unit with a remotely operated robotic platform wit integrated HazMat/ CBRNE monitor capabilities. This capability will allow for faster development of common operating picture allows for more accurate mitigation tactic employment and response objective development. PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated co capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://w	Project Manager Contact Info:	Phone: (702) 271-04	80 Email: krosette@lasvegasnevad	la.gov	
Proposed Strategic Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf Proposed Strategic Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf Proposed Project type Supporting Strategic Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf Proposed Project is new [No grant-funded projects have recently addressed this capability within the past five years; OR or project is NEW [No grant-funded projects have recently addressed this capability within the past five years; OR or project will MAINTAIN Project will MAINTAIN AN APPROVED FY19 STRATEGIC CAPACITY* AMAINTAIN Project will MAINTAIN AN APPROVED FY19 STRATEGIC CAPACITY* PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement. Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW.mUCH [quantify the capability improvement at a high level for example: "To (establish, improve, expand, double, sustain, etc.)] or WHAT CORE CAPABILITY for CAPABILITIES [consistation] with the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW.mUCH [quantify the capability improvement at a high level for example: "To (establish, improve, expand, double, sustain, etc.)] or WHAT CORE CAPABILITY for CAPABILITIES [consistation] with the goal of this project is to equip the Las Vegas Fire and Rescue CBRNE unit with a remotely operated robotic plantified project is to equip the Las Vegas Fire and Rescue CBRNE unit with a remotely operated robotic plantorm with integrated HazaM/AU CORRNE monitor capabilities. This capability with the project type, and associated to capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf Pry19 Strategic Capacity Maintained*: Not Applicable Press Strategic Capacity Maintained*: Not Applicable Press Strategic	Addl Project Manager Name/Title:	Craig Cooper	•		
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evada Homeiand Sec	urity Grant Prog	ram (HSGP) RESUBIMISS	ION	PROJECT ID:	PP
oject Proposal for FF	Y19 HSGP Fundi	ng Description		Date Submitted	4/30/19
OJECT TITLE REFERENCE	: CBRNE Remote	Monitor Platform			
PROCUREMENT - Indica	ate the method of pr	ocurement associated with thi	is proje	ect:	
Request for Proposal	Provide a brief explan	nation on your method of procuremer	nt - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX
O Sole Source		will develop specifications and hold	l an ope	en bid process to pu	rchase this
Internal	equipment.				
PROJECT IMPLEMENTA	TION - Describe how.	and by whom, the Proposed Proje	ct will	he implemented . De	scribe
		plished, identifying who (i.e. staff, contracto		•	00.100
be selected. Items will be	procured through City of	lk. Bid specifications will be develor of Las Vegas procurement process. service. This time line may vary du	Items	will be received. Tra	aining on the
section is for you to tell t		the participating agency(s) and juring the money for your project - I Political Jurisdiction (City, County, State, etc.)	f it's yo		ncy]
12(a) Las Vegas Fire Res	scue	City of Las Vegas	Karl R	Rosette	
12 (b)					
12 (c)					
		L			
Maintenance of CBRNE se	ensors on the device wil	al obligation created by the Project, Il have associated maintenance cosorm consistency of sensors on this	sts. On	e specification of this	s unit will be
	unt is derived from Field	ect's funding percentage makeup of S '15g - PROJECT TOTALS' on Page #3	itatewic	de -vs- UASI is noted b	elow for

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID:
Project Proposal for FFY19 HSGP Funding Description Date Submitted PP Date Submitted 4/30/19 PROJECT TITLE REFERENCE: CBRNE Remote Monitor Platform

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Remotely operated robotic platform with integrated CBRNE sensors.	\$ 150,000.00		\$ 150,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: PP **Date Submitted**

4/30/19

PROJECT TITLE REFERENCE:

CBRNE Remote Monitor Platform

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Specification Development	10/01/19	10/31/19	1
3	Bid Development	10/31/19	11/29/19	1
4	Bid Posted	11/29/19	01/02/20	2
5	Selection of Bid	01/02/20	02/03/20	1
6	Procurement	02/03/20	03/02/20	1
7	Manufacture Time	03/02/20	01/29/21	10
8	Receive	01/29/21	02/26/21	1
9	Training for Operation	02/26/21	03/26/21	1
10	Place in service.	03/26/21	04/30/21	1
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	This device would have integrated CBRNE sensors for Weapon of Mass destruction mitigation and detection.
•	
size	
xt b	
visible text box	b. Doos this project clim with the FFV40 startesis conscition? VEC A NO D Fundate halous
ip/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
visi	Las Vegas Fire Rescue is not named in the Strategic Capacities, Las Vegas Fire and Rescue does work with LVMPD ARMOR
9	and Las Vegas Fire and Rescue Bomb Squad as a response partner as recognized in MOU.
limitied	
i	
are I	
2	
J. 'C	
and	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
ີ້ ເັ້	This project is scalable with utilizing options of platforms with reduced capability.
g	

Neva	Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: PP												
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/30/19									
PROJ	ECT TITLE REFERENCE:	CBRNE Remote Monitor Platform											
	d. Can this project continue w	ithout funding? YES NO NO Explain below.											
Fields "d" and "e" are limitied to visible text box size	This capability does not currentl typically utilized.	y exist in an integrated platform. Improvised units are possi	ible for deployment b	ut are not									
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO 💿 Ex	xplain below.										
Fields "d" and "e" are	This project will remain in South	ern Nevada. CBRNE is a regional response unit.											
18)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 T		OSE ONE:									
	VEC Agangu HAS partio	ripated in the 2018 Threat and Hazard Identification Risk A.	ssassmant (TUIDA) S	urvov									
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR.	A) Survey									
	ADDITIONAL COMMENTARY limited to the visible text box	Y - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field is									

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	EM DETAIL I	ושטטטבו						
	Agency Name	Las Vegas Fire Rescue 500 North Casino Center Las Vegas NV 89101	nter Project Manager Karl Rosette Grant Man Name & Contact # 702-271-0480 Name & Co		Grant Manager Name & Contact #	Priscilla Wdowiak- 7		PP				
	IJ TITLE:	Remote Monitor Platform										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3							1	\$ -		 		
4								\$ -		 		
,	Personnel Sub-Total							\$ -				
PERSONN	IEL COST NARRATIVE REQUIRED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	FLIVERABLES I	ARRATIVE WILL	BE USED TO ENSURE ITEMS UP	STED WILL BE COM	IPI ETED IN THE	GRANT CYCLE	ITEMS MAY NOT	BE PURCHASED OF	ITSIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	•			
28						-				
29							-			
30							-			
31							-			
32							-			
33					<u> </u>		-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$ -			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening										
40	Robotics	Remotely operated robotic platform with integrated CBRNE montioring capability.	New / Enhance / Past / Competitive		1.00	150,000.00	\$ 150,000.00			03OE-07-ROVL Vehicles, Remotely Operated, Land	UASI
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48				1			\$ -				-
49	EQUIPMENT Sub-Total						\$ 150,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The goal of this project is to equip Las Vegas Fire and Rescue CBRNE with a remotely operated robotic platform with integrated CBRNE monitoring capabilities.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 150,000.0	0

Ν	evada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	QQ							
Pi	roject Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/23/19							
	PROJECT TITLE:	Southern Nevada Incider	-									
2)	PROPOSING/LEAD AGENCY:	Clark County Office of Er	mergency Management									
3)	Project Manager Name/Title:	Larry Haydu, Assistant F	ire Chief									
	Project Manager Contact Info:	Phone: (702) 455-5710	Email: LHaydu@ClarkCountyNv	.gov								
4)	Addl Project Manager Name/Title:											
-	Addl Project Manager Contact Info:	Phone:	Email:									
5)	Finance/Grant Contact Name/Title:	Karen Taylor	•									
Ť	Finance/Grant Contact Info:	Phone: (702) 455-6183	Email: Karent@ClarkCounty.Nv.	.gov								
6)	CLASSIFICATION - Check the pl	rimary intention of the Pi	roposed Project:		Choose one:							
			ecently addressed this capability with ects in this category must align with									
	MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*											
	*All NEW projects are competitive											
7)	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and WHERE (identify the geo	e Proposed Project in terms of C e: "To (establish, improve, expar meland Security (NCHS) FFY18 p ographic locale; example: state-v	APABILITY. The statement should descril nd, double, sustain, etc.)]; OF WHAT CO riorities (See #10)]; FOR WHO (identify the state of the stat	be HOW MUCH [quantify DRE CAPABILITY (or CAPAI) he direct users/beneficiar.]. FIELD IS LIMIITED TO V	BILITIES [consider ies of the ISIBLE TEXT BOX.							
	Management team(IMT) will incr	ease the Operational Coo	rdination effectiveness in multi-ag	jency response durin	g the event.							
8)	PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities h	Emergency Management	Agency (FEMA) list of Core Capabi	lities and the Crosswa	alk of Target							
	FFY19 Strategic Capacity Maintai HSGP Project Type Supporting Strat If OTHER, please choose FFY16-18 N	tegic Capacity: If this project		jic capacity, please cho	ose OTHER							
	Core Capability aligned with Mainta											
	*FFY19 Strategic Capacities are sub	oject to change pending Nevo	ada Commission on Homeland Secur ice of Funding Opportunity when rel	rity Approval on 3/26/2	19 and/or							
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment of	FICATION - Describe how with the strategic capacity to be	this project aligns with the strong maintained. If it does not, please justify	ategic capacity chose	en. Describe the SIBLE TEXT BOX.							
		and coordinated operation	capacity; which will increase Sout al structure that integrates all crit team.									

evada	Homeland Secu	irity Grant Prog	ram (HSGP) RESUBMISSIC	ON PROJECT I	D: QQ
roject I	Proposal for FFY	/19 HSGP Fundi	ng Description	Date Submit	ted 4/23/19
ROJECT	TITLE REFERENCE:	Southern Nevad	a Incident Management Team		
) PRO	CUREMENT - Indicat	te the method of pr	ocurement associated with this	project:	
O Re	equest for Proposal	Provide a brief explan	nation on your method of procurement	- FIELD IS LIMITED TO	VISIBLE TEXT BOX:
_			Q for the contracted work, and use c		
_	ternal				
	L	ION Describe how	and by whom the Drange of Draine		
			and by whom, the Proposed Project plished, identifying who (i.e. staff, contractor,	•	
			vill request RFQ for the contracted wo	-	
	nases.		·		
≤					
TELUIS LIMITED TO VISIBLE TEXT BOX					
į					
1					
<u> </u>					
<u>:</u>					
	on is for you to tell us	s WHO will be received FD, PD, etc.) epartment/Office of	the participating agency(s) and jurison ing the money for your project - If I Political Jurisdiction (City, County, State, etc.) Clark County		agency]
12 (b)					
12 (c)					
SUST	AINMENT - Identify	any continuing financia	al obligation created by the Project, a	nd proposed funding	solution
Clark	County Office of Eme	rgency Management w	vill need to apply for continued yearly	sustainment of this	nrogram for the
	nern Nevada Incident N		uture years may be at a reduced rate		
are c	ompleted.				
South are c					
STAT	EWIDE and/or UAS	I BENEFIT - Your proje	ect's funding percentage makeup of Sto	ntewide -vs- UASI is no	oted below for
			'15g - PROJECT TOTALS' on Page #3		-
Γ	0% 100%	1			
L	0% 100%				
S	tatewide Urban Ar	ea			

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION **Project Proposal for FFY19 HSGP Funding Description**

PROJECT ID: QQ Date Submitted 4/23/19

PROJECT TITLE REFERENCE:

Southern Nevada Incident Management Team

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubT
Hire contractor to develop standard operating procedures, develop strategies for IMT, by-laws, team training evolutions			
	\$ 50,000.00		\$ 50,00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubT
Operational expense of IMT (including but not limited to tires, printer cartridges, radio repairs, uniforms, radio mics, safety equipment,			
	\$ 20,000.00		\$ 20,00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
IMT Team Vehicle -Truck-(\$50,000) 6- laptop and software-(\$14,400) 4-printers-(1,600) 10-Radios and Accessories-(18,412.00)	\$ 84,412.00		\$ 84,41
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubT
Position Specific type training(305), (\$20,000)	\$ 20,000.00		\$ 20,00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubT
			\$ 0.0
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubT
			\$ 0.0
15g) PROJECT TOTALS	LV-UASI	State-wide	TOT

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

_QQ 4/23/19

PROJECT TITLE REFERENCE:

Southern Nevada Incident Management Team

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Develop RFQ for contracted employee for IMT	10/01/19	01/01/20	3
3	Get quotes for purchasing process	02/01/20	06/30/20	3
4	Receive and implementation	07/01/20	11/30/20	5
5	Invoicing process	11/30/20	01/30/21	3
6	Continued project implementation	02/01/21	07/30/21	6
7	Close out process	08/01/21	08/31/21	1
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to to	errorism? YES 💽	No 🔵	Explain below.

During a terrorist or other emergency event, the community need to have a trained Incident Management team to assist with response, recovery efforts to deter, detect, protect citizens and visitors to Clark County.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with Operational Coordination by coordinating training and organizational of procedures for better response and recovery efforts of the Southern Nevada Incident Management Team to protect the citizens and visitors to Clark County

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The reduction will be measured by less progress in the objective of better prepared and more effective Incident Management Team.

LD LC EEL	y Grant Program (HSGP) RESUBMISSION PROJECT II	D: QQ
ect Proposal for FFY19	HSGP Funding Description Date Submitt	ed 4/23/1
JECT TITLE REFERENCE:	Southern Nevada Incident Management Team	
d. Can this project continue w	vithout funding? YES NO DExplain below.	
No, Clark County does not have	e budget to fund for this project.	
e. Does this project provide a	MEASUREABLE statewide benefit? YES NO (•) Explain below.	
None		
THIRA COMPLETION - Pleas	e indicate the participation level in completing the 2018 THIRA Survey. CI	HOOSE ONE:
	· · · · · · · · · · · · · · · · · · ·	
YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification Risk Assessment (THIR	A) Survey
NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Risk Assessment (1	THIRA) Survey
ADDITIONAL COMMENTAR	Y - Please indicate any additional project commentary you feel may be in	nportant. Field
		,
limited to the visible text box		,
		,
		,
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		<u>, </u>
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		,
		•

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEM DETAIL	BUDGET						
	Agency Name	Clark County OEM	Project Manager Name & Contact #	Larry Haydı	1	Grant Manager Name & Contact #	Karen Taylor					QQ
	IJ TITLE:	Southern Nevada Incident Managemnet	Team									
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				_
2							 	\$ -		-		
4							†	\$ -				†
	Personnel Sub-Total							\$ -				
EDSONN	EL COST NADDATIVE DECLIIDER	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOCITIONS AND D	ELIVEDABLES I	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMS LIC	TED WILL BE COM	ADI ETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITC

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		 Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			-
14 15												
16									-			
17									_			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			
24									-			-
26												
27									-			+
	Travel Sub-Total								-			
TRAVEL		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	ALL EACH LINE ITEM AND DELIV	FRARIES NAG	PATIVE WILL BE II	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITEM	IS MAY NOT BE	PURCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.



Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27										
28						-				
29							-			
30							-			
31							-			
32							-			
33			·				-			
34							-			
35			·							
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36			New / Enhance / Past / Competitive		1.00	50,000.00	\$ 50,000.00	Approved Strategic Capacity	Operational Coordination	UASI
37			New / Enhance / Past / Competitive		1.00	20,000.00	\$ 20,000.00	Approved Strategic Capacity	Operational Coordination	UASI
38		tires,trailer mainteance,printer castridges,go bags,office supplies,radio and equipment repairs,crew uniforms,minor equipment replacements			<u>-</u>		\$ -			
39	Organization Sub-Total						\$ - \$ 70,000.00			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

this will allow Clark County to hire a contractor to future develop Southern Nevada Incident Management Team by standard operation procedures, team training, develop by-laws. The small operational budget includes items such as tires, trailer mainteance, printer cartridges, go bags, office supplies, radio and equipment repairs, crew uniforms, minor equipment replacements for the team.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		IMT team Vehicle-Truck	New / Enhance / Past / Competitive		1.00	50,000.00	\$ 50,000.00	Approved Strategic Capacity	Operational Coordination	12VE-00-CMDV Vehicle, Command, Mobile	UASI
41		laptops and software	New / Enhance / Past / Competitive		6.00	2,400.00	\$ 14,400.00	Approved Strategic Capacity	Operational Coordination	04HW-01-INHW Hardware, Computer, Integrated	UASI
42		printers	Maintain	UASI	4.00	400.00	\$ 1,600.00	Approved Strategic Capacity		21GN-00-MAIN Maintenance	UASI
43		King P-150 Radios	Maintain	UASI	10.00	1,451.20	\$ 14,512.00	Approved Strategic Capacity		06CP-01-MOBL Radio, Mobile	UASI
44		microphones	Maintain	UASI	10.00	80.00	\$ 800.00	Approved Strategic Capacity	Operational Coordination	06CP-03-PRAC Accessories, Portable Radio	UASI
45		Clam Shell Batteries	Maintain	UASI	10.00	35.00	\$ 350.00	Approved Strategic Capacity	Operational Coordination	06CP-03-PRAC Accessories, Portable Radio	UASI

		Antenna	Maintain					Approved		06CP-03-PRAC Accessories, Portable	
46		Antenna		UASI	10.00	35.00	\$ 350.00	Strategic Capacity	Coordination	Radio	UASI
		Charger	Maintain					Approved		06CP-03-PRAC Accessories, Portable	
47		· ·		UASI	10.00	80.00	\$ 800.00	Strategic Capacity		Radio	UASI
										06CP-03-PRAC	
		Li-Ion Battery	Maintain							Accessories, Portable	
48				UASI	10.00	100.00	\$ 1,000.00	Strategic Capacity			UASI
										06CP-03-PRAC	
		Leather Case	Maintain							Accessories, Portable	
49				UASI	10.00	60.00	\$ 600.00	Strategic Capacity	Coordination	Radio	UASI
	EQUIPMENT Sub-Total						\$ 84,412.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

OEM will need to purchase a truck for the So Nevada IMT be to used in response activities, the laptops, radios and accessories are needed for deployed IMT members on location.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$	
	Training Sub-Total					_					\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58		Position specific type Training(305),	Maintain	UASI			1		Approved Strategic Capacity	Operational Coordination	\$ 17,500.00	UASI
59		Water, lunch	New / Enhance / Past / Competitive				1	2,500.00	Approved Strategic Capacity	Operational Coordination	\$ 2,500.00	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ 20,000.00	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

provide additional position training for the IMT team, water for deployments and lunch for training.

					Budget Total		
					Request	\$ 174,412.00	

N	evada Homeland Security	y Gran	it Program (HSGP) RESUBMISSION	PROJECT ID:	RR
P	roject Proposal for FFY19	HSGP	Funding De	escription	Date Submitted	4/27/19
1)	PROJECT TITLE:	Security	y Skills Profession	nal Development for Information/G	Cyber Security Profes	sionals
2)	PROPOSING/LEAD AGENCY:	Nevada	a Office of Informa	ation Security (OIS)		
3)	Project Manager Name/Title:	Robert	Dehnhardt, State	Chief Information Security Office	r	
	Project Manager Contact Info:	Phone:	(775) 684-7322	Email: rwdehnhardt@admin.nv.o	gov	
4)	Addl Project Manager Name/Title:	Shaun	Rahmeyer, DPS I	Div Admr, Cyber Defense Coordin	nation	
	Addl Project Manager Contact Info:		(775) 687-9051	Email: srahmeyer@dps.state.nv		
5)	Finance/Grant Contact Name/Title:			esearch Planning Grant Managen		
	Finance/Grant Contact Info:		(775) 684-5855	Email: awmaffei@admin.nv.gov		01
6)	CLASSIFICATION - Check the p	rimary ii	ntention of the Pi	roposed Project:		Choose one:
		-		ecently addressed this capability wit lects in this category must align with		
	MAINTAIN Project will MAINTA	AIN AN AF	PPROVED FFY19 ST	RATEGIC CAPACITY*		0
	*All NEW projects are competitive					
7)	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and WHERE (identify the geometric described by the second	e Proposed e: "To (esta meland Se	d Project in terms of C ablish, improve, expar curity (NCHS) FFY18 p	APABILITY. The statement should descrind, double, sustain, etc.)]; OF WHAT CO priorities (See #10)]; FOR WHO (identify the statement should describe the statement should be statem	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPAI he direct users/beneficiar	ies of the
				g, through the SANS Global Inforcertifications, or other SANS cybe		
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emerger	ncy Management	Agency (FEMA) list of Core Capabi	lities and the Crosswa	ılk of Target
	FFY19 Strategic Capacity Maintai	ined*:	CYBERSECU	JRITY		
	HSGP Project Type Supporting Strat	_	*	•		
	If OTHER, please choose FFY16-18 I				rity aligned with your pro	oject
	Core Capability aligned with Mainta	ained Pro	ject: CYBERSECL	JRITY [Mission Area - PROT]		
				ada Commission on Homeland Secu ice of Funding Opportunity when re		19 and/or
9)				v this project aligns with the streem aintained. If it does not, please justify		
	providing training for information	/cyber se their abili	ecurity profession ty to protect the S	ess (CYBERSECURITY) Strategi als to update and improve their s state's critical technology infrastru of service.	kills or learn new skill	s. This will

11) PROJECT IMPLEMENTATION - *Describe how, and by whom, the Proposed Project will be implemented.* Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

The State, Tribal, County and City candidates are to be registered to participate in the professional development training. Registration for State Executive Branch candidates will be coordinated through the Office of Information Security, while County, City, Tribal and non-Executive Branch State candidates will be coordinated through the Office of Cyber Defense Coordination. Establish Professional Development with approvals from DEM training office for the SANS Global Information Assurance Certification (GIAC) Security Essentials, SANS GIAC Intro to Cyber Security, or other SANS cyber professional development certification programs, limited to the number of vouchers available. The professional development must be completed by May, 2021. Develop evaluation process and evaluate training process results at conclusion. AEP# 05NP-00-IDPS. This will provide 60 ppl cybersecurity professional development of SANS Voucher Program for Long Course, Certification and evaluation through June 30, 2021.

Vouchers will be obtained and distributed under the supervision of the grant project co-managers. Recipients will be able to choose their course from the SANS long course catalog; voucher use is tracked on the SANS portal. The project co-managers will meet quarterly to track voucher usage and course progress; vouchers that have been distributed but not used may be pulled back and redistributed at the project co-managers' discretion to ensure timely and effective use of the training resources.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12 (a)	State of Nevada Office of Information Security and Executive Branch candidates	State of Nevada	Robert Dehnhardt, State Chief Information Security Officer, NV OIS
12(b)	Political Subdivision candidates - facilitated through the Nevada Ofc of Cyber Defense		Shaun Rahmeyer, DPS Div Admr, Ofc of Cyber Defense Coordination
12(c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

The GIAC certification will be valid for 4 years; after which, individuals and/or hiring agencies will be responsible for the continuation of the certification The GIAC certifications demonstrate a mastery of Information/Cyber Security skills recognized industry-wide and state agencies are expected to promote the GIAC continuance, budget authority prevailing. The 4 year timeline speaks to the overall value of this investment .

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

100% 0% Statewide Urban Area (SHSP) (UASI)

Internal

FIELD IS LIMITED TO VISIBLE TEXT BOX

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: RR Date Submitted 4/27/19

PROJECT TITLE REFERENCE:

Security Skills Professional Development for Information/Cyber Security Professionals

i)	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	ific. Identify (LV-UASI	<i>UASI and State</i> State-wide	<i>cost.</i> SubTotal
	Provide 60 ppl cybersecurity professional development, coordinated as described in item 11 above; SANS Voucher Program for SANS Global Information Assurance Certification (GIAC) Security Essentials, SANS GIAC Intro to Cyber Security, or other SANS cyber professional development certification programs		\$ 229,140.00	\$ 229,140.00
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
DOA SILE				\$ 0.00
	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
reids are minited to visible text box size				\$ 0.00
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
i icius al				\$ 0.00
	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
				\$ 0.00
	15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

__RR 4/27/19

PROJECT TITLE REFERENCE:

Security Skills Professional Development for Information/Cyber Security Professionals

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Grant award acceptance and approvals	09/03/19	12/08/19	3
3	Conduct Compliant Procurement Process	12/18/19	01/17/20	1
4	Create SANS Voucher Account for management of process	01/17/20	01/31/20	1
5	Complete ISO and vetted participant registration process for courses	02/03/20	04/30/20	3
6	Course Kickoff for authorized participants	05/04/20	05/29/20	1
7	Conduct training	06/01/20	05/03/21	12
8	Concurrent with training, perform quarterly checks to ensure training is progressing properly; evaluate voucher distribution and redistribute as required	06/01/20	05/03/21	12
9	Evaluate training process results	05/03/21	06/30/21	2
10	Close out the Grant	07/01/21	07/30/21	1
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Yes, the Security Skills Professional Development project has a nexus to terrorism. The highly damaging cyber based attacks or threats-of- attack against information systems may be made for a number of causes, to intimidate or coerce governments in pursuit of nefarious goals, converging terrorism with cyberspace with devastating results. Strengthening the knowledge base of cyber security professionals and readying the cyber professionals is a key part of the cyber defense and is part of the war-fighting domain.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, the Security Skills Professional Development project has directly aligned with the Nevada Commission on Homeland Security FY19 Priorities. The Nevada Commission on Homeland Security FY19 Priorities identified Cybersecurity as a Core Capability. Education and Awareness [CYBERSECURITY] was identified as a strategic supporting capacity.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

No, based on the pre-planning for this project with state agencies and other political subdivisions, the demand for this skill based training for the cyber security professionals in the state far exceeds the number of vouchers being proposed.

	_	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	RR
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/27/19
PROJ	ECT TITLE REFERENCE:	Security Skills Professional Development for Information/	Cyber Security Profes	ssionals
	d. Can this project continue w	thout funding? YES 💿 NO 🔵 Explain below.		
Fields "d" and "e" are limitied to visible text box size	may continue to offer cyber securesponsibility of the candidate's		f the GIAC certificatio	
imiti	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO DE	xplain below.	
Fields "d" and "e"	include all public safety state, tril	and the local participants.		
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018	THIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partice	pated in the 2018 Threat and Hazard Identification Risk A	Assessment (THIRA) S	urvey
	NO - Agency has NOT pa	rticipated in the 2018 Threat and Hazard Identification R	isk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any additional project commentary y	ou feel may be impor	rtant. Field is
	OIS Security Strategic Plan National Initiative for Cybersecu SANS Quote available, 60 vouc	IS Governance and Management Framework, and link wit rity Education (NICE) ners for Information/Cyber Security Professional candidate ps://www.sans.org/security-training/course-catalog-2019.p	es	

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEM DETAIL E	BODGET						
	Agency Name	Office of Information Security (OIS)	Project Manager Name & Contact #	Robert Dehnhardt, CISO, 775-684-7322		Grant Manager Name & Contact #	Alisanne Maffei, 775- 684-5855					RR
	IJ TITLE:	Security Skills Professional Developme	nt for Information/Cybe	t for Information/Cyber Security Professionals								
		One Budget Per Funding Stream										
		SHSP									1	
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1	n/a							\$ -				
2								\$ -				
3	Personnel Sub-Total						1	\$ -				
DED00111		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOOLTIONS AND D	EL IVER A DI EQ	NA DOATING WILL	LIGHT TO ENGLISH TEMPLE	OTED WILL DE CO.	3	ODANIT OVOL 5	ITEMS MAY NOT	DE BURGUAGER OF	TOURS THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ie#	CATEGORY		Select Purchase Type	Previous Funding Type	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above								
	5	n/a						\$ -			
	6							\$ -			
	7							\$ -			
		Fringe Sub-Total						\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPELIANCE)	Select Type				-		-			
9	n/a								-			
10									-			
11									-			
12									-			
13									-			
14			1						-			
15			ļ						-			
16									-			+
17					 				-			+
18	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27		Provide 60 ppl cybersecurity professional development; SANS Voucher Program for Long Course through June 30, 2021	New / Enhance / Past / Competitive		60	3,050.00	183,000.00	Cyber- Education Awareness		05NP-00-IDPS	SHSP
28		Provide 60 ppl cybersecurity professional development; SANS Voucher Program for Certification through June 30, 2021.	New / Enhance / Past / Competitive		60	769.00		Cyber- Education Awareness		05NP-00-IDPS	SHSP
29	Planning Sub-Total						\$ 229,140.00				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

To improve the core competencies in cybersecurity knowledge, skills and abilities of State, Tribal, County, and City Government Information Cyber/Security Professionals - statewide. The project is to provide Professional Development thorough SANS Voucher Program for Global Information Assurance Certification (GIAC) Security Essentials, SANS Intro to Cyber Security certifications, or other SANS long course cyber professional developments, limited to the number of vouchers available and must be completed by May, 2021. Cybersecurity professionals are typically recruited and valued for the SANS certifications and those cyber professionals employed by the state, tribal, counties and cities that complete this training would likewise be valued. As cyber attacks have increased, so has the demand for IT professionals who are training to identify, protect against, and stop such attacks. Vouchers will be obtained and distributed under the supervision of the grant project co-managers. Recipients will be able to choose their course from the SANS long course catalog; voucher use is tracked on the SANS portal. The project co-managers will meet quarterly to track voucher usage and course progress; voucher that have been distributed but not used may be pulled back and redistributed at the project co-managers' discretion to ensure timely and effective use of the training resources.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity		Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36	n/a				ı	-	\$ -			
37							\$ -			
38					ı		\$ -			
39					·		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL								
	EHP Required prior to procurement / See 2nd tab to determine whether your project requires EHP Screening									
40	n/a						\$ -			
41							\$ -			
42							\$ -			
	EQUIPMENT Sub-Total						\$ -			

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
	EHP Required prior to pro-	curement / See 2nd tab to determine whether										
50		ect requires EHP Screening									\$ -	
51	no FEMA/DHS training										\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58	n/a										\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 229,140.	00

Nevada Homeland Security	y Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	SS								
Project Proposal for FFY19	HSGP Funding De	scription	Date Submitted	4/26/19								
1) PROJECT TITLE:	UNLV Venue Security En	hancements										
2) PROPOSING/LEAD AGENCY:	University Police Services	s, Southern Command										
3) Project Manager Name/Title:												
Project Manager Contact Info:	Phone: (702) 895-2634	Email: adam.garcia@unlv.edu										
4) Addl Project Manager Name/Title:	Richard Dohme, Assistar	t Chief										
Addl Project Manager Contact Info:	Phone: (702) 895-4741	Email: richard.dohme@unlv.edu										
5) Finance/Grant Contact Name/Title:	ns Writer											
Finance/Grant Contact Info: Phone: (702) 895-5792 Email: ariana.renick@unlv.edu												

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Being in close proximity to the Las Vegas Strip. UNLV venues share similar threats and hazards and are a potential target for terrorism and other man-made emergencies. Security threats identified in previous semesters have led us to conclude that the current systems in place around the University of Nevada. Las Vegas are not adequate to support the growing number of visitors to the educational, sporting and entertainment events held each year. In 2018 UNLV hosted 21 events at Sam Boyd Stadium (224,000 attendees), 49 events at Cox Pavilion (35,000 attendees), and 138 events at the Thomas & Mack Center (807,000 attendees). To improve safety and security for these events and venues, UNLV proposes to purchase 22 mobile walk through metal detectors to reduce man-made risks associated with these activities. Additionally, these metal detectors may be utilized by partner agencies within southern Nevada and throughout the Urban Area. UNLV is transforming its safety and security protocols and has begun a detailed Planning process to upgrade its Emergency Operations Plan and associated security annexes to continue to strengthen community (University) resilience. The metal detectors will allow for detection and identification of concealed threats/weapons. Establishing these enhanced security measures (updated plans and use of metal detectors), will significantly reduce risks associated with the high profile events held at UNLV.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

PLANNIING

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: Please select the appropriate FY16-18 NCHS priority aligned with your project

Core Capability aligned with Maintained Project: Not Applicable

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

University Police Services and UNLV's Office of Emergency Management's common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campus, keeping UNLV students and staff, campus visitors and event attendees, and surrounding community secure and safe. UNLV has identified a need for enhanced security (mobile metal detectors) at multiple, high profile events. Even though metal detectors may also serve as a prevention tool, they will enhance community (University) resilience and reduce potential risks identified during UNLV's broader planning process.

Nev	ada Homeland Sec	urity	Grant Progr	am (HSGP) RESUBM	ISSION	PROJECT ID:	SS
Pro	ject Proposal for FF	Y19	HSGP Fundin	g Description		Date Submitted	4/26/19
PRO	JECT TITLE REFERENCE	:	UNLV Venue Sec	curity Enhancements			
10)	PROCUREMENT - Indica	ate the	e method of pro	curement associated witl	h this proj	iect:	
	Request for Proposal	Pro	vide a brief explana	ition on your method of procur	ement - FIEI	LD IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source			es has identified the equipme	nt for purch	nase that best suits th	ne needs of the
	Internal	venue	es, events, and car	npus population.			
11)	PROJECT IMPLEMENTA	TION	- Describe how, a	nd by whom, the Proposed F	Project will	<i>be implemented.</i> De	scribe
				ished, identifying who (i.e. staff, cor	tractor, or ?)	will perform what work	
	University Police Services	will pe	rform the following	g implementation steps:			
FIELD IS LIMITED TO VISIBLE TEXT BOX	- Conduct final needs assonated - Conduct final site visith - Distribute Request for Property - Select Vendorhorder Metal Detectorshorder - Order Metal Detectorshorder - Update security plan, inconstruction - Establish organizationalhorder - Test metal detectorshorder - Deploy metal detectorshorder - Regular testing and main	roposal cluding proced	metal detector depures.				
12)	section is for you to tell		O will be receiving	e participating agency(s) and ng the money for your proje Political Jurisdiction (City, County, Stat	ct - If it's y		ncy]
	12(a) University Police Se	ervices		CSN, DRI, NSC, UNLV	Adan	n Garcia, AVP & Dire	ctor
	12(b)						
	12 (c)						
13)	SUSTAINMENT - Identify	y any co	ontinuing financial	obligation created by the Pro	ject, and pi	roposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX	University Police Services	will be	responsible for m	aintenance and upkeep for th	e lifetime o	f the equipment.	
14)				t's funding percentage makeup 15g - PROJECT TOTALS' on Page	-	de -vs- UASI is noted b	pelow for
	0% 1009	<u>/</u>					

Statewide Urban Area

(UASI)

(SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

PROJECT ITLE REFERENCE:

UNLV Venue Security Enhancements

PROJECT ID: SS

Date Submitted 4/26/19

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	pecific. Identify L LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
22 - Garrett PD 6500i Enhanced Pinpoint Walk-Through Metal Detectors and ancillary parts	\$ 135,967.45		\$ 135,967.4
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal \$ 0.00
	LV-UASI	State-wide State-wide	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			
			\$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION **Project Proposal for FFY19 HSGP Funding Description** PROJECT TITLE REFERENCE: **UNLV Venue Security Enhancements**

PROJECT ID:

SS

Date Submitted

4/26/19

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Final needs assessment and site visit.	07/01/19	07/12/19	1
3	Request for Proposal and vendor selection.	07/15/19	08/16/19	1
4	Order and receive equipment .	08/19/19	10/18/19	2
5	Update security plan, including metal detector deployment locations.	08/19/19	09/20/19	1
6	Establish operational procedures.	09/23/19	10/18/19	1
7	Install and test equipment.	10/21/19	11/22/19	1
8	Establish mutual-aid agreements.	09/23/19	12/20/19	3
9	Deploy equipment.	12/02/19		1
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

According to the Homeland Security Digital Library, on December 17, 2003, President Bush issued Homeland Security Presidential Directive 7 establishing a national policy for Federal departments and agencies to identify and prioritize critical infrastructure and key resources to protect them from terrorist attacks. The Department of Homeland Security and Congress identified public assembly facilities as part of this critical infrastructure. These metal detectors will serve as a counter-terrorism and security measure, significant in making attendees feel safer and effective at stopping an assailant from gaining access to the stadium – requiring little time invested to combat a potentially lethal threat.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

University Police Services and UNLV's Office of Emergency Management's common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campus, keeping UNLV students and staff, campus visitors and event attendees, and surrounding community secure and safe. UNLV has identified a need for enhanced security (mobile metal detectors) at multiple, high profile events. Even though metal detectors may also serve as a prevention tool, they will enhance community (University) resilience and reduce potential risks identified during UNLV's broader planning process.

c. Can this project funding request be reduced? Is it scaleable? YES () NO () Explain below.

Although the number of metal detectors cannot be reduced to ensure all entrances are screened, University Police Services can look into other viable options that might be available, including phasing in screening locations or possibly renting equipment for auxiliary entrances/locations.

leva	ada Homeland Security	/ Grant Program (HSGP) RESUBMIS	SSION	PROJECT ID:	SS
roj	ect Proposal for FFY19	HSGP Funding Description		Date Submitted	4/26/19
ROJ	ECT TITLE REFERENCE:	UNLV Venue Security Enhancements			
	d. Can this project continue w	ithout funding? YES NO • Explain below.			
"e" are limitied to visible text box size		HSGP funding. Funding is not currently available for security measures, or employ the use of metal determined the security measures, or employ the use of metal determined the security measures, or employ the use of metal determined the security measures.			ythen
nitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES O	NO O E	xplain below.	
Fields "d" and "e" are l	October 1, Federal Appeals Cou over a million visitors. Additiona to be utilized by partner agencie consolidation of University Police	tate, and regional events, including 2016 Presider rt visits Nevada Supreme Court visits, National Fir Ily, University Police Services plans to establish ms within southern Nevada and throughout the Urba e Services, Southern Command this equipment caurch Institute, Las Vegas, Nevada State College, a	nals Rode autual-aid an Area. In be dep	eo LVCVA, NBA Sum partner agreements In accordance with th loyed for use on all C	mer League for equipment ie ollege of
8)	THIRA COMPLETION - Please	indicate the participation level in completing th	ne 201 8 1	THIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification	on Risk A	ssessment (THIRA) Si	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identifi	ication Ri	sk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	l - Please indicate any additional project comme	entary yo	ou feel may be impor	tant. Field is
	ceremonies, Federal Appeals C which draws over a million visito tragedy. Additionally, the Thom the Southern Nevada Health Dishave installed metal detectors a Conference which has required 2020. Lastly, the Department of detector technology in their standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard metal detector technology in the standard m	state, and regional events, including the 2016 Presourt visits, Nevada Supreme Court visits, National ors. The Thomas & Mack Center served as an areas and Mack Center is a designated Mega-Point of strict. UNLV has been unable to follow suit with sint entrances as part of their standard security operall schools within their conference to have metal of thomeland Security has recommended all MLB, I dardized security practices. The installation of metal its surrounding community during all of the above	Finals Ro a of refug of Dispensial even ations. The letectors of NFL, NHL etal detections	odeo, and NBA Sumr ge for victims of the 1 sing (POD) by Clark (at arenas around the c his includes the South in place at their venue , and NBA events inc tors will help to ensur	ner League October County and country that n Eastern es by fall of clude metal

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LIIVE II	EM DETAIL	DODGET	_				
	Agency Name	University Police Services				Grant Manager Name & Contact #	Ariana Ren	ick 702-89:	5-5792		SS
	IJ TITLE:	UNLV Venue Security Enhancements									
		One Budget Per Funding Stream									
		UASI									
_ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3								\$ -			
4	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						٠			
9									1			
10									-			
11									-			+
13									-			+
14									-			
15												
16									-			
17									-			
18									-			1
19	Travel Sub-Total								-			
TDAVEL (OR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	ALL EACH LINE ITEM AND DELL	EDADLES NAS	DATIVE WILL BE I	ISED TO ENGLIBE ITEMS LISTED	WILL BE COMPLE	TED IN THE CO.	ANT CYCLE ITEM	IS MAY NOT BE	DUDCHASED OUTS	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					1	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		•				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether lect requires EHP Screening									
40		PD 6500 Enhanced Pinpoint Walk-Through Metal Detector - EZL Version & ADA Compliant Passageway Version	New / Enhance / Past / Competitive		22.00	5,745.00	\$ 126,390.00			02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
41		Permanent Magna Dolly for 30" & 32.5" width walkthrough detectors	New / Enhance / Past / Competitive		22.00	249.95	\$ 5,498.90	Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
42		Transportation Brace for 30" standard width detector & 32.5" width detector	New / Enhance / Past / Competitive		22.00	59.95	\$ 1,318.90	Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
43		10 ft. Jumper Cord to link multiple walk-thru units	New / Enhance / Past / Competitive		5.00	35.00	\$ 175.00	Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
44		Operational test piece designed to FAA 3-fun test resquirements	New / Enhance / Past / Competitive		1.00	59.95	\$ 59.95	Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
45		Operational test piece designed to represent small knife or box cutter	New / Enhance / Past / Competitive		1.00	24.95	\$ 24.95	Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
46		MZ 6100 Battery Module, lithium ion 14 A-Hr for portable applications	New / Enhance / Past / Competitive		5.00	499.95		Planning - Community Resilience		02EX-00-PBIE Equipment, Post- Blast Investigation	UASI
47							\$ - \$ -				<u> </u>
49				<u> </u>			\$ -		<u> </u>		
	EQUIPMENT Sub-Total						\$ 135,967.45				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED WILL BE COM

Zo @ \$5,745.00 = \$126,390
Zone lights on both the entry and exit sides, allowing the operator to view the alarmed object from any position. 8 located at the Main Entrance, 4 located at Strip View Pavilion, 3 located at Cox Pavilion Main Entrance, 2 located at University Entrane, 1 located at Section 104, 1 located at Front Lobby, 1 located at Cox Pavilion Ground Entrance, 1 located at TMC Tunnel, 1 located at Cox Tunnel. See supplemental documents for position map of metal detector locations.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55			·			·					\$ -	
56			•			•					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			<u> </u>			<u> </u>				\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 135.967.4	5

Ne	Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECTID: TT									
Pro	oject Proposal for FFY19	HSGP Fund	ling Des	cription		Date Submitted	4/23/	19		
) F	PROJECT TITLE:	Emergency Eve	ent Tracking	g System Maintenance						
) F	PROPOSING/LEAD AGENCY:	Clark County Of	ffice of Em	ergency Management						
F	Project Manager Name/Title:	Arlene Chapmai	n/Resource	e Coordinator						
F	Project Manager Contact Info:	Phone: (702) 45	55-5713	Email: ArleneC@ClarkC	CountyNv	.gov				
A	Addl Project Manager Name/Title:	Steve Kramer/P	Preparedne	ss Supervisor So Neva	da Health	n District				
A	ddl Project Manager Contact Info:	Phone:		Email: Kramer@SNHD	.ORG					
F	inance/Grant Contact Name/Title:	Karen Taylor								
F	inance/Grant Contact Info:	Phone: (702) 45	55-6183	Email: Karent@ClarkCo	ounty.Nv.	gov				
)	CLASSIFICATION - Check the p	rimary intention	of the Pro	posed Project:			Choose	one:		
				cently addressed this capa cts in this category must a			_)		
	MAINTAIN Project will MAINTA	AIN AN APPROVED	FFY19 STR	ATEGIC CAPACITY*			0)		
	*All NEW projects are competitive									
	improvement at a high level; for example aligning with Nevada Commission on Ho capability); and <u>WHERE</u> (identify the geo	meland Security (NCF ographic locale; exam	HS) FFY18 prionple: state-wid	orities (See #10)]; FOR WHO de, LV Urban Area, NE NV, o	(identify the Reno, etc.	ne direct users/beneficiar]. FIELD IS LIMIITED TO V	ies of the ISIBLE TEXT	ВОХ		
)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency Mana	agement Ag	gency (FEMA) list of Cor	e Capabil	ities and the Crosswa	alk of Targ			
	FFY19 Strategic Capacity Maintai	ined*: Not	t Applicable							
	HSGP Project Type Supporting Strat	• , ,								
	If OTHER, please choose FFY16-18 N	· <u> </u>		E AND INFORMATION S						
	Core Capability aligned with Mainta	ained Project: INT	TELLIGENC	E AND INFORMATION SI	HARING [I	Mission Areas - PREV/I	PROT]			
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro		_				19 and/or			
)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment of the projec									
	The project aligns with Intelligent been collected and disseminated misinformation or inaccurate da standardizing tracking information recovery would be strengthened	d in a centralized to the and casualty con between all crit	and standa counts. This tical stakeh	ardized methodology, v s project would greatly it older to enhance situa	hich redumprove (tional awa	uces the occurrence Operational Coordina areness,response, tr	of ation by			

	Homeiana Sect	irity Grant Prog	ram (HSGP) RESUBMIS S	SION	PROJECT ID:	TT
oject F	Proposal for FF	19 HSGP Fundi	ng Description		Date Submitted	4/23/19
OJECT T	TITLE REFERENCE:	Emergency Eve	nt Tracking System Maintenance			
PROC	CUREMENT - Indica	te the method of pr	ocurement associated with th	nis proj	ect:	
_	equest for Proposal		nation on your method of procureme			BLE TEXT BOX:
_			endor whom owns the software pro			
_	ternal					
		-	and by whom, the Proposed Projection		•	scribe
Event South asses	t Tracking System to i nern Nevada Health D ssment, plans and pro	mprove information an istrict will continue to ir cedures, project roll-ou	implementation in the Urban Area d data during an event. Clark Cour mplement comprehensive project put to Urban Area stakeholders.	nty Eme	rgency Management and coordination, or	t and the utreach, need
	on is for you to tell u Agency	S WHO will be receive (FD, PD, etc.)	he participating agency(s) and juiting the money for your project - Political Jurisdiction (City, County, State, etc.)	If it's y	ou, put in your age Project Representative (ncy]
12 (a)	Clark County Fire De Emergency Manager		Clark County	Arlen	e Chapman	
. ,						
12 (b)						
12 (b)						
12(b) 12(c)		any continuing financia	al obligation created by the Project	t, and pr	roposed funding solut	tion
12(b) 12(c) SUST	AINMENT - Identify	ergency Management v	al obligation created by the Project vill need to apply for continued yea		·	

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: TT

Project Proposal for FFY19 HSGP Funding Description Date Submitted 4/23/19

PROJECT TITLE REFERENCE: Emergency Event Tracking System Maintenance

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost. LV-UASI State-wide SubTotal **15a) Planning** [Development of policies, plans, procedures, mutual aid agreements, strategies] \$ 0.00 LV-UASI State-wide SubTotal **15b) Organization** [Establishment of organization, structure, leadership, and operation] \$ 0.00 Fields are limitied to visible text box size LV-UASI SubTotal **15c) Equipment** [Procurement and installation of equipment, systems, facilities] State-wide Maintain software for the Emergency Tracking Event Equipment \$60,000.00 \$60,000.00 LV-UASI State-wide SubTotal **15d) Training** [Development and delivery of training to perform assigned missions and tasks] \$ 0.00 LV-UASI State-wide SubTotal **15e)** Exercise [Development and execution of exercises to evaluate and improve capabilities] \$ 0.00 LV-UASI State-wide SubTotal 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] \$ 0.00

15g) PROJECT TOTALS

TOTAL

\$60,000.00

LV-UASI

\$60,000.00

State-wide

\$ 0.00

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION** Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: TT

Date Submitted 4/23/19

PROJECT TITLE REFERENCE:

Emergency Event Tracking System Maintenance

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE LI	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Puchasing Process	10/01/19	01/01/20	3
3	Invoicing Process	02/01/20	05/30/20	3
4	Grant closeout	06/01/20	08/31/20	3
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to terrorism?	YES NO	Explain below.

A crucial gap in the Urban Area is the accurate information flow and tracking of individuals to the response and recovery efforts of our communities in the region.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project would Intelligence and Information Sharing as well as Operational Coordination by standardizing tracking information between all critical stakeholders and providing accurate, centralized situational awareness, and ensure that stakeholders are trained and prepared to implement improved tracking capabilities.

c. Can this project funding request be reduced? Is it scaleable? YES NO • Explain below.

The software supports an unlimited number of users within the region, and enables emergency preparedness stakeholders to respond to incidents or events of any size.

Nev	ada Homela	and Securit	PROJECT ID:	TT		
Proj	ect Proposa	al for FFY19	HSGP Funding Description	n	Date Submitted	4/23/19
PROJ	ECT TITLE RE	FERENCE:	Emergency Event Tracking System	Maintenance		
	d. Can this p	roject continue w	ithout funding? YES NO 💿 Exp	olain below.		
Fields "d" and "e" are limitied to visible text box size	No, the Emerge	ency Event Track	ing System Equipment needs the sof	tware program to main	tain functional use in	tended.
mitie	e. Does this	project provide a	MEASUREABLE statewide benefit?	YES O NO 💿 Ex	plain below.	
Fields "d" and "e" are l	n/a					
18)	THIRA COMP	ETION - Please	e indicate the participation level in c	completing the 2018 T	HIRA Survey. CHOO	SE ONE:
	YES - AG	ency HAS partio	ipated in the 2018 Threat and Hazar	d Identification Risk A	ssessment (THIRA) St	urvey
			· articipated in the 2018 Threat and H			
19)	ADDITIONAL limited to the v		Y - Please indicate any additional p	roject commentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

Type Hourly (nours) Amount Capacity Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Personnel All personnel must be put under this category, please note each line with planning, organization, training or						BUDGET					
One Budget Per Funding Stream UASI UASI Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Previous Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or	TT	ren Taylor				~	Arlene Chap		Clark County OEM	Agency Name	
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Solitons Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or									Emergency Event Tracking System	IJ TITLE:	
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Solitons Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or									One Budget Per Funding Stream		
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Fund									UASI		
Time 12 mo, New, Existing & Description of Position. Personnel All personnel must be put under this category, please note each line with planning, organization, training or	Requested Funding Source		Strategic	Cost	Calculation	% of Effort	Funding	Select Purchase Type		CATEGORY	Line #
CACILISE.									Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please	Personnel	
				\$ -							1
	+			\$ -							
4				\$ -							4
Personnel Sub-Total S S				\$ -						Personnel Sub-Total	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		 Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					i	-	\$			
37							\$ -			
38							\$ -			
39					•		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Maintenance of Emergency Event Tracking	Maintain	UASI	1.00	60,000.00	\$ 60,000,00	Approved Strategic Capacity	Information	04HW-01-INHW Hardware, Computer, Integrated	UASI
41		, , , , , , , , , , , , , , , , , , ,					\$ -		, and the second		
42							\$ -				
43							\$ -				
44							\$ -				
45 46				-			\$ -				
46				 			\$ -				
48				<u> </u>			\$ -				
49				t			\$ -				
	EQUIPMENT Sub-Total						\$ 60,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This mainteance is to continue the use of the Emergency Event Tracking system and software that was purchased and will begin implemention with the contractor after the RFP process is completed by Clark County Purchasing.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
,					Request	\$ 60,000,00	

Nev	vada Homeland Securi	ty Grant Program	(HSGP) RESUBMISSIO	PROJECT ID:	UU
	ject Proposal for FFY1			Date Submitted	4/23/19
	ROJECT TITLE:		ent Operational Coordination Ma	ntenance	
2) P	ROPOSING/LEAD AGENCY:	Clark County Office o	Emergency Management		
3) P	roject Manager Name/Title:	Arlene Chapman			
Р	roject Manager Contact Info:	Phone: (702) 455-571	0 Email: ArleneC@ClarkCounty	Nv.gov	
4) A	ddl Project Manager Name/Title	:	•		
Α	ddl Project Manager Contact Info:	Phone:	Email:		
5) F i	inance/Grant Contact Name/Title	: Karen Taylor			
Fi	nance/Grant Contact Info:	Phone: (702) 455-618	3 Email: Karent@ClarkCountyN	lv.gov	
6)	CLASSIFICATION - Check the	primary intention of the	e Proposed Project:		Choose one:
			ve recently addressed this capability worojects in this category must align w		
	MAINTAIN Project will MAIN	ITAIN AN APPROVED FFY19	STRATEGIC CAPACITY*		0
	*All NEW projects are competitive				
7)			osed Project in a summary state		
	improvement at a high level; for exam aligning with Nevada Commission on	nple: "To (establish, improve, e Homeland Security (NCHS) FFY	of CAPABILITY. The statement should despend, double, sustain, etc.)]; OF WHAT B priorities (See #10)]; FOR WHO (identite-wide, LV Urban Area, NE NV, or Reno,	CORE CAPABILITY (or CAPA fy the direct users/beneficial	BILITIES [consider ries of the
	deter, detect terrorism, and pro		anagement deployment and GIS to Clark County.	шарріну ічновон з ін а	S enort to
8)	capability. Reference the Fede	ral Emergency Manageme	ne the proposed strategic capacion nt Agency (FEMA) list of Core Capa ore-capabilities / https://www.fema	abilities and the Crossw	alk of Target
	If OTHER, please choose FFY16-1	rategic Capacity: If this pro 8 NCHS Priority: Please se	ect is NEW, please select Not Applica ect does NOT align with a FFY19 stra lect the appropriate FY16-18 NCHS p	tegic capacity, please cho riority aligned with your pr	oject
	Core Capability aligned with Mai	ntained Project: INTELLIG	ENCE AND INFORMATION SHARIN	G [Mission Areas - PREV/	PROT]
			levada Commission on Homeland Se lotice of Funding Opportunity when		'19 and/or
9)			now this project aligns with the solution be maintained. If it does not, please just		
			curate information concerning phy to coordinate operational respor		outhern

PROJECT TITLE REFERENCE: Emergency Management Operational Coordination Maintenance PROCUREMENT - Indicate the method of procurement associated with this project: Request for Proposal Sole Source Internal Provide a brief explanation on your method of procurement. PIELD S UMITED TO VISIBLE TEXT BO Deployment Module will be to the vendor who owns software. Por the cloud base systems for the Video Conference equipment, CEM will get quotes from different vendors PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work Clark County Office of Emergency Management will get quotes from vendors for the cloud bases daystems for the video conference equipment. For the WEBECO platforms. SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. This section is for you to tell us WHO will be receiving the money for your project - if it's you, put in your agency) Agency (FD, PD, etc.) Pollitical strudction (ap., cowp, susc., sc.) Project Representative (individual) Clark County Office of Emergency Clark County Office of Emergency Clark County Office of Emergency Clark County Office of Emergency Clark County Emergency Management Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBECO Medules Resource Management and the VEBECO Medules Resource Management and the Order of the County	Vev	ada F	lome	land	l Secu	rity(Grant Pr	rogra	am (HSGP) R	ESUBMISSI	ON	PROJECT ID:	UU
PROCUREMENT - Indicate the method of procurement associated with this project: Request for Proposal Provide a brief explanation on your method of procurement - FEEL IS LIMITED TO VISIBLE TEXT BO. Sole Source Internal For the software maintenance of WEBECC Mapper Pro, ARC GIS, Resource Request and Deployment Module will be to the wendor who owns software. For the cloud base systems for the Video Conference equipment, OEM will get quotes from different vendors in rough order the process by whith the project will be accomplished. identifying who (ib. staff, contractor or "will perform what work to conference equipment. For the WEBECC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBECC platforms.	Pro	ject P	ropos	sal fo	or FFY	19 H	ISGP Fur	ndin	g Descriptio	n		Date Submitted	4/23/19
Provide a brief explanation on your method of procurement - FIELD IS UMITED TO VISIBLE TEXT BO. Sole Source Internal Provide a brief explanation on your method of procurement - FIELD IS UMITED TO VISIBLE TEXT BO. For the software maintenance of WEBEOC Mapper Pro, ARC GIS, Resource Request and Deployment Module will be to the vendor who owns software. For the cloud base systems for the Video Conference equipment, DEM will get quotes from different vendors. Clark County Office of Emergency Management will get quotes from vendors for the cloud based systems for the video conference equipment. For the WEBEOC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBEOC platforms. SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project if it's you, put in your agency) Agency (To, PD, etc.) Political Hardscholor (Tay, Gounty, Sate, etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program.	PRO	JECT T	TLE RI	EFER	ENCE:	E	Emergency I	Manag	gement Operation	al Coordination N	Mainte	enance	
For the software maintenance of WEBEOC Mapper Pro, ARC GIS, Resource Request and Deployment Module will be to the vendor who owns software. For the doud base systems for th Video Conference equipment, OEM will get quotes from different vendors for the cloud base systems for the Video Conference equipment. OEM will get quotes from different vendors for the cloud based systems for the video conference equipment. For the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished. Identifying who (i.e. staff, contractor, or 7) will perform what work conference equipment. For the WEBEOC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBEOC platforms. 12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency) Agency (FD, Pb, etc.) Political Jurisdiction (ray causy, state, dc.) Project Representative (individual) Arlene Chapman Arlene Chapman Arlene Chapman Clark County Office of Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance chaped for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager. Mapper Professional, and ARC GIS as part of the WEBEOC program. STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3	0)	PROCI	JREME	NT -	Indicat	e the	method o	f proc	curement associ	iated with this	proj	ect:	
Deployment Module will be to the vendor who owns software. For the cloud base systems for the Video Conference equipment. Debt will get quotes from different vendors PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (as. staff, contractor, or ?) will perform what work Clark County Office of Emergency Manager Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBEOC platforms. SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency] Agency (G. P.P. etc.) Political Jurisdiction (ray, counts, state etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Clark County Clark County Management 12(b) 12(c) Artenutify any continuing financial obligation created by the Project, and proposed funding solution Clark County Emergency Management will need to apply for confinued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program.		○ Red	quest fo	r Pro	posal	Provi	ide a brief ex	planat	tion on your metho	d of procurement	t - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be Implemented. Describe in rough adder the process by which the project will be accomplished, identifying who (ii. staff, contractor, or ?) will perform what work. Clark County Office of Emergency Management will get quotes from vendors for the cloud based systems for the video conference equipment. For the WEBECC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBECC platforms. SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - if it's you, put in your agency] Agency (ED, PD, etc.) Political Jurisdiction (ay, count, sale, etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Clark County Artene Chapman		Sol	e Sourc	e									
In rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work		O Inte	ernal										tems for the
Clark County Office of Emergency Management will get quotes from vendors for the cloud based systems for the video conference equipment. For the WEBEOC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBEOC platforms. SUB-GRANT AWARD RECIPIENTS - Identity the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency] Agency (F), PD, etc.) Political Airridiction (sty, County, State, etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Clark County Affence Chapman 12(b) 12(c) Affence Chapman Affence Chapman Clark County Management will nearly and proposed funding solution Clark County Emergency Management will nearly or open for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3	1)	PROJE	CT IMF	PLEM	_ ENTATI	ON -	Describe ho	ow, an	nd by whom, the l	Proposed Projec	t will	be implemented. De	scribe
conference equipment. For the WEBEOC modules Mapper Pro, ARC GIS, Resource Request and Deployment Module, OE will be using the vendor whom owns WEBEOC platforms. SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency! Agency (FD, PD, etc.) Political Jurisdiction (any County, State, etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Clark County Arlene Chapman 12(b) 12(c) Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3	•	in rough	order the	proces	s by which	the pr	oject will be ac	ccomplis	shed, identifying who	(i.e. staff, contractor	r, or ?) v	will perform what work	
Agency (FD, PD, etc.) Agency (FD, PD, etc.) Political Jurisdiction (city. county. State, etc.) Project Representative (individual) 12(a) Clark County Office of Emergency Management 12(b) 12(c) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program.	FIELD IS LIMITED TO VISIBLE TEXT BOX	confer	ence eq	quipme	ent. For	the W	/EBEOC mo	dules	Mapper Pro, ARC				
12(b) 12(c) 13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3	2)				o tell us	WHC) will be red		g the money for y	your project - If	it's y	ou, put in your agei	ncy]
3) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. 4) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3						f Eme	rgency		Clark County		Arlen	e Chapman	
3) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. 4) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3		12 (b)											
Clark County Emergency Management will need to apply for continued yearly sustainment for these projects annual maintenance changed for the cloud based software for video conference equipment and the WEBEOC Modules Resource Manager, Mapper Professional, and ARC GIS as part of the WEBEOC program. 4) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3		12 (c)											
your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3		Clark (County I	Emerg chang	gency Ma	anage e clou	ment will ne	ed to a	apply for continue for video conferer	d yearly sustainr	ment f	or these projects and	nual
	4)										atewi	de -vs- UASI is noted b	elow for
1 (10) 1 (4(1)(10))			0%	Г	100%		-			-			

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: Project Proposal for FFY19 HSGP Funding Description Date Submitted

UU Date Submitted 4/23/19

PROJECT TITLE REFERENCE:

Emergency Management Operational Coordination Maintenance

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	ecific. Identify	UASI and State	cost.
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Cloud based subscription for the Video Conference Equipment(\$46,000) Juvare maintenance for modules Mapper Professional, Resource Manager, and ARC GIS (\$26,000)	\$ 72,000.00		\$ 72,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
139) PROJECT TOTALS	\$ 72,000,00	\$ 0.00	\$ 72,000,00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

<u>UU</u> 4/23/19

PROJECT TITLE REFERENCE:

Emergency Management Operational Coordination Maintenance

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funding approval	10/01/19	12/01/19	2
3	Purchasing process, vendor selection	12/01/19	03/30/20	3
4	Invoicing Process	04/01/20	06/30/20	4
5	Begin process again for new fiscal year	07/01/20	08/31/21	13
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

During a terrorist or other emergency event the ability to communciate, collaborate, and exchange information with the State Local and Federal partners is crucial component of managing the event in an effort to deter, detect, protect citizens and visitors to Clark County.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

a. Does this project have a nexus to terrorism? YES NO NO Explain below.

This project aligns with the strategic capacities approved by the Resilience Commission of Public Information and Warning. These software application provide centralized situational awareness to all organization with Clark County.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

These costs are to maintain current usage of Video Conference Equipment and WEBEOC modules.

Nev	ada I	Homeland Security	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	UU
Proj	ect F	Proposal for FFY19	HSGP Funding Description	Date Submitted	4/23/19
PROJ	JECT T	TITLE REFERENCE:	Emergency Management Operational Coordination Mainte	enance	
	d.	Can this project continue wi	thout funding? YES NO 💿 Explain below.		
Fields "d" and "e" are limitied to visible text box size			oment will not work without the cloud base application. The ently in use by Clark County.	applications for WEB	BEOC will
mitie	e.	Does this project provide a I	MEASUREABLE statewide benefit? YES NO 💿 Ex	plain below.	
Fields "d" and "e" are	N/A				
18)	THIRA	A COMPLETION - Please	indicate the participation level in completing the 2018 To	HIRA Survey. CHOO	SE ONE:
		YES - Agency HAS partice	pated in the 2018 Threat and Hazard Identification Risk As	ssessment (THIRA) St	urvey
		NO - Agency has NOT pa	orticipated in the 2018 Threat and Hazard Identification Ris	sk Assessment (THIR)	A) Survey
19)		TIONAL COMMENTARY of to the visible text box	- Please indicate any additional project commentary you	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEMIDETAILI	BUDGET						
	Agency Name	Clark County OEM	Project Manager Name & Contact #	Arlene Chap	oman	Grant Manager Name & Contact #	Karen Taylor					UU
	IJ TITLE:	Emergency Management Operational Co	oordination Maintenand	ce								
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
3								\$ -		1		
4					1			\$ -		1		†
	Personnel Sub-Total							\$ -				
EDSONN	IEL COST NADDATIVE DECLIDED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOCITIONS AND D	ELIVEDABLES	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMS LIC	TED WILL BE COM	IDI ETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITE

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13 14									-			-
15												1
16					1				-			1
17						İ			-			
18									-			
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity		Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-				
28						-				
29							-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERI

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			•				\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Cloud based software application for VTC's	Maintain	UASI	1.00	1.00	\$ 46,000.00	System		04AP-09-ALRT Systems, Public Notification and Warning	UASI
41		WEBEOC Resource Request software application	Maintain	UASI	1.00	10,000.00	\$ 10,000.00		Public Information and Warning	04AP-07-INVN Software, Equipment Tracking and Inventory	UASI
42		WEBEOC Mapper Pro Software Application	Maintain	UASI	1.00	11,000.00	\$ 11,000.00		Public Information and Warning	04AP-07-INVN Software, Equipment Tracking and Inventory	UASI
43		WEBEOC ARCGIS software Application	Maintain	UASI	1.00	5,000.00	\$ 5,000.00			04AP-03-GISS System, Geospatial Information (GIS)	UASI
44				<u> </u>		.,	\$ -			, , , , , , , , , , ,	
45							\$ -				
46				ļ			\$ -	ļ	ļ		
47							\$ -	ļ	ļ	ļ	
48 49							\$ - \$ -	<u> </u>	 	 	
73	EQUIPMENT Sub-Total						\$ 72,000,00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This is to maintain use of the video conference equipment by purchased by UASI funding by using a cloud based software application, Clark County purchased the WEBEOC Resource Request and Mapper Pro and ARCGIS software applications with UASI funding this will maintain the functions that are being used by the Urban Area.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			·								\$ -	
61			<u> </u>								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Ĭ							
					Budget Total		
1					Request	\$ 72,000.0	00

Neva	da Homela	nd Security	, Grant Pr	ogram (ł	HSGP) RESU	JBMISSION	PROJECT ID:	VV
	ect Proposa	_					Date Submitted	4/23/19
	OJECT TITLE:		Clark County					
2) PRO	OPOSING/LEAD	D AGENCY:	Clark County	/ Fire Depart	tment			
3) Proj	ject Manager Na	ame/Title:	Jon Wiercins	ki/Deputy Fi	re Chief			
Proj	ect Manager Co	ontact Info:	Phone: (702)	455-7311	Email: Jwiercin	@ClarkCountyNv	v.gov	
4) Add	l Project Manage	er Name/Title:						
Addl	Project Manager	Contact Info:	Phone:		Email:			
5) Fina	nce/Grant Conta	act Name/Title:	Karen Taylor					
Fina	nce/Grant Contac	t Info:	Phone: (703)	455-6183	Email: Karent@	ClarkCountyNv.	gov	
6) C	LASSIFICATION	N - Check the p	rimary intent	ion of the Pr	roposed Project:	•		Choose one:
							hin the past five years; NCHS FY16-18 prioritie	
	MAINTAIN Pro	oject will MAINT	AIN AN APPRO	/ED FFY19 STI	RATEGIC CAPACIT	Υ*		<u> </u>
	*All NEW projects a	•						
			•	•	•	ımmary stateme		
ir al	nprovement at a hig ligning with Nevada	h level; for example Commission on Ho	e: "To (establish, meland Security (improve, expan (NCHS) FFY18 p	nd, double, sustain, e priorities (See #10)]; !	etc.)];	be <u>HOW MUCH</u> [quantify DRE CAPABILITY (or CAPA) the direct users/benefician J. FIELD IS LIMIITED TO V	BILITIES [consider ies of the
C	apability. Refere	ence the Federal	Emergency M	lanagement <i>i</i>	Agency (FEMA) li	st of Core Capabi	project type, and as lities and the Crosswa pv/pdf/prepared/cross	alk of Target
F	FY19 Strategic Ca	apacity Maintai	ned*:	OPERATION	AL COMMUNICAT	ΓΙΟΝ		
Н	ISGP Project Type	Supporting Strat	tegic Capacity:	If this project	does NOT align w	ith a FFY19 strateg	gic capacity, please cho	ose OTHER
	OTHER, please ch		· !				rity aligned with your pro	oject
C	ore Capability alig	gned with Mainta	ained Project:	OPERATION/	AL COORDINATIO	ON [Mission Area -	ALL]	
				-		n Homeland Secui portunity when rel	rity Approval on 3/26/. leased.	19 and/or
							ategic capacity chose i. FIELD IS LIMITED TO VI	
a		ed to be sustain	ned. Identified				ns, both that need im to develop training th	

lev	ada Homeland Secu	urity Grant Pr	ogram (HSGP) RESUBMISSI	ON	PROJECT ID:	VV
roj	ect Proposal for FF	Y19 HSGP Fur	nding Description		Date Submitted	4/23/19
ROJ	JECT TITLE REFERENCE:	Clark County	Fire MACTAC Training			
))	PROCUREMENT - Indica	te the method of	f procurement associated with this	s proje	ect:	
	Request for Proposal	Provide a brief ex	planation on your method of procuremen	t - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sole Source		vill be using Captain's to do training, and 's purchasing policy.	d limite	d supplies needed v	vill be ordere
	Internal	using Clark County	s purchasing policy.			
)	PROJECT IMPLEMENTA	ΓΙΟΝ - Describe ho	ow, and by whom, the Proposed Projec	ct will i	be implemented. De	scribe
			complished, identifying who (i.e. staff, contractor and LVMPD personnel. Training staff with the contract of t		<u> </u>	
FIELD IS LIMITED TO VISIBLE TEXT BOX		CCFD company offi	train the trainer program will ensure co cers whom are familiar with LVMPD joir			
2)	section is for you to tell u		fy the participating agency(s) and jurisceiving the money for your project - If Political Jurisdiction (City, County, State, etc.)	fit's yo		ncy]
	12(a) Clark County Fire D	epartment	Clark County	Jon W	/iercinski	
	12 (b)					
	12 (c)					
)	SUSTAINMENT - Identify	any continuing fina	nncial obligation created by the Project, a	and pro	oposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX			ithin proposed limits, Upon completion the mongst law enforcement and fire.	his sho	ould serve as a mode	el for larger
!)		unt is derived from F	project's funding percentage makeup of St ield '15g - PROJECT TOTALS' on Page #3	tatewia	le -vs- UASI is noted b	elow for

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description
PROJECT TITLE REFERENCE:

Clark County Fire MACTAC Training

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost. LV-UASI State-wide SubTotal **15a) Planning** [Development of policies, plans, procedures, mutual aid agreements, strategies] \$ 0.00 LV-UASI State-wide SubTotal **15b) Organization** [Establishment of organization, structure, leadership, and operation] \$ 0.00 Fields are limitied to visible text box size LV-UASI SubTotal **15c)** Equipment [Procurement and installation of equipment, systems, facilities] State-wide \$ 0.00 LV-UASI State-wide SubTotal **15d) Training** [Development and delivery of training to perform assigned missions and tasks] \$ 0.00 LV-UASI State-wide SubTotal **15e) Exercise** [Development and execution of exercises to evaluate and improve capabilities] 4 Hostile MC Bags \$ 2,400 2 Mannequins \$ 1,400 \$3,800.00 \$3,800.00

15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]

Overtime pay for 5 CCFD Captains to instruct 5 hours training for 13 sessions at

\$56.00 per hour .

15g) PROJECT TOTALS

LV-UASI

\$13,260.00

LV-UASI

\$ 17,060.00

State-wide

State-wide

\$ 0.00

SubTotal

\$13,260.00

TOTAL

\$ 17,060.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: VV

Date Submitted 4/23/19

PROJECT TITLE REFERENCE:

Clark County Fire MACTAC Training

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Define Training Objectives	10/01/19	01/30/20	3
3	Procure Training Materials	02/01/20	04/01/20	2
4	Identify Instructors	04/15/20	05/31/20	2
5	Train the Trainer	06/01/20	09/01/20	3
6	Identify training dates	09/15/20	10/01/20	2
7	Implementation of Training	11/01/20	03/31/21	5
8	Grant Closeout	04/01/21	05/31/21	2
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Convention Center Area Command and the respective CCFD Stations were determined based on the geographical location. Being that these properties are located along Las Vegas Blvd it is deemed to be critical infrastructure. Las Vegas Blvd houses over 20 mega resort style properties and is the one of largest resort corridors in the world housing 40 million visitors a year. Historically and presently numerous threats are made to Las Vegas throughout terrorist propaganda, making it the 2 most mentioned target. This training is a counter-terrrorism measure ensuring multi-agency coordination during critical incidents.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, operational coordination is one of the core capabilities, Historically and presently numerous threats are made to Las Vegas throughout terrorist propaganda, making it the 2 most mentioned target. This training is a counter-terrorism measure ensuring multi-agency coordination during critical incidents.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

No, Both agencies have scaled project back before HSGP process started.

Proj	ada Homeland Securit	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	VV
	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/23/19
PROJ	ECT TITLE REFERENCE:	Clark County Fire MACTAC Training		
	d. Can this project continue w	vithout funding? YES NO (•) Explain below.		
"e" are limitied to visible text box size	No, Clark County Fire does not	have the budget for this project.		
nitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO • E	xplain below.	
Fields "d" and "e" are l	N/A			
8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 1	THIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) S	urvey
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	EM DETAIL E	BUDGET					
	Agency Name	Clark County Fire Department	Project Manager Name & Contact #	Jon Wiercin		Grant Manager Name & Contact #	Karen Taylor				VV
	IJ TITLE:	MACTAC									
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3								\$ -			
4								\$ -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
	Travel Sub-Total	R EACH LINE ITEM AROVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-				
28						-				
29							-			
30										
31							-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38			•		-		\$ -			
39			•				\$ -			
	Organization Sub-Total		•				\$ -			, and the second

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		ocurement / See 2nd tab to determine whether oject requires EHP Screening										
40		Hostile MCI Bags	New / Enhance / Past / Competitive			4.00	600.00	\$ 2,400.00	Approved Strategic Capacity	Operational	09ME-01-MCIK Equipment/Kits, Multi- Casualty Incident (MCI)	UASI
41		Mannequins	New / Enhance / Past / Competitive			2.00	700.00	\$ 1,400,00	Approved Strategic Capacity	Operational	09ME-01-MCIK Equipment/Kits, Multi- Casualty Incident (MCI)	UASI
42								\$ -	, ,			
43								\$ -				
44					•			\$ -				·
45								\$ -				
46								\$ -				
47								\$ -				
48 49								\$ -				
	EQUIPMENT Sub-Total							\$ 3.800.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

These items hostile MCI bags and mannequines will be use during the training sessions.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity		TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)										
50		curement / See 2nd tab to determine whether ject requires EHP Screening									¢	
51		Overtime pay for 5 CCFD Captains to instruct	New / Enhance / Past / Competitive				1	13,260.00	Approved Strategic Capacity	Operational Coordination	\$ 13,260.00	UASI
52		5 hours training for 13 sessions at \$56.00 per hour									\$ -	
53											\$ -	
54											\$ -	1
55 56									 		\$ - \$ -	
	Training Sub-Total										\$ 13,260.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Clark County Fire Department will use 5 Captains paying Overtime as instructors for these training sessions.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60			•								\$ -	
61											\$ -	
	Exercise Sub- Total		·								\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 17,060.00	i i

Nev	ada Home	eland Security	v Grant Program (I	HSGP) RESUBMISSION	PROJECT ID:	WW
		•	HSGP Funding De	,	Date Submitted	4/26/19
1) PF	ROJECT TITL	E:	Statewide NIMS COMPE	TITIVE	<u> </u>	
2) PF	ROPOSING/L	EAD AGENCY:	DPS - Division of Emerge	ency Management		
3) Pr	oject Manage	r Name/Title:	Preparedness EMPM			
Pre	oject Manage	r Contact Info:	Phone: (775) 687-0305	Email: xxx@dps.state.nv.us		
4) Ad	dl Project Mar	nager Name/Title:				
Ad	dl Project Mana	ager Contact Info:	Phone:	Email:		
5) Fin	nance/Grant Co	ontact Name/Title:	Kelli Anderson / Emergen	cy Management Program Manag	er	
Fin	ance/Grant Co	ntact Info:	Phone: (775) 687-0321	Email: kanderson@dps.state.nv.	us	
6)	CLASSIFICAT	ION - Check the p	rimary intention of the Pr	oposed Project:		Choose one:
	NEW*			ecently addressed this capability with ects in this category must align with I		_
	MAINTAIN	Project will MAINT	AIN AN APPROVED FFY19 ST	RATEGIC CAPACITY*		

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

The outcome of this project enhances the continued delivery of the statewide training, exercise, planning, resource management, and technology programs needed to remain in compliance with federal NIMS requirements and build capacity and capability within Nevada. These programs span all of the core capabilities; including those of Operational Coordination, Operational Communication, Public Information and Warning, and Planning; and provides for coordination and cooperation at all levels and for all types of disasters throughout the state. Services will be provided for all jurisdictions and agencies including state agencies, local jurisdictions, tribal governments, and non-governmental organizations. Maintaining NIMS compliance is necessary to ensure all organizations within the state remain eligible for Homeland Security grant funding.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

HSGP Project Type Supporting Strategic Capacity:

If OTHER, please choose FFY16-18 NCHS Priority:

Core Capability aligned with Maintained Project:

NATIONAL INCIDENT MANAGEMENT SYSTEM [NIMS]

State of Nevada DEM [NIMS]

OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

NIMS is a comprehensive, national approach to incident management that is applicable at all jurisdictional levels and across functional disciplines. It is intended to be applicable across a full spectrum of potential incidents, hazards, and impacts, regardless of size, location or complexity. It improves coordination and cooperation between public and private entities in a variety of incident management activities, and provides a common standard for overall incident management. The Planning, Training, Exercise, Communications, Public Information, and Resource Management Programs supported in this project directly establish, maintain, and integrate on a statewide platform those operational structures and processes used by local, state, and tribal jurisdictions. This program and those projects contained within provide this capability statewide, integrating all stakeholders, and supports the execution of all Mission Areas of the National Preparedness Goal.

STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for

your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

77%

Statewide

(SHSP)

23%

Urban Area

(UASI)

2

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID:

Date Submitted 4/

WW 4/26/19

PROJECT TITLE REFERENCE:

Statewide NIMS COMPETITIVE

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Travel: Technology \$4,500 / Training \$33,500 / Exercise \$4,000 / Resource Management \$5,000 / Planning \$8,000 Supplies: Technology \$2,000 / Training \$2,000 / Exercise \$0 / Resource Management \$3,000 / Planning \$1,500 Technology Fees/Subscriptions \$0 Resource Management Contract Support \$10,000 Planning Contract Support \$15,000 THIRA/SPR Contract Support \$50,000 HSGP / \$50,000 UASI	\$ 50,000.00	\$ 138,500.00	\$ 188,500.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Credentialing Equipment and Software \$17,655 Printer for Planning \$1,500		\$ 19,155.00	\$ 19,155.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Training - Develop, Support and Participate \$9,000		\$ 9,000.00	\$ 9,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION**Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: WW

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Statewide NIMS COMPETITIVE

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Conduct THIRA, SPR, Consequence Analysis, and NIMS Assessments	10/01/19	12/31/20	15
3	Conduct Jurisdictional Plans Reviews and Updates	10/01/19	12/31/20	15
4	Prepare for and Deliver Operational Coordination Training and Exercises	10/01/19	12/31/20	15
5	Statewide Exercise Initial Planning Conference, Mid-term Planning Conference, Final Planning Conference, and event	10/01/19	12/31/20	15
6	SEOC / Local EOC Exercise Development and Delivery	10/01/19	12/31/20	15
7	Develop, Coordinate and Deliver the Nevada Preparedness Summit	10/01/19	12/31/20	15
8	Complete specifications, purchase, install, configure and test tech equipment.	10/01/19	12/31/20	15
9	Prepare and submit licensing renewal information for payment	10/01/19	12/31/20	15
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

All Operational Coordination and Public Information and Warning functions will be applicable to terrorism events. Planning, Training and Exercises conducted will prepare organizations and staff statewide to respond to terrorism. Communications equipment will be used for operational coordination during terrorism events, and resources are being cataloged and typed in preparation for a terrorism event requiring mutual aid.

b. Does this project align with the FFY19 strategic capacities? YES NO NO Explain below.

This project aligns with the FFY19 strategic capacity of Statewide NIMS.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Reductions in funding will directly reduce the planning, training and exercise support to the tribal and local jurisdiction within the state. Less planning efforts, training classes offered, and exercises to verify capabilities will be available. Significantly reduced funding jeopardizes the maintenance of the NIMS program within the state, also jeopardizing the eligibility of the State for federal grant funding.

Neva	ada Homeland Securit	y Grant Program (HSGP) RESUBMISSION	PROJECT ID:	WW
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	4/26/19
PROJ	ECT TITLE REFERENCE:	Statewide NIMS COMPETITIVE		
	d. Can this project continue v	vithout funding? YES NO NO Explain below.		
are limitied to visible text box size	Without funding the State will not HSGP funding.	ot be able to maintain the Statewide NIMS program as requi	red to remain eligible	for Federal
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.	
Fields "d" and "e" are li	and local jurisdictions throughor	le services statewide. The planning, training and Exercise put the state. The communications upgrades included in this bre effectively throughout the State. Public Service Announcy ada.	project will allow triba	al and local
18)	THIRA COMPLETION - Pleas	e indicate the participation level in completing the 2018 T	HIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partio	ripated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) S	urvey
		articipated in the 2018 Threat and Hazard Identification Ris		-
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	u feel may be impoi	rtant. Field is
	None at this time			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	I EMI DE I AIL	BUDGET					
	Agency Name	DPS - Division of Emergency Management	Project Manager Name & Contact #	Jim Walker (775) 687-0		Grant Manager Name & Contact#					WW
	IJ TITLE:	Statewide NIMS - Competitive									
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
3								\$ -			+
4								\$ -			
5								\$ -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									Personnel
6								\$ -			
7								\$ -			
8								\$ -			
9								\$ -			
10								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
11									-			
12									-			
13		NIMS Classes in Elko	New / Enhance / Past / Competitive	SHSP	Training	ICS course - Instructor travel	2.00	1,000.00		NIMS - State of Nevada DEM	Operational Coordination	SHSP
14		NIMS Classes rural	New / Enhance / Past / Competitive	SHSP	Training	ICS course - Instructor travel	3.00	1,000.00		NIMS - State of Nevada DEM	Operational Coordination	SHSP
15		NIMS Classes Southern NV	New / Enhance / Past / Competitive	SHSP	Training	ICS course - Instructor travel	6.00	1,000.00			Operational Coordination	SHSP
16		EMI travel support	New / Enhance / Past / Competitive	SHSP	Training	DEM staff EMI costs not funded	5.00	500.00		NIMS - State of Nevada DEM	Operational Coordination	SHSP

17	DEM travel to national courses	New / Enhance / Past / Competitive	SHSP	Training	DEM staff travel to attend national courses with no stipend	4.00	2,000.00	8.000.00		Operational Coordination	SHSP
18	DEM training travel to Las Vegas	New / Enhance / Past / Competitive	SHSP	Training	Traing officer travel to southern NV for Technical Assistance	4.00	1,200.00	4,800.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP
19	Training Supervisor travel	New / Enhance / Past / Competitive	SHSP	Training	Training Supervisor travel to Northen NV	6.00	1,200.00	7,200.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP
20	Chief Travel to training	New / Enhance / Past / Competitive	SHSP	Training	DEM Chief to travel for training	-	1,200.00	-	NIMS - State of Nevada DEM	Operational Coordination	SHSP
21 22								-			
23 24								-			
25 26	Travel: Technology Support	New / Enhance / Past / Competitive	SHSP	Planning	Henderson 2020 NPS	1.00	1,500.00	1,500.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP
27		New / Enhance / Past /							NIMS - State of	Operational	
28	Travel: Technology Support	Competitive	SHSP	Planning	Conference: Infocom	2.00	1,500.00	3,000.00	Nevada DEM	Coordination	SHSP
30	Travel: Exercise In & Out of State	New / Enhance / Past / Competitive	SHSP	Exercise	Exercise Officer and exercise designers, players, controllers and evaluators travel	5.00	800.00	4,000.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP
32	Resource Management & Credentialing Travel	New / Enhance / Past / Competitive	SHSP	Planning	Technical Asst. to Tribes/Locals; ICAM and EMAC Meetings	5.00	1,000.00	5,000.00		Operational Coordination	SHSP
33	Planning Support Travel	New / Enhance / Past / Competitive	SHSP	Planning	THIRA/SPR/CA/NIMS; Planning for Tribes/Locals; School Planning; Mass Care Planning; Tech. Plans development	8.00	1,000.00	8.000 00	NIMS - State of Nevada DEM	Planning	SHSP
35 Travel Sub-Tota	v ii		01101	1 familing	development	0.00	1,000.00	55.000.00		i idilililig	GIGF

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 13-15: DEM adjunct instructor travel to instruct NIMS/ICS courses in NV.

Line 16: Travel support to pick up non-covered costs from FEMA for consortium travel.

Line 17: Travel support to national courses that are not available for stipend frough FEMA.

Line 18: Travel for training officer to support Clark County
Line 19: Travel support for supervisor to visit Carson Clty.

Line 20: Travel support for the Chief to attend a national course.

Line 25: Travel to support the technology needs of the Nevada Prep. Summit in 2020, Henderson.

Line 28: Travel to attend INFOCOM to gather equipment and process information during the engineering and upgrade phase of the SEOC technology.

Line 30: Travel for State Exercise Officer to develop and support federal, state and local exercises. Travel for players, controllers, evaluators, and simulators to attend exercises and exercise development meetings

Line 32: Attend Identity, Credential and Access Management (ICAM) Quarterly Meeting, EMAC Regional/National Meetings; provide support and technical assistance to counties and tribes.

Line 34: Travel and per diem for THIRA/SPR/Consequence Analysis/NIMS Assessment in and out of state, planning support to counties and tribes, attending school planning training, National Mass Care Exercise, and threat/hazard specific planning training (i.e.: Radiological, Biochemical, Cyber, etc.) in and out of state; development of planning capability for local and tribal planners

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE, NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
40		Training- Printing & Purchase Course Materials	New / Enhance / Past / Competitive	SHSP	1	2,000.00	2,000.00		Operational Coordination	SHSP
41 42							-		1	
43 44							-			
45		Subscription: Satellite Phone	New / Enhance / Past / Competitive	SHSP	-	3,000.00			Operational Communications	SHSP
46		Supplies: Technology Support components, parts for replacement, support equipment.	New / Enhance / Past / Competitive	SHSP	1	2,000.00	2,000.00		Operational Communications	SHSP
47 48							-			

49										
50							-			i
51										1
52		Resource Mgmt & Credentialing supplies & materials	New / Enhance / Past / Competitive	SHSP	1	3,000.00	3,000.00		Operational Coordination	SHSP
53		Direct Contract Support to Local/Tribal Resource Management & Credentialing implementation	New / Enhance / Past / Competitive	SHSP	1	10,000.00	10,000.00	NIMS - State of Nevada DEM	Operational Coordination	SHSP
54							-			ı
55										1
56							-			i l
57		THIRA/SPR Contract Support	New / Enhance / Past / Competitive	SHSP	1	50,000.00	50,000.00	NIMS - State of Nevada DEM	Planning	SHSP
58		Planning Supplies and Materials	New / Enhance / Past / Competitive	SHSP	1	1,500.00		NIMS - State of Nevada DEM	Planning	SHSP
59		Consequence Analysis - Contract	New / Enhance / Past / Competitive	SHSP	1	10,000.00	10,000.00	NIMS - State of Nevada DEM	Planning	SHSP
60		EOP Development Support - Rural/Tribal	New / Enhance / Past / Competitive	SHSP	1	5,000.00	5,000.00	NIMS - State of Nevada DEM	Planning	SHSP
	Planning Sub-Total						\$ 83,500.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 40: Printing of training documents and purchase of training material in support of statewide training program.

Line 45: Subscription for 3 satellite phones for SEOC

Line 46: Support equipment to replace failing legacy equipment, to support changing technologies and capability, and system support for SEOC and Network AV development. Further, to provided for equipment, installation and maintenance of new and existing components at the SEOC and local jurisdictions.

Line 52: Supplies and materials to support Resource Management and Credentialing

Line 53: Provide contract support to County & Tribal Nations for Resource Management & Credentialing implementation

Line 57: THIRA/SPR Contract Support - additional funding to come from UASI

Line 58: Supplies and Materials to support the annual THIRA/SPR, the Consequence Analysis, NIMS Assessment, and other planning related activies.

Line 59: Contract support to conduct required THIRA Consequence Analysis and Gap Analysis

Line 60: Contract support to assist Rural and Tribal Nations with EOP Updates and Development

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
61					-		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
62							\$ -				
63							\$ -				
64							\$ -				
65							\$ -				
66							\$ -				
67											

68		Project support equip. & software for agencies & jurisdictions for Resource Mgmt & Credentialing (physical & logical access)	New / Enhance / Past / Competitive		1.00	17,655.00	\$ 17,6	NIMS - State of 5.00 Nevada DEM		04AP-05-CRED System, Credentialing	SHSP
69							\$	-			
70							\$	-			
71		Printer	New / Enhance / Past / Competitive		1.00	1,500.00	\$ 1,5	NIMS - State of 0.00 Nevada DEM	Planning	04HW-01-INHW Hardware, Computer Integrated	SHSP
	EQUIPMENT Sub-Total						\$ 19,1	5.00			

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line 68: Equpment and software to continue the development and implementation of the Resource Management & Credentialing Project

Line 71: Printer to support the DEM Planning Section

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
72		curement / See 2nd tab to determine whether ject requires EHP Screening										
73	your pro	Training- Develop, Support & Particiapte in NIMS Training	New / Enhance / Past / Competitive	SHSP	Yes	Yes	8	1,125.00	NIMS - State of Nevada DEM	Operational Coordination	\$ 9,000.00	SHSP
74											\$ -	
75 76											\$ -	
77											\$ -	
78											\$ -	
	Training Sub-Total										\$ 9,000.00	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Line 73: Instructor pay for adjunct course delivery in support of NIMS and ICS. Working Lunches for training sessions.

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
79	your pro	ject requires EHP Screening										
80											\$ -	
81											\$ -	
82											\$ -	
83			·			•					\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total Request	\$ 166,655.00	

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	Agency Name	DPS - Division of Emergency Management	Project Manager Name & Contact #	Preparednes (775) 687-0		Grant Manager Name & Contact #						ww
	LITITLE	Statewide NIMS - Competitive										
	10 11122	One Budget Per Funding Stream			I							
		SHSP										
		энэг		Previous				Dorgonnol	Approved			Beguested
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type		Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.		- , , , ,								
1								\$ -				
2	Personnel Sub-Total							\$ -				
PERSONN	IEL COST NARRATIVE REQUIRE	D FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	ELIVERABLES.	NARRATIVE WILL	BE USED TO ENSURE ITEMS LIS	TED WILL BE COM	IPLETED IN THE	GRANT CYCLE -	ITEMS MAY NO	BE PURCHASED O	JTSIDE THE ITEMS
LISTED A	BOVE WITHOUT A PRE-APPROV	ED PROJECT CHANGE REQUEST.		Previous			Calculation	Personnel	Approved			Requested
_ine #	CATEGORY		Select Purchase Type	Funding Type	Salary Hourly	% of Effort	(Input hours)	Cost Amount	Strategic Capacity	Core Capability		Funding Source
3	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above						\$ -				CATEGORY
4	Fringe Sub-Total							\$ -				
		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA	III. THE POSITIONS AND DELIV	EDARLEC NARG	ATIVE WILL BE U	SED TO ENGLIDE ITEMS LISTED	WILL DE COMPLE	TED IN THE ODA	NT CYCLE ITEM	IC MAY NOT BE	NIBCHACED OUTCO	E THE ITEMS LIGTED
	ITHOUT A PRE-APPROVED PRO	JECT CHANGE REQUEST.										
ABOVE W		PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
Line #	ITHOUT A PRE-APPROVED PRO	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER	Select Purchase Type Select Type	Funding		Narrative for each trip must be included	Total Trips		Total Cost	Strategic		Funding
ABOVE W	CATEGORY Travel Planning Training Exercise Equipment	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON		Funding		Narrative for each trip must be included	Total Trips		Total Cost	Strategic		Funding
Line#	CATEGORY Travel Planning Training Exercise Equipment Organization	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON		Funding		Narrative for each trip must be included	Total Trips		Total Cost	Strategic		Funding
Line #	CATEGORY Category Travel Planning Training Exercise Equipment Organization	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type	Funding Type	Each Travel	Narrative for each trip must be included here	-	each Trip		Strategic Capacity	Capability	Funding Source
Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THISTS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (IMPORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) PEACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL PLANNING DETAIL DESCRIPTION	Select Type	Funding Type VERABLES. NAR	Each Travel	Narrative for each trip must be included here	-	each Trip		Strategic Capacity	Capability	Funding Source
Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total COST NARRATIVE REQUIRED FO	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) REACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA JECT CHANGE REQUEST.	Select Type Select Type	Funding Type VERABLES. NAR Previous Funding	Each Travel	Narrative for each trip must be included here sed to ensure items lister	UILL BE COMPLE	each Trip	Approved Strategic	Strategic Capacity MS MAY NOT BE	Capability	Funding Source DE THE ITEMS LISTER Requested Funding
Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total COST NARRATIVE REQUIRED FO	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) PEACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA JECT CHANGE REQUEST. PLANNING DETAIL DESCRIPTION DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY	Select Type AIL EACH LINE ITEM AND DELI Select Purchase Type New / Enhance / Past /	Funding Type VERABLES. NAR Previous Funding	Each Travel	Narrative for each trip must be included here sed to ensure items lister	WILL BE COMPLE	each Trip TED IN THE GR	Approved Strategic	Strategic Capacity MS MAY NOT BE Core Capability	Capability	Funding Source THE ITEMS LISTER Requested Funding Source
Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total COST NARRATIVE REQUIRED FO	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) PLANNING DETAIL DESCRIPTION DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO	Select Type AIL EACH LINE ITEM AND DELI Select Purchase Type	YERABLES. NAR Previous Funding Type	Each Travel	Narrative for each trip must be included here sed to ensure items lister	UILL BE COMPLE	each Trip TED IN THE GR	Approved Strategic Capacity	Strategic Capacity MS MAY NOT BE	Capability	Funding Source DE THE ITEMS LISTER Requested Funding
Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total COST NARRATIVE REQUIRED FO CATEGORY Planning	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) REACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA JECT CHANGE REQUEST. PLANNING DETAIL DESCRIPTION DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY THIRA/SPR Contract Support	Select Type AIL EACH LINE ITEM AND DELI Select Purchase Type New / Enhance / Past / Competitive	Funding Type VERABLES. NAR Previous Funding Type SHSP	Each Travel	Narrative for each trip must be included here sed to ensure items lister QUANTITY	WILL BE COMPLE UNIT COST 50,000.00	ETED IN THE GR TOTAL 50,000.00 \$ 50,000.00	Approved Strategic Capacity NIMS - State of Newada DEM	Strategic Capacity MS MAY NOT BE Core Capability Planning	Capability PURCHASED OUTS	Funding Source DE THE ITEMS LISTE Requested Funding Source SHSP
Solution in the state of the st	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total COST NARRATIVE REQUIRED FO CATEGORY Planning	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THISTS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) REACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY THIRA/SPR Contract Support FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAILED OUT (SENERAL TERMS AND SET ON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY	Select Type AIL EACH LINE ITEM AND DELI Select Purchase Type New / Enhance / Past / Competitive	Funding Type VERABLES. NAR Previous Funding Type SHSP	Each Travel	Narrative for each trip must be included here sed to ensure items lister QUANTITY	WILL BE COMPLE UNIT COST 50,000.00	ETED IN THE GR TOTAL 50,000.00 \$ 50,000.00	Approved Strategic Capacity NIMS - State of Newada DEM	Strategic Capacity MS MAY NOT BE Core Capability Planning	Capability PURCHASED OUTS	Funding Source DE THE ITEMS LISTE Requested Funding Source SHSP
Line # 5 6 7 TRAVEL C BOVE W Line #	CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub-Total OST MARRATIVE REQUIRED FO CATEGORY Planning Planning Sub-Total S COST NARRATIVE REQUIRED FO COST NARRATIVE REQUIRED FO	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THISTS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) REACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY THIRA/SPR Contract Support FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAILED OUT (SENERAL TERMS AND SET ON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY	Select Type AIL EACH LINE ITEM AND DELI Select Purchase Type New / Enhance / Past / Competitive	Funding Type VERABLES. NAR Previous Funding Type SHSP	Each Travel	Narrative for each trip must be included here sed to ensure items lister QUANTITY	WILL BE COMPLE UNIT COST 50,000.00	ETED IN THE GR TOTAL 50,000.00 \$ 50,000.00	Approved Strategic Capacity NIMS - State of Newada DEM	Strategic Capacity MS MAY NOT BE Core Capability Planning	Capability PURCHASED OUTS	Funding Source DE THE ITEMS LISTER Requested Funding Source

	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.					
9				Ē.	\$ -		
	Organization Sub-Total				\$ -		

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL								
		curement / See 2nd tab to determine whether ject requires EHP Screening								
10							\$ -			
	EQUIPMENT Sub-Total						\$ -			

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-			
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether									
11	your pro	ject requires EHP Screening									ĺ
12			·			·				\$ -	
	Training Sub-Total									\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Line#	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
13	your pro	ject requires EHP Screening										
14											\$ -	
15											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

ı						Budget Total		
L						Request	\$ 50,000.0	0

Ν	evada Homeland Security	y Grant Program ((HSGP) RESUBMISSION	PROJECT ID:	XX
	roject Proposal for FFY19			Date Submitted	4/30/19
1)	PROJECT TITLE:	NIMS - Communications			
2)	PROPOSING/LEAD AGENCY:	DPS - Division of Emerg	ency Management		
3)	Project Manager Name/Title:	Melissa Friend - SWIC			
	Project Manager Contact Info:	Phone: (775) 687-0371	Email: mnfriend@dps.state.nv.us	5	
4)	Addl Project Manager Name/Title:				
	Addl Project Manager Contact Info:	Phone:	Email:		
5)	Finance/Grant Contact Name/Title:	Kelli Anderson			
	Finance/Grant Contact Info:	Phone: (775) 687-0321	Email: kanderson@dps.state.nv	.us	
6)	CLASSIFICATION - Check the p	rimary intention of the P	Proposed Project:		Choose one:
			recently addressed this capability with jects in this category must align with		
	MAINTAIN Project will MAINTA	AIN AN APPROVED FFY19 ST	FRATEGIC CAPACITY*		0
	*All NEW projects are competitive				
7)	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho	e Proposed Project in terms of 0 e: "To (establish, improve, expa meland Security (NCHS) FFY18	ed Project in a summary statemer CAPABILITY. The statement should descrit- ind, double, sustain, etc.)]; OF WHAT CO priorities (See #10)]; FOR WHO (identify the wide, LV Urban Area, NE NV, or Reno, etc.	be <u>HOW MUCH</u> [quantify PRE CAPABILITY (or CAPAI the direct users/benefician	BILITIES [consider ies of the
8)	PROPOSED STRATEGIC CAPA	CITY - Identify by name	the proposed strategic capacity,	project type, and as	ssociated core
			Agency (FEMA) list of Core Capabil e-capabilities / https://www.fema.go		•
	FFY19 Strategic Capacity Maintai				
	HSGP Project Type Supporting Strat	- ' '		o DECD!	
	If OTHER, please choose FFY16-18 N	, <u> </u>	NAL COMMUNICATIONS [Mission Are		
	*FFY19 Strategic Capacities are sub	ject to change pending Nev	NAL COMMUNICATIONS [Mission Are rada Commission on Homeland Secur tice of Funding Opportunity when rel	ity Approval on 3/26/2	19 and/or
9)	STRATEGIC CAPACITY JUSTIF	FICATION - Describe how	w this project aligns with the stra e maintained. If it does not, please justify	itegic capacity chose	
	support necessary for coordination Communications will be establish agencies, local jurisdictions, triba	on and cooperation at all hed with, and services wil al governments, and non-	I Communication and provides the levels and for all types of disasters I be provided for, all jurisdictions a governmental organizations. Mair ain eligible for Homeland Security	s throughout the state and agencies includin ataining NIMS compli	e. ng state

			am (HSGP) RESUBMIS	SIUN		XX
	-	Y19 HSGP Fundin	•		Date Submitted	4/30/19
ROJECT	TITLE REFERENCE:	NIMS - Communic	cations			
) PRO	CUREMENT - <i>Indica</i>	te the method of prod	curement associated with t	his proj	ect:	
⊙ R	equest for Proposal	Provide a brief explana	tion on your method of procurem	ent - FIEL	D IS LIMITED TO VISI	BLE TEXT BOX
O S	0.000.00		wever procurement method may	y vary de	pending on costs an	d
O Ir	nternal	circumstances.				
) PRO.	، JECT IMPLEMENTA		nd by whom, the Proposed Pro	iect will	<i>be implemented.</i> De	escribe
•			shed, identifying who (i.e. staff, contract	•	•	
appr proje spec prog main "aud	oach within the Techniect and their accomparisific projects, the EMPNirammatic and financiantained. State rules and it-ready" posture throu	ical Services Section of N nying milestones. In some M will assign a specific st I compliance to their port d regulation regarding pu	livered, the various projects iden NDEM and placed within a schere cases, where contractors are if aff member to oversee their projection of the investment. Quarterly trackasing and other areas shall be stment. At the conclusion of this ed by this investment.	dule that identified iject and reporting be follow	identifies the phase I for either program s work performance to g and grant compliar ed. We shall maintal	s of each support or for o insure nce shall be in an
	Agency		e participating agency(s) and jug the money for your project Political Jurisdiction (City, County, State, etc.) State	- If it's yo		ncy]
12 (b)						
12 (c)						
SUS	TAINMENT - Identify	any continuing financial	obligation created by the Projec	ct, and pr	roposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX	s associated with this	project proposal are cons	sidered one-shot and will not red	quire add	ditional funding until o	end of life.
	TEWIDE and/or UAS	SI BENEFIT - Your project	t's funding percentage makeup oj	f Statewic	de -vs- UASI is noted l	nelow for

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION PROJECT ID: XX
Project Proposal for FFY19 HSGP Funding Description Date Submitted 4/30/19

PROJECT TITLE REFERENCE: NIMS - Communications

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			# 0.00
			\$ 0.00
15c) Equipment (or account and installation of accions at auction of accidents)	LV-UASI	State-wide	SubTotal
15c) Equipment [Procurement and installation of equipment, systems, facilities] Radio and components \$12,400	LV-UASI	State-wide	SubTotal
		# 40 400 00	A 40 400 00
		\$ 12,400.00	\$ 12,400.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Training [Development and derivery of training to perform assigned missions and tasks]	27 07101	Ciute Wide	- Jub Fotur
			\$ 0.00
			Ψ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
,			
			\$ 0.00
			Ψ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
1 0100111101 [atol) [not considered symmetric map project and programmatic capability]			
			A. 0. 00
			\$ 0.00
	11// 11/00	CL.,	TOT
15g) PROJECT TOTALS	LV-UASI	State-wide	* 12.400.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: XX Date Submitted 4/30/19

PROJECT TITLE REFERENCE:

NIMS - Communications

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Complete specifications, purchase, install, configure and test tech equipment.	10/01/19	12/31/19	2
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

	,
	a. Does this project have a nexus to terrorism? YES NO Explain below.
ext box size	All Operational Communications functions will be applicable to terrorism events. Communications equipment will be used for operational coordination during terrorism events, and resources are being cataloged and typed in preparation for a terrorism event requiring mutual aid.
ole t	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
", and "c" are limitied to visible text box	This project aligns with the FFY19 strategic capacity of Operational Communication
'a"	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
elds "a",	Reductions in funding will directly reduce the communications capabilities within the state.

Neva	ada l	Homeland S	Security	y Grant F	Program (H	HSGP) RESUBMISS	SION	PROJECT ID:	XX
Proj	ect F	Proposal fo	r FFY19	HSGP Fu	unding De	scription		Date Submitted	4/30/19
PROJ	ECT 1	TITLE REFERE	NCE:	NIMS - Co	mmunications				
	d.	Can this project	continue w	vithout fundin	ng? YES 🔵 N	IO Explain below.			
Fields "d" and "e" are limitied to visible text box size	This i	s the only fundin	ig source a	available for	this project.				
imitie	e.	Does this project	t provide a	MEASUREAB	LE statewide be	nefit? YES 💿 N	lO 🔵 Ex	rplain below.	
Fields "d" and "e" are						communications upgrade oughout the State.	es incluc	led in this project will	allow tribal
18)	THIR	A COMPLETIO	N - <i>Please</i>	e indicate th	ne participation	n level in completing the	e 2018 T	HIRA Survey. CHOO	SE ONE:
		YES - Agency I	HAS partic	cipated in the	e 2018 Threat	and Hazard Identification	n Risk As	ssessment (THIRA) Si	urvey
		NO - Agency h	nas NOT pa	articipated i	n the 2018 Thr	eat and Hazard Identific	ation Ris	sk Assessment (THIR.	A) Survey
19)		ITIONAL COMI ed to the visible		Y - Please in	ndicate any ad	ditional project commer	ntary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					LINI DE I AIL I	JODGE!					,
	Agency Name	DPS - Division of Emergency Management	Project Manager Name & Contact #	Melissa Frie (775) 687-03		Grant Manager Name & Contact #	Paul Burke (775) 687-04	23			XX
	IJ TITLE:	STATEWIDE NIMS ENHANCEMENT		•							
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.		.,,,,					- Capaon,		
1								\$ -			
3								\$ -			
4								\$ -			
5								\$ -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
6								\$ -			
7								\$ -			
8								\$ -			
9					-			\$ -			
10								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		_			
11									-			
12									-			
14			1		 				-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			
24									-			
25 26									-			
27									-			
28			1									
29			1									
30			1						-			
31									-			
32					1				-			
33					1				-			
34			i						-			
35									-			
36									-			
37					D 4 -60				-			
38				•	Page 1 of 3				-		•	

39

Travel Sub-Total

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
40 41							-			
42										+
43							-			1
44							-			
45							-			
46							-			
47							-			
48							-			
49 50										
51							_			+
52							-			
53							-			
54							-			
55							-			
56							-			
57							-			
58							-			
59							-			1
60	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity		Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
61					-		\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
62		Radio, DHS HF SHARES system	New / Enhance / Past / Competitive		1.00	5,000.00				06CP-01-HFRQ Radio, High Frequency (HF) Single Sideband	SHSP
63		Radio, Public Safety / EAS system components case	New / Enhance / Past / Competitive		1.00	2,000.00			Communications		SHSP
64		Antennas, Dipole	New / Enhance / Past / Competitive		2.00	820.00				06CP-03-TOWR Systems, Antenna and Tower	SHSP

65		Radio Upgrade component for XL200 Portable	New / Enhance / Past / Competitive		6.00	500.00		NIMS - State of Nevada DEM	Operational Communications	06CP-01-PORT Radio, Portable	SHSP
66		Radio, New, DualBand VHF / UHF, Digital Fusion	New / Enhance / Past / Competitive		1.00	800.00		NIMS - State of Nevada DEM	Operational Communications	06CP-01-BASE Radio, Base	SHSP
67							\$ -				
68							\$ -				
69							\$ -				
70							\$ -				
71							\$ -				
	EQUIPMENT Sub-Total						\$ 12,400.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

- Line 62: System components for communication with DHS HF radio network. This reestablishes this capability within the SEOC Communications Suite. Line 63: Case and components for the installation of existing PS Radios and EAS system for COOP.

- Line 63: Case and components for the installation of existing PS Radios and EAS system for COOP.

 Line 64: Antennas for the ARES / RACES radio repeater systems.

 Line 65: Radio component to enhance current XL 200 portables within the SEOC for UHF which was left out at time of purchase.

 Line 66: Radio will replace current with next-generation unit with digital capabilities.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-			
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
72	your pro	ject requires EHP Screening								\$ -	
73										\$ -	
74										\$ -	
75										\$ -	
76										\$ -	
77										\$ -	
78										\$ -	
	Training Sub-Total									\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
79	your pro	ject requires EHP Screening									
80										\$ -	
81			•							\$	
82			<u> </u>			<u> </u>				\$ -	
83										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total			
					Request	\$ 12	2,400.00	

Ne	vada Homeland Security	y Grant P	rogram (l	HSGP) RESUBM	IISSION	PROJECT ID:	YY
Pr	oject Proposal for FFY19	HSGP Fu	i <mark>nding D</mark> e	scription		Date Submitted	
•	PROJECT TITLE:	Stop the Ble	eed				
	PROPOSING/LEAD AGENCY:		Emergency M				
•	Project Manager Name/Title:		-	and Projects Analyst			
	Project Manager Contact Info:	Phone: (775	5) 687-0317	Email: jgiovacchini@	dps.state.nv	v.us	
•	Addl Project Manager Name/Title:	n.		I =			
	Addl Project Manager Contact Info:	Phone:		Email:			
•	Finance/Grant Contact Name/Title: Finance/Grant Contact Info:			cy Management Prog			
6) 6	CLASSIFICATION - Check the p	,	5) 687-0321	Email: kanderson@o	aps.state.nv	.us	Choose one:
Ο,	NEW* Project is NEW [No	grant-funded p	orojects have r	ecently addressed this c		hin the past five years; C NCHS FY16-18 priorities	
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACITY*			0
	*All NEW projects are competitive						
7)	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and <u>WHERE</u> (identify the geo	e Proposed Proj e: "To (establish meland Security	ect in terms of C , improve, expar (NCHS) FFY18 p	APABILITY. The statement and, double, sustain, etc.) riorities (See #10)]; FOR W	t should describ ; OF WHAT CO /HO (identify th	be <u>HOW MUCH</u> [quantify t DRE CAPABILITY (or CAPAB he direct users/beneficiarie	ILITIES [consider es of the
	interventions, providing the tools mass casualty incident within the				in the event	t of a terrorist incident	or other
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency N	/Janagement	Agency (FEMA) list of	Core Capabil	lities and the Crosswal	lk of Target
	FFY19 Strategic Capacity Maintai	ned*:	Not Applicabl	e			
	HSGP Project Type Supporting Strat	tegic Capacity:					
	If OTHER, please choose FFY16-18 N			AL COORDINATION [M		ALL]	
	Core Capability aligned with Mainta	ained Project:	MASS CARE	SERVICES [Mission Ar	ea - RESP]		
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						9 and/or
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment w						
	This project aligns with Mass Ca locations. Schools, as an examp Response Mission Area in order located	ole, have incr	easingly beco	ome targets for mass	casualty inc	cidents and this projec	t ties to the

Nev	ada Homeland Secu	urity Grant Pro	ogram (HSGP) RESUBMISSI	ON PROJECT ID:	YY									
Proj	ject Proposal for FF	Y19 HSGP Fun	ding Description	Date Submitted										
PRO.	JECT TITLE REFERENCE:	Stop the Blee	d											
10)	PROCUREMENT - Indica	ite the method of	procurement associated with this	s project:										
	Request for Proposal		lanation on your method of procurement		BLE TEXT BOX:									
	O Sole Source	DEM will complete t	he procurement or sub the funds out fo	or procurement										
	O Internal													
11)			N, and by whom, the Proposed Project omplished, identifying who (i.e. staff, contractor	•	escribe									
	The Stop the Bleed Stations will be installed in designated locations as follows:													
Ų	[A] Northern Nevada where appropriate training will follow.													
FIELD IS LIMITED TO VISIBLE TEXT BOX	[B] Coordinate the purchase of 82 bleeding control stations following the State of Nevada's procurement standards.													
E TE)	[C] Coordinate installation of stations at each designated facility.													
VISIBL	[D] Maintain the supply of I	bleeding kits using fa	acility funding, as necessary.											
D 70														
IMITE														
1 SI O														
FIEL														
12)			y the participating agency(s) and juris											
		IS WHO WIII DE PECE (FD, PD, etc.)	eiving the money for your project - If Political Jurisdiction (City, County, State, etc.)	Project Representative										
	12(a) Division of Emergen		State of Nevada, Department	J. P. Giovacchini, Grants Analyst	1									
	12(b)													
	12 (c)													
13)	SUSTAINMENT - Identify	any continuing finar	ncial obligation created by the Project, a	and proposed funding sol	ution									
×o	Funding to replenish and re	eplace bleeding cont	rol kits as needed will be provided thro	ugh facility budgets.										
FIELD IS LIMITED TO VISIBLE TEXT BOX														
VISIBLE														
тер то														
D IS LIM														
FIELI														
14)		-	oject's funding percentage makeup of St	tatewide -vs- UASI is noted	below for									
	your convenience. This amo	unt is derived from Fid	eld '15g - PROJECT TOTALS' on Page #3											
	100% 0%													
	Statewide Urban A	rea												

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description PROJECT ID: ΥY Date Submitted PROJECT TITLE REFERENCE: Stop the Bleed

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
Purchase of 82 bleeding control stations, each containing 8 bleeding control kits.		\$ 50,882.46	\$ 50,882.4
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
Toe) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI		Jubiota
Exercise (Development and execution of exercises to evaluate and improve capabilities)	LV-UA3I		\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00
		State-wide	\$ 0.00
		State-wide State-wide	\$ 0.00 SubTota

Nevada Homeland Security Grant Program (HSGP) RESU	BMISSION
Project Proposal for FFY19 HSGP Funding Description	

PROJECT ID: YY

Date Submitted

PROJECT TITLE REFERENCE:

Stop the Bleed

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Initiate procurement process	10/01/19	12/31/19	3
3	Vendor selection	12/31/19	01/30/20	1
4	Order and receive bleeding control stations	02/03/20	02/28/20	1
5	Distribute kits to locations	03/02/20	06/01/20	3
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

•	, <u> </u>
	a. Does this project have a nexus to terrorism? YES NO NO Explain below.
	Shootings and terrorist incidents have become an alarmingly frequent form of domestic terrorism and remain targets for global terrorists due to the potential targeting of vulnerable populations.
Size	
χοα ιχε	
3/e 1	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
VISI	This project aligns with the Response Mission Area and Mass Care Services core capability.
0	

c. Can this project funding request be reduced? Is it scaleable? YES
NO Explain below.

Depending on available funding this project can easily be scaled to reduce the number of facilities that receive Stop the Bleed stations.

	The state of the s	Grant Program (HSGP) RESUBMISSION	PROJECT ID:	YY
Proj	ect Proposal for FFY19	HSGP Funding Description	Date Submitted	
PROJ	ECT TITLE REFERENCE:	Stop the Bleed		
	d. Can this project continue w	thout funding? YES 🔵 NO 💿 Explain below.		
to visible text box size	While the Stop the Bleed training in place to provide STB stations	g will continue for all employees throughout the area, at this everywhere.	time there is no dedi	cated funding
iitied	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	cplain below.	
Fields "d" and "e" are limitied to visible text box size	The establishment of bleeding coshooting or other terror attack. W	ontrol stations in designated facilities will offer a critical reso /hile the hope is that these stations never have to be utilize emergency medical preparedness is paramount to an effec	d, the growing reality	
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018 7	HIRA Survey. <u>CHOO</u> .	SE ONE:
	YES - Agency HAS partice	ipated in the 2018 Threat and Hazard Identification Risk A.	ssessment (THIRA) So	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR)	A) Survey
171	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field is
	Stop the Bleed training for persoaccess to bleeding control kits b	agement has a number of partners with Hospitals and Ame onnel. The Hartford Consensus after the Sandy Hook school y those who are trained to use them will save lives. This go signated location. DEM will determine where the kits will be	ol shooting identified ant will ensure that the	that early

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

				LII1L I	IEWIDETAIL	DODGET						
	Agency Name	Division of Emergency Management	Project Manager Name & Contact #	J. P. Giovac 687-0317	chini (775)	Grant Manager Name & Contact#	Kelli Anderson (775) 687-0321					YY
	IJ TITLE:	Stop the Bleed										
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
11								\$ -				
2							+	\$ -		-		-
4								\$ -				
	Personnel Sub-Total							\$ -				
DEDSONI	IEL COST MADDATIVE DECLIDED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOCITIONS AND D	ELIVEDABLES	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMO LIC	STED WILL BE COM	IDI ETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITEM

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

L	ine #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above										
	5								\$ -				
	6								\$ -				
Г	7								\$ -				
E	8								\$ -				
		Fringe Sub-Total			•				\$ -			•	

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type		Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11									-			
12									-			
13 14									-			-
15									_			
16									-			-
17									-			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			1
24									-			
25									-			
26 27									-			
21	Travel Sub-Total								_			
TRAVEL		DR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	ALL EACH LINE ITEM AND DELIV	EDARLES NAD	DATIVE WILL BE II	SED TO ENGLIBE ITEMS LISTED	WILL BE COMPLE	TED IN THE CO.	ANT CYCLE ITEM	AC MAY NOT BE I	UDCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27										
28						-	1			
29							-			
30										
31							1			
32							-			
33							-			
34							1			
35										
	Planning Sub-Total						\$			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					•	-	\$			
37							\$			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		·				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		83 Stop the Bleed Stations (8 kits per station)	New / Enhance / Past / Competitive		82.00	615.01	\$ 50,882.46			09MS-04-TNQT Tourniquet	SHSP
41			•				\$ -				
42							\$ -				
43							\$ -				
44 45				1		1	\$ -		 		
46				1		+	\$ -		1		
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 50,882.46				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	<u> </u>
56	Training Sub-Total										\$ -	
	Trailing Sub-Total										٠ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity		TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			·								\$ -	
61			•		,						\$	
	Exercise Sub- Total										\$ -	
EVERCIE		FOR EACH LINE ITEM AROVE. DI EACE EVELAINE IN DE	TAIL THE DOCITIONS AND DEL	IVEDADI EC NA	DRATIVE WILL BE	LICED TO ENGLIDE ITEMS LICTE	D WILL BE COMP	ETED IN THE C	BANT CYCLE IT	MC MAY NOT D	DUDGUACED OUT	NOE THE ITEMS

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total	50 882 46	

Nevada Homeland Security	y Grant Program (F	HSGP) UASI ONLY	PROJECT ID:	BBB						
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	4/25/19						
1) PROJECT TITLE:	,									
2) PROPOSING/LEAD AGENCY:										
3) Project Manager Name/Title:	Troy Westover, Facilities	Troy Westover, Facilities Manager								
Project Manager Contact Info:	Phone: (702) 267-3290	Email: Troy.Westover@cityofhen	derson.com							
4) Addl Project Manager Name/Title:	Ryan Turner, Division Ch	ief of Emergency Management a	nd Safety							
Addl Project Manager Contact Info:	Phone: (702) 267-2212	Email: Ryan.Turner@cityofhenderson.com								
5) Finance/Grant Contact Name/Title:	Heather Carson, Fire Dep	artment Business Analyst III								

6) CLASSIFICATION - Check the primary intention of the Proposed Project:

Phone:

Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

Email: Heather.Carson@cityofhenderson.com



Finance/Grant Contact Info:

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

(702) 267-2246



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

In the FFY19 Department of Homeland Security (DHS) Urban Area Security Initiative (UASI) process, the City of Henderson (COH) requested assistance to sustain its Emergency Operations Center (EOC) by receiving funding for an enterprise surveillance system to mitigate findings from formal DHS sponsored assessments and to ensure the safety and welfare of COH's critical infrastructure/key resources, data, personnel as well as the citizens and vendors who frequent these facilities and depend on these critical systems and services. This additional request to expand on the proposal for the enterprise surveillance system would allow COH to strengthen its intelligence and information sharing as well as its operational coordination with partnering agencies within the Las Vegas urban area and completely outfit its key facilities - Henderson City Hall, Water, and Wastewater facilities. Sustaining the Henderson Multi Use EOC through the acquisition of an enterprise surveillance system supports Intelligence and Information Sharing core capability, allowing COH to "anticipate and identify emerging and/or imminent threats;" "share relevant, timely, and actionable information and analysis with Federal, state, local, private sector, and international partners and develop and disseminate" appropriately; and, ensure these "partners possess or have access to a mechanism to submit terrorism-related information and/or suspicious activity reports to law enforcement." Supporting the Operational Coordination capability, COH will establish and maintain a unified and coordinated operation by creating protocols to include all stakeholders in monitoring critical infrastructures by utilizing its EOC to facilitate incident activities via the Incident Command System (ICS), which is consistent with the National Incident Management System (NIMS).

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: | INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROTI

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This is a new project and aligns with the FY-16-19 core capabilities intelligence and information sharing along with operational coordination. The City of Henderson, Nevada's second largest city seeks to prevent, protect and respond to its critical infrastructure with the use of an enterprise surveillance system that will be monitored and coordinated from the Multi-Use EOC. Through this method of intelligence and information sharing, COH will have the capability for early detection to deliver its EOC personnel real time data and imagery to provide situational awareness to first responders to mitigate any potential threats. In addition, supporting the core capability of Operational Coordination because COH will operationally coordinate amongst its departments to ensure the safety and welfare of data, infrastructure, and personnel, citizens it serves, and partnering agencies in the Las Vegas urban area - including the ability to maximize operational coordination with the Fusion Center to provide historical and live data feed.

			ram (HSGP) UASI ONLY	PROJECT ID:	BBB				
ject P	Proposal for FF	Y19 HSGP Fundir	ng Description - Due 4/26	Date Submitted	4/25/19				
JECT T	TITLE REFERENCE	: Henderson Multi	Use EOC Sustainment - Enterprise	e Surveillance System Exp	ansion				
PROC	UREMENT - Indica	ate the method of pro	ocurement associated with thi	is project:					
Re	equest for Proposal	Provide a brief explan	ation on your method of procuremer	nt - FIELD IS LIMITED TO VISI	BLE TEXT BOX:				
O So	le Source	City of Henderson will for	ollow the RFP process.						
O Int	ternal								
PROJI	ECT IMPLEMENTA	TION - Describe how, a	and by whom, the Proposed Proje	ect will be implemented. De	escribe				
in rough	n order the process by wh	ich the project will be accomp	olished, identifying who (i.e. staff, contracto	or, or ?) will perform what work					
and associated cameras and equipment, will be procured as outlined in Nevada Revised statutes. A Request For Qualifications (RFQ) will be published and a team from the City will review and short list the most qualified applicants. These short-listed applicants will be scrutinized by staff to determine the best value for the City. This process will include coordination with other Emergency Managers in the region to determine which system works best with the other municipalities.									
	on is for you to tell t		ne participating agency(s) and juring the money for your project - I Political Jurisdiction (City, County, State, etc.)		ncy]				
12(2)	Henderson Fire Dep		City of Henderson	Shawn White, Fire Chief	,				
12(a)									
12(b)									
12 (c)									
SUST	AINMENT - Identify	any continuing financia	I obligation created by the Project,	and proposed funding solu	ıtion				
supple this g	emental proposal, CC rant funding stream,	OH does not plan to retu COH has requested fron	ceiving the full amount requested in rn for further grant assistance to or in its leadership to prioritize and con erations and maintenance.	utfit its other facilities. If su	pported by				

0% 100% Urban Area (SHSP) (UASI)

Nevada Homeland Security Grant Program (HSGP) **UASI ONLY**Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: BBB

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Henderson Multi Use EOC Sustainment - Enterprise Surveillance System Expansion

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	cific. Identify (LV-UASI	<i>UASI and State</i> State-wide	cost. SubTotal
Tody Training (Development of poneics, plans, procedures, mataurala agreements, strategies)			oub rotui
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Enterprise surveillance system, which consists of the Video Management System (VMS) and associated cameras and equipment: base license with one-year care plus for base license; materials, installation, supporting infrastructure unit; device license/camera; one-year care plus for device license/camera; network switches & infrastructure; and, video storage, work stations, 2 data storage sites/per camera.	\$ 269,115.00	\$ 0.00	\$ 269,115.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
TOUT NOTE OF TOTALS	\$ 269,115.00	\$ 0.00	\$ 269,115.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: BBB Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Henderson Multi Use EOC Sustainment - Enterprise Surveillance System Expansion

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive and Accept Sub-grant Award	10/01/19	11/30/19	2
3	Complete Environmental and Historic Preservation Screening Form Process	12/01/19	01/31/20	2
4	Design system	02/01/20	05/31/20	4
5	Procure Equipment in Compliance with Grant Guidelines	06/01/20	09/30/20	4
6	Equipment Inventory and Installation	10/01/20	03/31/21	6
7	Test Equipment	04/01/21	06/30/21	3
8	Put Equipment into Full Service	07/01/21	07/31/21	1
9	Closeout Grant	08/01/21	08/31/21	1
10				
11				
12				

SUPPLEMENTARY INFORMATION - *Please provide a <u>BRIEF</u> explanation for your response to these questions:*

	a. Does this project have a nexus to terrorism? YES NO Explain below.
size	Yes, through this proposal, COH will be able to identify, deter, detect, disrupt and prepare for terrorist events; reduce vulnerability of critical assets, systems and networks and mitigate potential consequences of critical infrastructure if a terrorist attack or subversive act did occur.
are limitied to visible text box	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
ed to visil	No, this is a new project and the explanation has been provided in section 9 of this grant proposal.
are limitie	
and "c",	
, Q	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
a,	Yes, this project may be implemented in multiple phases.
spl	

	y Grant Progra			PROJECT ID:	BBE			
ect Proposal for FFY19	HSGP Funding	g Description	- Due 4/26/19	Date Submitted	4/25/1			
ECT TITLE REFERENCE:	Henderson Multi U	se EOC Sustainme	ent - Enterprise Surv	eillance System Expa	ansion			
d. Can this project continue w	ithout funding? YES	NO (Expla	n below.					
No, grant opportunities allow CC a needs assessment to determineeds city-wide, the infrastructu	ne the highest priority	y demands for add	tional resources. Be					
e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below.								
Yes, the project provides a mea				critical infrastructures	, which we			
THIRA COMPLETION - Please								
YES - Agency HAS partio	ipated in the 2018 T	hreat and Hazard	dentification Risk A	ssessment (THIRA) S	urvey			
NO - Agency has NOT pa	articipated in the 20	18 Threat and Haz	ard Identification Ri	sk Assessment (THIR.	A) Survey			
NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) S ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important limited to the visible text hav								
ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate a				tant. Her			
	1 - Please indicate a				- Ten			
limited to the visible text box	1 - Please indicate a				tant. Her			
limited to the visible text box	1 - Please indicate a				tam. Tek			
limited to the visible text box	1 - Please indicate a				tam. Field			
limited to the visible text box	1 - Please indicate a				tani. Fick			
limited to the visible text box	Y - Please indicate a				tani. Hek			
limited to the visible text box	Y - Please indicate a				tani. Frenc			
limited to the visible text box	Y - Please indicate a				Tam. Fick			
limited to the visible text box	1 - Please indicate a				tam. Fick			
limited to the visible text box	1 - Please indicate a				tani. Hek			
limited to the visible text box	1 - Please indicate a				tant. Her			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

LINE IT LIN DETAIL BODGET												
	Agency Name	City of Henderson	Project Manager Name & Contact #	(702)267-3290		Grant Manager Name & Contact #	Heather Cars Fire Departm (702)267-224	Department Business Analyst III				BBB
	IJ TITLE:	Henderson Multi Use EOC Sustainment -	Enterprise Surveillance	System Expa	ınsion							
		One Budget Per Funding Stream										
		Select Funding Stream										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ - \$ -				
4								\$ -				
	Personnel Sub-Total							\$ -				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Coot	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8						·		\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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vel Planning Training rcise Equipment anization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT						
	PROVIDED WILL NOT BE FUNDED BASED ON NON- COMPLIANCE)	Select Type		_	_		
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	Sub-Total						

IRAVEL COST MARKATIVE REQUIRED FOR EACH LINE THE MEMOVE - PLEASE EXPLAINE IN DETAIL EACH LINE THEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE THEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - THEMS MAY NOT BE PURCHASED OUTSIDE THE THEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIEST.

THE ALL REVERSE RESIDENCE RESIDENCE RESIDENCE

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oiti	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$			
37							\$ -			
38				-	 -		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED AROVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR CUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AGL									
		curement / See 2nd tab to determine whether your ect requires EHP Screening									
40		Materials, installation, supporting infrastructure unit	Maintain	UASI	35	4,500.00	\$ 157,500.00		Information	14SW-01-VIDA Systems, Video Assessment, Security	UASI
41		Device license/camera	Maintain	UASI	35	329.00	\$ 11,515.00			14SW-01-VIDA Systems, Video Assessment, Security	UASI
42		One-year care plus for device license/camera	Maintain	UASI	35	60.00	\$ 2,100.00			14SW-01-VIDA Systems, Video Assessment, Security	UASI
43		Network switches & infrastructure	Maintain	UASI	35	700.00	\$ 24,500.00			14SW-01-VIDA Systems, Video Assessment, Security	UASI
44		Video storage, work stations, 2 data storage sites/per camera	Maintain	UASI	35	2,100.00	\$ 73,500.00		Information	14SW-01-VIDA Systems, Video Assessment, Security	UASI
45							\$ -				
46							\$ -				
47				1			\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 269,115.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

After approval of grant funding, the enterprise surveillance system, which consists of the Video Management System (VMS) and associated cameras and equipment, will be procured as outlined in Nevada Revised statutes. A Request For Qualifications (RFQ) will be published and a team from the City will review and short list the most qualified applicants. These short-listed applicants will be scrutinized by staff to determine the best value for the City. This process will include coordination with other Emergency Managers in the region to determine which system works best with the other municipalities.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		urement / See 2nd tab to determine whether your										
50	projec	ct requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
57	EHP Required prior to procu	arement / See 2nd tab to determine whether your ct requires EHP Screening									
58										\$ -	
59										\$ -	
60			·		·					\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIREST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request \$	269.115.00	

Nevada Homeland Security	, Grant Program (I	HSGP) HASLONLY	PROJECT ID:	CCC					
Project Proposal for FFY19	•		Date Submitted	4/25/19					
) PROJECT TITLE:	LVMPD Russell Cooridor								
2) PROPOSING/LEAD AGENCY:	as Vegas Metropolitan Police Department								
B) Project Manager Name/Title:	Brad Cupp/Sergeant								
Project Manager Contact Info:	Phone: (702) 828-4455	Email: b8104c@lvmpd.com							
Addl Project Manager Name/Title:	Rachel Skidmore / Emerg	gency Manager							
Addl Project Manager Contact Info: Phone: (702) 828-2257 Email: r14590s@lvmpd.com									
) Finance/Grant Contact Name/Title:	Joni Prucnal, Director of F	inance							
Finance/Grant Contact Info:	Phone: (702) 828-8267	Email: J13700P@LVMPD.COM							
6) CLASSIFICATION - Check the pi	rimary intention of the Pr	roposed Project:		Choose one:					
		ecently addressed this capability with ects in this category must align with I							
MAINTAIN Project will MAINTA	AIN AN APPROVED FFY19 STI	RATEGIC CAPACITY*		0					
*All NEW projects are competitive									
PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement. Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW MUCH [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX .									

A stadium construction project is currently under way to house the Las Vegas Raiders football team starting the 2020 season. The stadium site is located on Russell Road, just west of the I-15, and is in close proximity to the tourist corridor along Las Vegas Blvd. The goal of the project is to expand the existing Public Safety Camera System in Las Vegas to encompass the new Stadium corridor. This project would add surveillance cameras and related wireless/network infrastructure at approximately 22 locations within the County right of way and would cover all ingress and egress areas into the stadium complex. All video would be streamed back to the Fusion Center where it can be consumed in real-time and/or at a command post on site during large scale events. Funding for this project would need to be completed under the FY19 grant cycle in order for the project to be completed by the 2020 NFL season.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

	,,
FFY19 Strategic Capacity Maintained*:	FUSION CENTERS
HSGP Project Type Supporting Strategic Capacity:	Southern Nevada Counter Terrorism Center [FUSION]
If OTHER, please choose FFY16-18 NCHS Priority:	INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]
Core Capability aligned with Maintained Project:	INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project would provide 24/7 real-time video surveillance capability for the Fusion Center in the stadium corridor, which would be especially beneficial during the many large scale events that are expected to occur once the new stadium is completed.

evada	a Homeland S	ecurity	y Grant Progra	am (HSGP) UASI ONLY		PROJECT ID:	CCC
oject	Proposal for	FFY19	HSGP Fundin	g Description - Due 4/26,	/19	Date Submitted	4/25/19
OJECT	TITLE REFEREN	CE:	LVMPD Russell C	ooridor Camera Project			
PRC	OCUREMENT - Inc	licate th	ne method of prod	curement associated with this	s proje	ect:	
0 1	Request for Propos	al <u>Pro</u>	ovide a brief explana	tion on your method of procuremen	t - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX:
0	Sole Source			ugh existing LVMPD competitively	/ bid co	ontracts for camera a	and related
O	Internal	Carrie	era equipment.				
			-	nd by whom, the Proposed Projec		•	scribe
			<u> </u>	shed, identifying who (i.e. staff, contracto			
	work will be comple uad (TASS), and the			s of the Emergency Management S	Section	n, Technical and Sur	veillance
. . 1. I	Receive Funding						
2. 3	System Design EHP submission						
4. I	Issue Purchasing O	rder					
5. l	Procure Equipment Install Equipment						
<u>:</u>							
SUE		DECIDI	ENTS Identify the	participating agency(s) and juri	icdictio	n(c) proposed for a	words [This
				g the money for your project - It			
	Age	ency (FD, P	D, etc.)	Political Jurisdiction (City, County, State, etc.)	ı	Project Representative (individual)
12 (a	a) Las Vegas Metro	politan F	Police Department	Clark County	Christ	opher Tomaino	
,	,						
12 (b	0)						
12(0	3)						
(0	,						
SHS	STAINMENT - Iden	ntify any (continuina financial	obligation created by the Project,	and nr	onosed funding solu	tion
					and pr	oposcu ranamy solu	
The	ere is no subscription	n ree, or a	annual reoccurring o	cost associated with this network.			
FIELD IS LIMITED TO VISIBLE TEXT BOX							
				t's funding percentage makeup of St 5g - PROJECT TOTALS' on Page #3	tatewid	le -vs- UASI is noted b	elow for
-			-	-			
	0% 10	0%					

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: CCC

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Russell Cooridor Camera Project

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified	-		
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Milestone Licenses, Networking equipment, (44) Surveillance Cameras, (22) camera boxes, and miscellaneous cabling and mounts	\$ 195,200.00	\$ 0.00	\$ 195,200.C
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
n.a	\$ 0.00	\$ 0.00	\$ 0.00
	LV-UASI	State-wide	SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	\$ 0.00	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	\$ 0.00	\$ 0.00 State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: CCC

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Russell Cooridor Camera Project

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	System Design	10/01/19	12/31/20	1
3	EHP Submission	10/01/19	12/31/20	2
4	Issue Purchasing Request	11/01/19	12/31/20	1
5	Procure Equipment	11/01/19	11/30/19	1
6	Install Equipment	03/01/20	09/30/20	6
7				
8				
9				
10				
11				
12				_

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

When completed the stadium is expected to have a capacity ranging from 65,000-72,000 people. A venue this size makes an attractive soft target for a potential terrorist attack that would be highly visible and highly publicized. Especially when you consider that the new stadium may be a viable site to host something like the Super Bowl in a few years.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project would allow the SNCTC Fusion Center 24/7 video surveillance of the stadium corridor, as well as, a command post that could potentially be stood up in the area during a major incident.

c. Can this project funding request be reduced? Is it scaleable? YES NO • Explain below.

Once the network and infrastructure components are in place the project is scalable from 1-44 cameras. However, reducing the number of cameras reduces the surveillance capabilities and would leave avenues of ingress/egress uncovered.

V	ada Homeland Securit	y Grant Program (HSGP) UASI ONLY		PROJECT ID:	CCC
oj	ect Proposal for FFY19	HSGP Funding Description - Due 4/26	5/19	Date Submitted	4/25/19
OJ	ECT TITLE REFERENCE:	LVMPD Russell Cooridor Camera Project			
	d. Can this project continue w	vithout funding? YES NO (Explain below.			
	No, there is currently no identific	ed funding source for this project.			
	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO	O 🔘 Exp	olain below.	
	to not only Clark County and the	d the introduction of an NFL franchise provides a signie City of Las Vegas, but the State of Nevada as a who contributor for economic growth for the state that warra	ole. Like	e the Las Vegas Stri	ip, the new
	THIRA COMPLETION - Please	e indicate the participation level in completing the 2	201 8 TH	IIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification	Risk Ass	sessment (THIRA) S	urvey
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identificat	tion Risk	k Assessment (THIR.	A) Survey
)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project comment	tary you	ı feel may be impoi	tant. Field is
	none.				

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

				LINE	TEM DETAIL I	BUDGET						
	Agency Name	LVMPD	Project Manager Name & Contact #	Sgt. Brad Co 702-828-44	upp 55	Grant Manager Name & Contact #	Joni Prucnal 702 828	8267				CCC
	IJ TITLE:	Russell Corridor Camera Project										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.		, i								
1								\$ -				1
2								\$ - ¢ -			 	+
4								\$ -				1
	Personnel Sub-Total							\$ -				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				,		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16 17									-			
18												-
19			1						-			
20												+
21									_			
	Travel Sub-Total	EACH LINE ITEM ABOVE - DI EASE EVEL AINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-					
28						-	•				
29							-				
30							-				
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			·		-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		ocurement / See 2nd tab to determine whether ject requires EHP Screening										
40		Cameras and Mounts	New / Enhance / Past / Competitive	UASI	04MD-01-VCAM	44.00	2,800.00	\$ 123,200.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04MD-01-VCAM	UASI
41		Camera Box	New / Enhance / Past / Competitive	UASI	04MD-01-VCAM	22.00	2,000.00	\$ 44,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04MD-01-VCAM	UASI
42		Milestone Licenses	New / Enhance / Past / Competitive	UASI	04SW-04-NETW	44.00	300.00	\$ 13,200.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04SW-04-NETW	UASI
43		Network and Wireless Equipment	New / Enhance / Past / Competitive	UASI	04HW-01-INHW	1.00	13,800.00	\$ 13,800.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
44		Miscellaneous Supplies	New / Enhance / Past / Competitive	UASI	04HW-01-INHW	1.00	1,000.00	\$ 1,000.00	Fusion Center - SNCTC	Intelligence and Information Sharing	04HW-01-INHW	UASI
45							-	\$ - \$ -				
46 47				 			-	\$ - \$ -				
48				1			-	\$ -				
49								\$ -				
	EQUIPMENT Sub-Total							\$ 195,200.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

The following is a request for 44 cameras, and 22 indiviudal camera mount boxes. The milestone licenses are for the softwrae feed consumption into our video management system. The remaining two line items are the necessary hardware reqiured for video transmission and the installation items.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			·					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 195,200.00)

Nevada Homeland Security	Grant Prog	gram (ŀ	HSGP) UAS	I ONLY	PROJECT ID:	DDD
Project Proposal for FFY19	HSGP Fund	ing De	scription -	Due 4/26/19	Date Submitted	4/25/19
<u> </u>	Southern Nevad		•			
2) PROPOSING/LEAD AGENCY:	Las Vegas Metro	opolitan F	Police Departme	ent		
3) Project Manager Name/Title:	Chris Tomaino /	/ Captain				
Project Manager Contact Info:	Phone: (702) 82	28-2281	Email: c4671t@	lvmpd.com		
4) Addl Project Manager Name/Title:	Rachel Skidmor	re / Emerg	jency Manager			
Addl Project Manager Contact Info:	Phone: (702) 82	28-2257	Email: r14590s	@lvmpd.com		
5) Finance/Grant Contact Name/Title:	Joni Prucnal, Dir	rector of F	inance			
Finance/Grant Contact Info:	Phone: (702) 82	28-8267	Email: J13700	P@LVMPD.COM		
6) CLASSIFICATION - Check the pri	imary intention	of the Pr	oposed Project			Choose one:
					hin the past five years; NCHS FY16-18 prioritie	
MAINTAIN Project will MAINTAI	IN AN APPROVED	FFY19 STF	RATEGIC CAPACI	TY*		0
*All NEW projects are competitive						
7) PROJECT OUTCOME - Describe	e the goal of the	e Propose	d Project in a s	ummary stateme	ent.	
Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hom capability); and WHERE (identify the geog	e: "To (establish, impo meland Security (NCF	orove, expan HS) FFY18 pr	d, double, sustain, iorities (See #10)];	etc.)]; OF WHAT CO FOR WHO (identify the	DRE CAPABILITY (or CAPAI he direct users/beneficiar	BILITIES [consider ies of the
Center (SNCTC) will be able to su SNCTC is committed to intelligent Region IX. This project proposal and continue to operate as the DI in the Fusion Watch program to le program.	ce and information further sustains HS Primary fusion	ion sharing our efforts on center f	g within the sta s to maintain ne for the State of	te, regionally, and ecessary informat Nevada. We are	I nationally, to include ion streams througho seeking to staff a full	e FEMA out our state, time member
PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities he	Emergency Mana	agement A	Agency (FEMA)	ist of Core Capabi	lities and the Crosswa	alk of Target
FFY19 Strategic Capacity Maintain	ned*: FU	SION CEN	TERS			
HSGP Project Type Supporting Strate	egic Capacity: Sou	uthern Nev	ada Counter Teri	orism Center [FUSI	ION]	
If OTHER, please choose FFY16-18 N	ICHS Priority: INT	TELLIGEN	CE AND INFORM	IATION SHARING [[Mission Areas - PREV/I	PROT]
Core Capability aligned with Maintai	ined Project: INT	TELLIGENO	CE AND INFORM	IATION SHARING [Mission Areas - PREV/F	PROT]
*FFY19 Strategic Capacities are subj FFY19 Homeland Security Grant Pro						19 and/or
STRATEGIC CAPACITY JUSTIFI justification of this project's alignment w						
This project is the sustainment re	equest for the So	uthern Ne	vada Counter	Terrorism Center.		

PROCO Recovery Solution Frough The p Nevar representation CFA Depa Country	CUREMENT - Indicate equest for Proposal ple Source ternal ECT IMPLEMENTATE or order the process by which project will be administration.	Southern Nevada te the method of proce Provide a brief explanar All three are completed. TION - Describe how, are the the project will be accomplised the project will be accomplised to the Las Vegas No Center. In addition to the	g Description - Due Counter Terrorism Center Curement associated we tion on your method of proceed and by whom, the Proposed shed, identifying who (i.e. staff, of Metropolitan Police Depart	- B with this project curement - FIELD of d Project will be contractor, or ?) will	is LIMITED TO VISIE	
PROC Re So Interpretation of the processing o	equest for Proposal colle Source ternal ECT IMPLEMENTAT corder the process by which coroject will be administ da Counter Terrorism sented to include: The	Provide a brief explanary All three are completed. TION - Describe how, are the the project will be accomplished by the Las Vegas No Center. In addition to the	curement associated w tion on your method of prod and by whom, the Proposed shed, identifying who (i.e. staff,	curement - FIELD of the contractor, or ?) will	is LIMITED TO VISIE	
O Recovery Services S	equest for Proposal ble Source ternal ECT IMPLEMENTAT h order the process by whice project will be administed a Counter Terrorism sented to include: The	Provide a brief explanaria. All three are completed. TON - Describe how, are the the project will be accomplished by the Las Vegas No Center. In addition to the	tion on your method of production on your method of production of produc	d Project will be	is LIMITED TO VISIE	
PROJI in rough The p Nevar repres - CFA Depa Count	ternal ECT IMPLEMENTAT In order the process by which project will be administed a Counter Terrorism sented to include: The	All three are completed. TON - Describe how, are the project will be accomplished by the Las Vegas No Center. In addition to the	nd by whom, the Proposed shed, identifying who (i.e. staff,	<i>d Project will be</i> contractor, or ?) will	<i>: implemented.</i> De	
PROJI in rough The p Nevar repres - CFA Depa Count	ternal ECT IMPLEMENTAT In order the process by which project will be administed a Counter Terrorism sented to include: The	TION - Describe how, are the the project will be accomplishered by the Las Vegas No Center. In addition to the	shed, identifying who (i.e. staff,	contractor, or ?) will	•	scribe
The p Nevac repres - CFA Depa Coun	ECT IMPLEMENTAT h order the process by which project will be administ da Counter Terrorism sented to include: The	th the project will be accomplished by the Las Vegas No Center. In addition to the	shed, identifying who (i.e. staff,	contractor, or ?) will	•	scribe
The p Nevac repres - CFA Depa Coun	n order the process by which project will be administ da Counter Terrorism sented to include: The	th the project will be accomplished by the Las Vegas No Center. In addition to the	shed, identifying who (i.e. staff,	contractor, or ?) will	•	escribe
The p Nevac repres - CFA Depa Coun	n order the process by which project will be administ da Counter Terrorism sented to include: The	th the project will be accomplished by the Las Vegas No Center. In addition to the	shed, identifying who (i.e. staff,	contractor, or ?) will	•	Joen DC
Neva repres - CFA Depa Coun	da Counter Terrorism sented to include: The	Center. In addition to th	Metropolitan Police Departi			
Hoove and the inform supporting	ty Fire Department, B rity - Office of Intellige er Dam Police Depart he Clark County Schonation is collected, anorting research staff lentful and actionable interpretation will allow	oulder City Police Depart nce and Analysis, Federa ment, Moapa Tribal Polic ol District Police Departn alyzed, and distributed to verage technology and the telligence products for the the Fusion Watch progra	y, Department of Homelan tment, North Las Vegas Poal Bureau of Investigation, the Department, Southern Nonent. It is through these poour consumers. The criminate diverse data sets owners at the stakeholders and other cannot be attached the some consister at the critical items during an	olice Departmen RRG Privacy Or Nevada Health D artnerships with e and intelligence d by the particip customers of the ncy in program in	nt, Department of Hifficer, Las Vegas (District, US State District, US	Homeland City Marshals, Department, Dies that with produce
	on is for you to tell u		participating agency(s) a g the money for your pro Political Jurisdiction (City, County,	oject - If it's you		ncy]
12 (a)	Las Vegas Metropoli	tan Police Department	Clark County	Christop	oher Tomaino	
12(b)						
12 (c)						
		any continuing financial as never been historically	Obligation created by the Foundation or state of the Foundation of	Project, and prop	nosed funding solu	tion

Statewide

(SHSP)

Urban Area

(UASI)

PROJECT ID: DDD

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism Center - B

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
Salary for one FTE Fusion Watch Specialist for 18 months.			
	\$ 127,890.52		\$ 127,89
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTo
n.a			
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
Cellebrite Hardware for Phone Investigations	2. 3/10/		34010
	¢ 00 470 00		Ф 00 4 7 0
	\$ 80,170.00		\$ 80,170
15d) Training (S. dans et al. 15d)	LV-UASI	State-wide	SubTo
15d) Training [Development and delivery of training to perform assigned missions and tasks] n.a	LV-UASI	State-wide	30010
			\$ 0.00
	11/11/01	0	0.1.
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] n.a	LV-UASI	State-wide	SubTo
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTo
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTA

PROJECT ID: DDD Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism Center - B

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Hiring Process	01/01/20	02/28/20	2
3	Implement Training Programs, and Project Management	02/01/20	08/01/21	18
4				
5				
6				
7				
8				
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Yes, the Southern Nevada Counter Terrorism Center's primary purpose is to implement the National SAR initiative which is to combat terrorism within the United States.
x size	
visible text box	
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
to visi	Fusion centers are intelligence and information sharing at the core. We are currently seeking to build out the cybersecurity components within our center.
are limitied to	
"are l	
"b", and "c"	
b",	c. Can this project funding request be reduced? Is it scaleable? YES NO (Explain below.
"a"	No.
Fields	
-	

Vev	ada Homeland Security	y Grant Program (HSGP) UASI ONLY	PROJECT ID: DDD
Proj	ject Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted 4/25/19
PRO.	JECT TITLE REFERENCE:	Southern Nevada Counter Terrorism Center - B	
	d. Can this project continue w	ithout funding? YES NO (•) Explain below.	
"e" are limitied to visible text box size	The LVMPD requires the grants		
limiti			xplain below.
Fields "d" and "e" ar		ignated fusion center for the state of Nevada.	
8)	THIDA COMPLETION Places	indicate the participation level in completing the 2010	THEA Curvey CHOOSE ONE.
0)		e indicate the participation level in completing the 2018 T	<u> </u>
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) Survey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification Ri	isk Assessment (THIRA) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	l - Please indicate any additional project commentary yo	ou feel may be important. Field is
	none.		

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

	LINE ITEM DETAIL BUDGET												
	Agency Name	LVMPD					Joni Prucnal 702 828		DDC				
	IJ TITLE:	SNCTC Enhancment - B											
		One Budget Per Funding Stream											
		UASI											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Posttions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1		FTE Fusion Watch Specilaist - 18 months	New / Enhance / Past / Competitive		27.49967308	100%	3120	\$ 85,798.98	Fusion Center - SNCTC	Intelligence and Information Sharing		UASI	
2								•				1	
4								\$ -				+	
	Personnel Sub-Total							\$ 85,798.98					

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This is the 18 month anticipated salary for two Fusion Watch Specialists.

Line #	CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		FTE Fusion Watch Specilaist - 18 months	New / Enhance / Past / Competitive		13.49087821	100%	3,120.00			Intelligence and Information Sharing	UASI
6											
7								\$ -			
8				·				\$ -			
	Fringe Sub-Total							\$ 42,091.54			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

This is the 18 month anticipated salary for one Fusion Watch Specialists.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
14			1						-			
15												
16									-			
17									-			
18			İ						-			
19									-			
20									-			
21						·			-			
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
30							-				
31							-				
32							-				
33					_		-				
34							-				
35					_						
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		·				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Cellebrite Computer Hardware	New / Enhance / Past / Competitive		1.00	80,170.00	\$ 80,170.00	Fusion Center -	Intelligence and Information Sharing	04HW-01-INHW	UASI
41											
42											-
44											
45											
46											
47											
48				1					1		
49											
	EQUIPMENT Sub-Total						\$ 80,170.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59			·							\$ -	
60			·							\$ -	
61			·							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 208 060 52	/

Nevada Homeland S	vada Homeland Security Grant Program (HSGP) UASI ONLY										
Project Proposal for	r FFY19	HSGF	P Funding De	scription - Due 4/26/19	Date Submitted	4/26/19					
1) PROJECT TITLE:		Bomb	Squad Remote Op	erations							
2) PROPOSING/LEAD AG	Bomb Squad										
3) Project Manager Name/	me/Title: Richard Brooks										
Project Manager Contac	t Info:	Phone:	Phone: (702) 232-6417 Email: rbrooks@lasvegasnevada.gov								
4) Addl Project Manager Na	me/Title:	Steven	Poe								
Addl Project Manager Cont	act Info:	Phone:	(702) 303-0773	Email: sbpoe@lasvegasnevada.	gov						
5) Finance/Grant Contact Na	ame/Title:	Priscilla	a Wdowiak								
Finance/Grant Contact Info	:	Phone:	(702) 229-6045	Email: pwdowiak@lasvegasneva	ada.gov	_					

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Las Vegas Fire & Rescue Bomb Squad is the only Federal Bureau of Investigations (FBI) accredited Bomb Squad in Southern Nevada. The Las Vegas Fire & Rescue Bomb Squad supports Clark, Esmeralda, Lincoln and Nye Counties, Las Vegas Fire & Rescue also provides support for St George, UT Bullhead City, AZ and surrounding areas.

The goal of this project is to improve and expand the Las Vegas Bomb Squad by supporting the National Priority of: "Strengthening Chemical, Biological, Radiological/Nuclear and Explosive (CBRNE) Detection, Response, and Decontamination Capabilities".

The focus of this project and equipment is to prepare for and respond to hazardous device incidents. This equipment will allow the Bomb Technician to be at a safe location and at distance for the disposal or render safe of a device. This equipment would assist the Bomb Technicians by decreasing the mortality rate and increasing the survivability during hazardous device responses and unmanned aircraft system incidents.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: Las Vegas Bomb Squad [CBRN,E]

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COMMUNICATIONS [Mission Area - RESP]

Core Capability aligned with Maintained Project: OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This specialized equipment is not generally budgeted in capital or general funds. Its necessity is specific to meeting our region's needs due to the terror threat level for our community. Equipment will be maintained by Las Vegas Fire and Rescue until it has reached end of useful life in approximately 3-5 years. The proposed equipment is a tool that will enhance our squads safety. These remote firing devices will be used to defeat hazardous devices that are in hard to reach places or at long distances away. This provides physical protective measures by providing large safe zones and areas of exclusion. These will give the Bomb Technicians a safe working at distance while working a problem or while training.

Currently the Las Vegas Fire & Rescue Bomb Squad has old,out dated and broken remote firing devices. These devices would be utilized in multiple scenarios to include but not limited to training of our unit, demo days for outside agencies in the valley on Hazardous Devices, Homemade Explosives, for all agencies in the valley.

Pro			irity Oraliti	Program (HSGP) UASI ONLY		PROJECT ID:	EEE							
	ect Pı	roposal for FF\	/19 HSGP Fu	unding Description - Due 4/26	/19	Date Submitted	4/26/19							
PO.	JECT TI	TLE REFERENCE:	Bomb Squ	ad Remote Operations										
0)	PROCU	JREMENT - Indica	te the method	of procurement associated with this	s proje	ect:								
	Rec	quest for Proposal	Provide a brief	explanation on your method of procuremen	t - FIELD) IS LIMITED TO VISIE	BLE TEXT BOX:							
	O Solo			ment will require an RFP (Request for Pro										
	O Inte			t to ensure funds are used most effectively will proceed with the procurement proces		e there is a qualified	d bidder, the							
1)	PROJE	CT IMPLEMENTAT	ION - Describe	how, and by whom, the Proposed Projec	ct will b	<i>ne implemented.</i> De	scribe							
	in rough	order the process by which	th the project will be	accomplished, identifying who (i.e. staff, contracto	or, or ?) w	rill perform what work								
	Upon award and acceptance by City Council, project implementation will be conducted by Steven Poe, Richard Brooks and consist of procurement, training and delivering of the equipment to the Las Vegas Fire & Rescue Bomb Squad. Requested equipment will require an RFP (Request for Proposal). This process is time consuming, but a requirement to													
(T BOX		sted equipment will refunds are used mos		Request for Proposal). This process is tim	ne consi	uming, but a require	ement to							
FIELD IS LIMITED TO VISIBLE TEXT BOX	Once there is a qualified bidder, the Project Manager will proceed with the procurement process. Upon receipt, the Project Manager will ensure adequate training is conducted and equipment distributed to assigned units. Quarterly Financial and Progress reports will be submitted to Nevada Department of Emergency Management as required by													
D TO VIS	Quarterly Financial and Progress reports will be submitted to Nevada Department of Emergency Management as required by state grant assurances until the project has reached its conclusion.													
MITE														
IS FI														
FIELD														
2)				ntify the participating agency(s) and juri										
2)		n is for you to tell u	s WHO will be r	eceiving the money for your project - It	f it's yo	u, put in your agei	ncy]							
2)	section	n is for you to tell u	s WHO will be r (FD, PD, etc.)		f it's yo P		ncy]							
2)	section	n is for you to tell u Agency	s WHO will be r (FD, PD, etc.)	eceiving the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo P	u, put in your ager Project Representative (ncy]							
2)	section	n is for you to tell u Agency	s WHO will be r (FD, PD, etc.)	eceiving the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo P	u, put in your ager Project Representative (ncy]							
	section 12(a)	n is for you to tell u Agency	s WHO will be r (FD, PD, etc.)	eceiving the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo P	u, put in your ager Project Representative (ncy]							
	12(a) 12(b) 12(c)	n is for you to tell u Agency Las Vegas Fire & Re	s WHO will be r (FD, PD, etc.) escue	eceiving the money for your project - It Political Jurisdiction (City, County, State, etc.)	f it's yo P Richar	u, put in your agei Project Representative (d Brooks	ncy] individual)							
3)	12(a) 12(b) 12(c) SUSTA	AINMENT - Identify	s WHO will be r (FD, PD, etc.) escue any continuing fi acquisition of equ	Political Jurisdiction (City, County, State, etc.) City of Las Vegas Cinancial obligation created by the Project, uipment only, there are no ongoing sustai	Fit's yo P Richar and pro	project Representative (d Brooks project Representative (d Brooks	individual) tion after the							
3)	12(a) 12(b) 12(c) SUSTA	AINMENT - Identify this project is for the purchase. The ven will be used to cover	s WHO will be r (FD, PD, etc.) escue any continuing fi acquisition of equication of equication of equication of equication expenses for expenses fo	Political Jurisdiction (City, County, State, etc.) City of Las Vegas Chancial obligation created by the Project,	and pro	project Representative (d Brooks prosed funding solution expenses projected Vegas Fire & Rescrete Name (Project Representative (Project Repres	tion after the ue general							
3)	12(a) 12(b) 12(c) SUSTA	AINMENT - Identify this project is for the purchase. The ven will be used to cover	s WHO will be r (FD, PD, etc.) escue any continuing fi acquisition of equication of equication of equication of equication expenses for expenses fo	Political Jurisdiction (City, County, State, etc.) City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas	and pro	project Representative (d Brooks prosed funding solution expenses projected Vegas Fire & Rescrete Name (Project Representative (Project Repres	tion after the ue general							
3)	12(a) 12(b) 12(c) SUSTA	AINMENT - Identify this project is for the purchase. The ven will be used to cover	s WHO will be r (FD, PD, etc.) escue any continuing fi acquisition of equity of the continuing of the	Political Jurisdiction (City, County, State, etc.) City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas	and pro	project Representative (d Brooks prosed funding solution expenses projected Vegas Fire & Rescrete Name (Project Representative (Project Repres	tion after the ue general							
	12(a) 12(b) 12(c) SUSTA	AINMENT - Identify this project is for the purchase. The ven will be used to cover	s WHO will be r (FD, PD, etc.) escue any continuing fi acquisition of equity of the continuing of the	Political Jurisdiction (City, County, State, etc.) City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas City of Las Vegas	and pro	project Representative (d Brooks prosed funding solution expenses projected Vegas Fire & Rescrete Name (Project Representative (Project Repres	tion after the ue general							

0%

Statewide

(SHSP)

100%

Urban Area

(UASI)

2

PROJECT ID: EEE

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Bomb Squad Remote Operations

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTo
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTot
3 - Remote Firing Device Systems Remote Firing Device (RFD) is an intelligent and discrete 2-way controlled initiatic system, used on land as a primary firing mechanism to detonate explosive charge Safer to use than conventional electric initiation methods, the RFD has a versatilit and reliability unlike any other demolition initiation systems.	\$ 71,559.00		\$ 71,559
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTot
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTot
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTot \$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide State-wide	

PROJECT ID: EEE

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Bomb Squad Remote Operations

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Develop Specification	09/30/19	12/31/19	4
3	Request for Proposal	01/02/20	03/31/20	2
4	Procurement	04/01/20	06/01/20	2
5	Distribution of Units	06/01/20	08/01/20	2
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this pro	ject have a nexus to to	errorism? YES 💽	No 🔵	Explain below.

Remote Firing Device (RFD) is an intelligent and discrete 2-way controlled initiation system, used on land as a primary firing mechanism to detonate explosive charges. Allows CBRNE task forces to give distance to the known threats.

b. Does this project align with the FFY19 strategic capacities? YES NO (Explain below.

Operational Coordination cannot be effectively achieved when the threat is an unknown. By sustaining the Las Vegas Fire and Rescue Department's capability to identify and defeat Hazardous devices, the unknown become known and Unified Command is armed with the information necessary to make critical life and death decisions.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Although this project cannot officially go to bid until funding is assigned, the price is set for this unit unless 100 or more is purchased. The Project Manager is committed to leveraging the best pricing and can request reductions in the amount of units requested. The quantity of (6) each is the amount of units for deployment of (3) fully and properly equipped bomb squad teams.

ada Homeland Securit	ty Grant Program (HSGP) UASI ONLY	PROJECT ID:	EEE
ect Proposal for FFY19	9 HSGP Funding Description - Due 4/26,	Date Submitted	4/26/1
ECT TITLE REFERENCE:	Bomb Squad Remote Operations		
d. Can this project continue v	without funding? YES NO NO Explain below.		
This project will only move forw (UASI).	vard if it has the support and funding from the Nevada H	omeland Security Grant F	Program
e. Does this project provide a	a MEASUREABLE statewide benefit? YES NO	Explain below.	
Investigations, and its commun Nevada in the event of an unmassailants and chemical, biologoperation. The project is chara	deavor undertaken by the Las Vegas Fire & Rescue Bon hity partners to create a unique asset that would provide lanned aircraft system hazardous device deployment, in gical, radiological nuclear devices (CBRNE). This project acterized by well-defined parameters, specific objectives d an established budget with a specified source of fundi	Teams to respond simultaneously to calls for service and Hazard Identification Risk Assessment (THIRA) Sut and Hazard Identification Risk Assessment (THIRA)	of souther with active a routine
THIRA COMPLETION - Pleas	se indicate the participation level in completing the 20	018 THIRA Survey. CHOO	SE ONE:
YES - Agency HAS parti	icipated in the 2018 Threat and Hazard Identification R	isk Assessment (THIRA) S	urvey
NO - Agency has NOT μ	participated in the 2018 Threat and Hazard Identificati	on Risk Assessment (THIR	A) Survey
ADDITIONAL COMMENTAR limited to the visible text box	RY - Please indicate any additional project commenta	ry you feel may be impol	rtant. Field
teams would consist of person community partners allowing the	or (3) specialized Bomb Squad Teams to respond simultainel from Las Vegas Fire & Rescue Bomb Squad, Feder the teams to respond to prevent initial or follow-up on ter b Squad to conduct counter-terrorism operations in up to	al Bureau of Investigation rorist attacks. This equipr	s and its
	equested is for use by the Las Vegas Fire & Rescue Borre & Rescue. This is a vital piece of equipment that is n		

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	LINE ITEM DETAIL BODDET											
	Agency Name	Las Vegas Fire & Rescue Bomb Squad	Project Manager Name & Contact #			Grant Manager Name & Contact #	Priscilla Wdowiak 702-229-6045					EEE
	IJ TITLE:	Bomb Squad Remote Operations										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
Pe	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ -				
3								\$ -				
4								\$ -				
I Pe	ersonnel Sub-Total							\$ -				

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY		Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
Ę								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED AND DETAIL THE POSITIONS AND DELIVERABLES.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18	Travel Oak Tatal								-			
	Travel Sub-Total	DR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	ı			
28						-				
29							ı			
30										
31							ı			
32							ı			
33							-			
34							ı			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36			·		-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
	Remote Operation Firing Device	discrete 2-way controlled initiation system, used on land as a primary firing mechanism to detonate explosive charges. Safer to use than conventional electric initiation	New / Enhance / Past / Competitive					CBRNE - Las		02EX-02-TLPB	
40		methods, the RFD has a versatility and reliability unlike any other demolition initiation systems.		UASI	3.00	23.853.00	\$ 71.559.00	Vegas Bomb	Operational	Tools, Bomb	UASI
41		drinke any other demontor initiation systems.		OAGI	3.00	20,000.00	\$ -	oquau	Coordination	Disability	OAOI
42							\$ -				
43							\$ -				·
44							\$ -				
45				-			\$ - \$ -		-		
46 47							\$ -				
48							\$ -				
49				1			\$ -		1		
	EQUIPMENT Sub-Total						\$ 71,559.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your proj	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54			·			·					\$ -	
55			·			·					\$ -	
56			·			·					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pro	curement / See 2nd tab to determine whether									
57	your proj	ect requires EHP Screening									
58										\$ -	
59										\$ -	
60			·							\$ -	
61			•							\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

						Budget Total		
		4				Request	\$ 71.559.00	

Nevada Homeland Security	Nevada Homeland Security Grant Program (HSGP) UASI ONLY							
Project Proposal for FFY19	Date Submitted	4/25/19						
1) PROJECT TITLE: Clark County Rural Fire Stations Repeaters Project								
2) PROPOSING/LEAD AGENCY:	2) PROPOSING/LEAD AGENCY: Clark County Fire Department							
3) Project Manager Name/Title:	Larry Haydu, Assistant F	ire Chief						
Project Manager Contact Info:	Phone: (702) 455-7757	Email: LHaydu@ClarkCountyNv.	gov					
4) Addl Project Manager Name/Title:								
Addl Project Manager Contact Info:	Phone:	Email:						
5) Finance/Grant Contact Name/Title:	Karen Taylor							
Finance/Grant Contact Info:	Phone: (702) 455-6183	Email: Karent@ClarkCountyNv.g	gov					
6) CLASSIFICATION - Check the p	CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:							
Project is NEW [No grant-funded projects have recently addressed this capability within the past five years: OR								

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; **OF WHAT CORE CAPABILITY (or CAPABILITIES** [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; **FOR WHO** (identify the direct users/beneficiaries of the capability); and **WHERE** (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. **FIELD IS LIMITED TO VISIBLE TEXT BOX.**

the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

The goal of this request is to sustain and expand the fire department VHF radio communications system in Southern Nevada. The VHF radio system is a critical component to the daily fire department operations for both the Clark County Fire Department (CCFD) Rural Division as well as the CCFD Urban Division. The VHF radio system provides radio coverage in many of the areas that are not serviced by the larger Southern Nevada Area Communications (SNAC) system. The VHF radio system allows direct integration and interoperability with our Federal fire and law enforcement partners in the rural areas of the County. As most CCFD apparatus are equipped with VHF radios the system provides additional capabilities should the SNAC system fail or become overloaded during a catastrophic event. The current VHF radio system is comprised of 14 mountain top repeaters that provide coverage to 7000 square miles of Clark County. Currently 1 of the 14 repeaters is out of service and there are no spare repeater to allow the defective repeater to be changed out for repair. This causes dangerous down time while the repeater is removed, repaired and replaced. In addition, In 2017 the CCFD established a new Rural Fire Station in the Trout Canyon area of the county. Currently Trout Canyon cannot be serviced by any of the current repeater sites. The CCFD through its "Cooperators Agreement" with the U.S. Forrest Service will be able to establish a 15th repeater site using the Forest Service site on Mt. Charleston to provide radio coverage to the western edge of the county including portions of Nye County. This new site would require a third, Solar powered repeater to become operative.

8) PROPOSED STRATEGIC CAPACITY - *Identify by name the proposed strategic capacity, project type, and associated core capability.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/ / https://fema.gov/core-capabilities/ / https://fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:	OPERATIONAL COMMUNICATION
HSGP Project Type Supporting Strategic Capacity:	OTHER
If OTHER, please choose FFY16-18 NCHS Priority:	OPERATIONAL COMMUNICATIONS [Mission Area - RESP]
Core Capability aligned with Maintained Project:	Please choose the core capability that aligns with your MAINTAINED project

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request would meet two Strategic Capacities; Operational Coordination and Communication Coordination/Operations. While the system is currently in operation, there are no funds available to replace, repair or upgrade the current system. Failure of the system would have an immediate impact on emergency operations in the rural areas of the County. A loss of the VHF radio system would impact automatic and mutual aid responses with not only our Federal partner agencies, but other county and municipal agencies that utilize the system through our agreements. Failure of the VHF radio system could have a catastrophic impact on emergency operations in the Urban area should the primary SNAC system fail during a major event in Southern Nevada. The current VHF radio system is a critical asset in the coordination of emergency operations between the CCFD, Federal, State and local government agencies.

		_	ogram (HSGP) UASI		PROJECT ID:	FFF
	•		nding Description - D	ue 4/26/19	Date Submitted	4/25/19
OJECT T	ITLE REFERENCE:	Clark County	Rural Fire Stations Repeate	rs Project		
PROC	UREMENT - <i>Indica</i>	te the method of	f procurement associated	with this proj	ect:	
Reconstruction Reco	quest for Proposal	Provide a brief ex	planation on your method of p	rocurement - FIEL	D IS LIMITED TO VISIB	SLE TEXT BOX
O Sol			follow the guidelines of Clar	k County Purcha	sing getting quotes f	or all
O Int	ernal	purchases related t	to this project.			
			ow, and by whom, the Propo complished, identifying who (i.e. sta	-	•	scribe
Chief I	Haydu will oversee th	ne replacement, rep	pair, or upgrade of the repeate	ers for the rural fi	re stations.	
SUB-G sectio	n is for you to tell u	us WHO will be rec (FD, PD, etc.)	fy the participating agency(seiving the money for your period of the participating agency(seiving the money for your period of the participation (City, County)	nty, State, etc.)	on(s) proposed for at ou, put in your ager Project Representative (Haydy	ncy]
(a)						•
ŀ						,
12 (b)						
-						· · ·
12 (b) 12 (c)						
12 (c)	AINMENT - Identify	any continuina fina	nncial obligation created by th	ne Proiect. and pi	roposed fundina solui	
12(c) SUSTA		sustainment, howev	encial obligation created by the er if additional repeaters fail as expense.			tion

(SHSP)

(UASI)

PROJECT ID: FFF
Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Clark County Rural Fire Stations Repeaters Project

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTot
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTot
Solar Powered Repeater -One \$15,000 Repeater-two @ 7500.00 each totaling \$15,000	\$ 30,000.00		\$ 30,000
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTot
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTot
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTA

PROJECT ID: FFF

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Clark County Rural Fire Stations Repeaters Project

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Purchasing Process with Clark County Purchasing	10/01/19	01/01/20	4
3	Project installation of repeators	02/01/20	06/30/20	5
4	Invoicing Process	07/01/20	08/30/20	2
5	Grant Closeout	09/30/20	10/31/20	2
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project have a nexus to terrorism? YES	6) NO (Fxplain below.

Sustainment of the CCFD VHF Radio system is critical in providing a backup system to the primary SNAC radio system. Failure of the SNAC system during a critical event, including a terrorist event without having the VHF radio system to fall back on would leave responding units unable to communicate vital information. In addition, during a major event in an urban area many mutual aid units for Federal, State and local agencies are equipped with VHF radios.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This request would meet two Strategic Capacities; Operational Coordination and Communication Coordination/Operations. While the system is currently in operation, there are no funds available to replace, repair or upgrade the current system. Failure of the system would have an immediate impact on emergency operations in the rural areas of the County. A loss of the VHF radio system would impact automatic and mutual aid responses with not only our Federal partner agencies, but other county and municipal agencies that utilize the system through our agreements. Failure of the VHF radio system could have a catastrophic impact on emergency operations in the Urban area should the primary SNAC system fail during a major event in Southern Nevada. The current VHF radio system is a critical asset in the coordination of emergency operations between the CCFD, Federal, State and local government agencies.

c. Can this project funding request be reduced? Is it scaleable? YES
NO Explain below.

Partial funding would be acceptable, it would eliminate the ability to purchase all of the required communications equipment and could limit the sustainment of the radio system.

Veva	ada Homeland Security	y Grant Program (HSGP) UASI ONLY	PROJECT ID:	FFF
Proj	ect Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted	4/25/19
'ROJ	ECT TITLE REFERENCE:	Clark County Rural Fire Stations Repeaters Project		
	d. Can this project continue w			
are limitied to visible text box size	No, this is not budgeted expense	e		
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO	Explain below.	
''e"	coverage to Clark County and pocounty in Arizona. The current	rovides multi-jurisdictional radio coverage across Southerrortions of Nye,Lincoln counties, as well as San Bernarding CCFD VHF radio system allows all units on the system to d State wide fire coordination frequencies.	County in California a	and Mojave
8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018	THIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partic	ipated in the 2018 Threat and Hazard Identification Risk	Assessment (THIRA) S	urvey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification	Risk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	Y - Please indicate any additional project commentary y	ou feel may be impoi	rtant. Field is
	N/A			

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					ILM DETAIL							
	Agency Name	Clark County Fire Department	Project Manager Name & Contact #	Larry Haydı	ı	Grant Manager Name & Contact #	Karen Taylor					FFF
	IJ TITLE:	Fire Station Repeater Project										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ -				
3								\$ -				
4	Personnel Sub-Total							\$ -				
		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	ELIVEDADI EC. I	IADDATIVE WILL	DE LIGED TO ENGLIDE ITEMS LIG	TED WILL DE CON	S -	CDANT CYCLE	ITEMS MAY NOT	DE BURGUACER OF	ITCIDE TUE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE (ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lir	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
			Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			-
19									-			
20 21									-			
22									-			-
23									-			-
23									-			-
	Travel Sub-Total								-			
		REACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA	All EACH LINE ITEM AND DELIV	EDADLES NAD	DATIVE WILL DE L	CED TO ENGLIDE ITEMS LIGHES	WILL DE COMPLE	TED IN THE OR	ANT OVOLE ITE	MC MAY NOT DE	DUDCHACED OUTC	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$			
37			·			, and the second	\$ -			
38			•		-		\$ -			
39							\$ -			
	Organization Sub-Total		•				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40		Solar Powered Repeator	New / Enhance / Past / Competitive		1.00	15,000.00	\$ 15,000.00		Operational Communications	06CP-01-REPT Repeaters	UASI
41		Repeator	New / Enhance / Past / Competitive		2.00	7,500.00	\$ 15,000.00		Operational Communications	06CP-01-REPT Repeaters	UASI
42							\$ -				
43							\$ - \$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 30,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Clark County will purchase one solar powered repeator to install at Trout Canyon, and the 2 additional repeators for repairs to current network.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55			·								\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total			
					Request	\$ 30,	,000.00	

Nevada Homeland Security	y Grant Program (I	HSGP) UASI ONLY	PROJECT ID:	GGG
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	4/26/19
1) PROJECT TITLE:	Las Vegas Fire Special C	perations Communications		
2) PROPOSING/LEAD AGENCY:	Las Vegas Fire Rescue			
3) Project Manager Name/Title:	Karl Rosette			
Project Manager Contact Info:	Phone: (702) 271-0480	Email: krosette@lasvegasnevada	a.gov	
4) Addl Project Manager Name/Title:	Craig Cooper			
Addl Project Manager Contact Info:	Phone: (702) 236-9597	Email: ccooper@lasvegasnevada	a.gov	
5) Finance/Grant Contact Name/Title:	Priscilla Wdowiak			
Finance/Grant Contact Info:	Phone: (702) 229-6045	Email: pwdowiak@lasvegasneva	ida.gov	
4) CLACCIFICATION OF A Life of			•	Chaosa ana:

CLASSIFICATION - Check the primary intention of the Proposed Project: 6)

Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal of this project is to improve communications for Las Vegas Fire and Rescue personnel including CBRNE and Bomb Squad. This goal will be accomplished by purchasing 65 noise canceling earphone and microphone accessories for SNACC radios in use by the agency.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COMMUNICATIONS [Mission Area - RESP]

Core Capability aligned with Maintained Project: Please choose the core capability that aligns with your MAINTAINED project

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Currently communications units utilized by Las Vegas Fire Rescue CBRNE/HazMat and Bomb personnel do not have noise canceling ability. This hampers communication and causes longer responses due to needing face to face communications. These units would be utilized in a task force setting for special events such as EDC, Life is Beautiful and New Year's Eve screening and support events. These events have extremely high background noise levels causing communication challenges. These operational communication challenges interfere with operational coordination and information sharing.

In incident response these units can be utilized in austere environments for communications. This includes low dexterity environments such as when using chemical protective clothing, operating in confined spaces or other restrictive personal protective equipment.

	nomeiana sect	arity Gran	nt Program (HSGP) UASI ONLY	PROJECT ID:	GGG
oject F	Proposal for FF	Y19 HSGF	P Funding Description - Due 4/26	Date Submitted	4/26/19
OJECT 1	TITLE REFERENCE:	Las Ve	egas Fire Special Operations Communication	S	
PROC	CUREMENT - Indica	te the meth	nod of procurement associated with thi	s project:	
⊙ Re	equest for Proposal	Provide a b	rief explanation on your method of procuremer	nt - FIELD IS LIMITED TO VISII	BLE TEXT BOX:
O Sc	le Source	Specification	will be developed. Request for proposal will	be posted by City of Las V	egas
O In	ternal	Purchasing.	Units will be procured following established p	processes.	
PROJ	י ECT IMPLEMENTA	ΓΙΟΝ - <i>Descr</i>	ibe how, and by whom, the Proposed Proje	ct will be implemented. De	escribe
in rough	n order the process by whi	ch the project w	ill be accomplished, identifying who (i.e. staff, contracto	or, or ?) will perform what work	
	nasing to use complian		nethods in request for proposal. The units will use.	ll be procured by City of La	s Vegas
	on is for you to tell u	(FD, PD, etc.)	Identify the participating agency(s) and juri be receiving the money for your project - I Political Jurisdiction (City, County, State, etc.) City of Las Vegas		ncy]
12 (b)					
12 (b) 12 (c)					
12 (c)	AINMENT - Identify	any continui	ng financial obligation created by the Project	and proposed funding solu	rtion
12(c) SUST		rchase. Unit	ng financial obligation created by the Project, maintenance over the life of the unit is the on Las Vegas.		

(SHSP)

(UASI)

PROJECT ID: GGG

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Las Vegas Fire Special Operations Communications

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubT
			\$ 0.
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubT
			\$ 0.
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubT
65 Noise canceling ear piece microphone units compatible with Motorola APX radios to maintain platform consistency with SNACC.	\$ 53,000.00		\$ 53,00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubT
			\$ 0.0
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubT
			\$ 0.
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubT
			\$ 0.0
	LV-UASI	State-wide	TOT
15g) PROJECT TOTALS		\$ 0.00	\$ 53,00

PROJECT ID: GGG

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

Las Vegas Fire Special Operations Communications

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Develop Specification	09/30/19	12/31/19	4
3	Request for Proposal	01/02/20	03/31/20	2
4	Procurement	04/01/20	06/01/20	2
5	Distribution of Units	06/01/20	08/01/20	2
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this proje	ect have a nexus t	to terrorism?	YES 💿	No 🔵	Explain below.

These units will allow for more efficient communications at screening and mitigation events. These units will also aid communications in chaotic environments in the event of an attack. Specified units will enhance the responders ability to communicate more effectively while having reduced dexterity in required personal protective equipment.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Las Vegas Fire and Rescue CBRNE is not a named strategic capacity at the State level. By MOU Las Vegas Fire Rescue CBRNE/HazMat is a named partner with LVMPD Armor. A portion of these units will also be made available to the Las Vegas Fire Rescue Bomb Squad.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

This project is scalable by the number of units purchased.

Nev	ada l	Homeland	Security	y Grant F	Program ((HSGP) UASI	ONLY	PROJECT ID:	GGG
Proj	ect F	Proposal f	or FFY19	HSGP Fu	unding Do	escription - i	Due 4/26/19	Date Submitted	4/26/19
PROJ	ECT 1	TITLE REFER	ENCE:	Las Vegas	Fire Special	Operations Com	munications		
	d.	Can this proje	ct continue w	ithout fundin	g? YES	NO (Explain b	elow.		
Fields "d" and "e" are limitied to visible text box size	Curre	ntly the City o	f Las Vegas	does not hav	ve money allo	oted for a project	of this magnitude		
mitie	e.	Does this proje	ect provide a	MEASUREAB	LE statewide l	penefit?	res 🔘 No 💿 Ex	plain below.	
Fields "d" and "e" are l	unit ra		utside the So	uthern Neva				E response is a regior s Bomb Squad will be	
18)	THIR	A COMPLETI	ON - Please	e indicate th	e participati	on level in comp	leting the 2018 T	HIRA Survey. CHOO	SE ONE:
		YES - Agenc	y HAS partic	ipated in the	e 2018 Threa	t and Hazard Ide	ntification Risk As	ssessment (THIRA) St	urvey
		NO - Agency	ı has NOT pa	articipated ii	n the 2018 TI	hreat and Hazard	Identification Ris	sk Assessment (THIR)	A) Survey
19)		ITIONAL CONed to the visib		Y - Please in	dicate any a	ndditional project	t commentary yo	u feel may be impor	tant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

LINE ITEM DETAIL BODGET													
		Las Vegas Fire Rescue 500 North Casino Center Las Vegas NV 89101	Project Manager Name & Contact #			Grant Manager Name & Contact #	Priscilla Wdowiak- 702-229-6045					GGG	
	IJ TITLE:	TITLE: Special Operations Communications											
		One Budget Per Funding Stream											
		UASI											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -					
2								\$ -					
3							1	\$ -					
-	Personnel Sub-Total							\$ -					
PERSON		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN I	DETAIL THE POSITIONS AND D	ELIVEDABLES N	ADDATIVE WILL	DE LISED TO ENGLIDE ITEMS LIS	TED WILL BE COM	DI ETED IN THE	PANT CYCLE - I	TEMS MAY NOT	DE DIIDCUASED OUT	CIDE THE ITEMS LISTED	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Cost	Strategic	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

S

S

WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line#	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPELIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12 13									-			
13									-			
15									-			
16									_			
17									_			
18									-			
19									-			
20									-			
21									-			
22									-			
23			<u> </u>						-			
24									-			
	Travel Sub-Total	OR EACH LINE ITEM AROVE. BLEASE EVELAINE IN DETA							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34			·				-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			·		-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		Noise cancelling earphone/microphone with low dexterity PTT for use with SNACC radios.	New / Enhance / Past / Competitive	General Fund	65.00	800.00	\$ 52.000.00		Communication	06CP-03-PRAC Accessories, Portable Radio	UASI
41		Bid Posting	New / Enhance / Past / Competitive	General Fund	1.00	200.00	\$ 200.00				
42		Shipping	New / Enhance / Past / Competitive	General Fund	1.00	800.00	\$ 800.00				
43							\$ - \$ -				
45							\$ -				
46 47							\$ - \$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 53,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Item 1: The goal of this purchase is to improve communication for Las Vegas Fire and Rescue Special Operations to include CBRNE, HazMat, and Arson / Bomb Squad. The units will provide for the ability to communicate in austere environments with high backgeound noises. The devices will also have low dexterity push to talk (PTT) features for operation of the units in PPE as required. Current units do not provide hearing protection or noise cancellation renedering them ineffective in loud environments and inside of PPE with respirator noise.

Line #	: CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIREST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57		curement / See 2nd tab to determine whether ject requires EHP Screening										
58											\$ -	
59			•								\$ -	
60											\$ -	
61			•								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIREST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

		Budget Total
		Request \$ 53,000.00

Nevada Homeland Security	evada Homeland Security Grant Program (HSGP) UASI ONLY										
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	5/9/19							
1) PROJECT TITLE:											
2) PROPOSING/LEAD AGENCY:	University Police Service	Iniversity Police Services, Southern Command									
3) Project Manager Name/Title:	Adam Garcia, Associate Vice President & Director										
Project Manager Contact Info:	Phone: (702) 895-2634	Email: adam.garcia@unlv.edu									
4) Addl Project Manager Name/Title:	Ryan Doyle, Director of 1	echnology									
Addl Project Manager Contact Info:	Phone: (702) 774-4122	Email: ryan.doyle@unlv.edu									
5) Finance/Grant Contact Name/Title:	Ariana Renick, Publications Writer										
Finance/Grant Contact Info:	Phone: (702) 895-5792 Email: ariana.renick@unlv.edu										

6) CLASSIFICATION - Check the primary intention of the Proposed Project:

Choose one:

0

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will **MAINTAIN** AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects ore competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe <u>HOW MUCH</u> [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; <u>OF WHAT CORE CAPABILITY (or CAPABILITIES</u> [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; <u>FOR WHO</u> (identify the direct users/beneficiaries of the capability); and <u>WHERE</u> (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. <u>FIELD IS LIMITED TO VISIBLE TEXT BOX</u>.

With primary campuses and major infrastructure throughout Southern Nevada, including the University of Nevada Las Vegas, College of Southern Nevada, and Nevada State College, the department relies on the ability to effectively communicate with other agencies in times of crisis and in support of other agencies throughout the region. Equipping both Divisions of the Southern Command with the same public safety grade communications equipment would support our mission of consolidating agencies to create a unified patrol and ensure interoperable communications with other regional public safety partners, including the City of Henderson Police and Fire Departments (COHPD/COHFD), City of Las Vegas Fire Department (LVFD), Clark County Fire Department (CCFD), Las Vegas Metropolitan Police Department (LVMPD), North Las Vegas Police and Fire Departments (NLVPD/NLVFD), and Clark County School District Police Department (CCSDPD). Additionally, the newer Motorola units would provide several additional benefits including a top LCD display to allow for officers to quickly view current talk group and other messages; talkgroup announcement; increased resistance to dust, impacts, and water submersion; and compatibility for future enhancements, including Over-the-air Rekeying (OTAR), and encrypted voice and data communications. The additional P25 Phase II-capable radio hardware will provide significant benefits, including: (1) continued and sustainable mission-critical voice communication for first responders; (2) increased in-building radio reception resulting in timely communication and decision-making; and (3) increased situational awareness through direct and indirect interoperable communications with regional public safety agencies.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities/https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*: HSGP Project Type Supporting Strategic Capacity: If this project does NOT align with a FFY19 strategic capacity, please choose OTHER If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COMMUNICATIONS [Mission Area - RESP] Core Capability aligned with Maintained Project: OPERATIONAL COMMUNICATIONS [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program guidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project aligns with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

University Police Services and UNLV's Office of Emergency Management's common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campus, keeping UNLV students and staff, campus visitors and event attendees, and surrounding community secure and safe. The additional P25 Phase II-capable radio hardware will provide significant benefits, including: (1) continued and sustainable mission-critical voice communication for first responders; (2) increased in-building radio reception resulting in timely communication and decision-making; and (3) increased situational awareness through direct and indirect interoperable communications with regional public safety agencies which include City of Henderson Police and Fire Departments (COHPD/COHFD), City of Las Vegas Fire Department (LVFD), Clark County Fire Department (CCFD), Las Vegas Metropolitan Police Department (LVMPD), North Las Vegas Police and Fire Departments (NLVPD/NLVFD), and Clark County School District Police Department (CCSDPD).

			Program (HSGP)			ROJECT ID:	HHH
ject P	roposal for FF	Y19 HSGP F	unding Descript	ion - Due 4/20	6/19 D	ate Submitted	5/9/19
JECT T	ITLE REFERENCE:	University	Police Services - Inter	operable Commur	nication E	nhancements	
PROC	UREMENT - Indica	te the method	d of procurement ass	ociated with th	is projec	t:	
O Re	quest for Proposal	Provide a briej	f explanation on your me	thod of procureme	ent - FIELD	IS LIMITED TO VISI	BLE TEXT BO
O Sol			e Services has identified		or purchas	e that best suits the	ne needs for
O Int	ernal	the consolidatio	n of the Southern Comr	nand.			
PROJE	ECT IMPLEMENTAT	ION - Describe	how, and by whom, t	he Proposed Proje	ect will be	implemented. De	escribe
in rough	order the process by which	ch the project will b	e accomplished, identifying v	who (i.e. staff, contrac	tor, or ?) wil	perform what work	
Unive	rsity Police Services	will perform the	following implementation	on steps:			
- Distr - Seler - Orde - Rece - Sout - Upda - Distr	duct final needs asse ribute Request for Pro ct Vendor er Subscriber Units eive Subscriber Units thern Nevada Area Co ate mutual-aid agreer ribute subscriber equi ular testing and maint	oposal ommunications ments with partn pment.	Council program subsc ler agencies	riber units			
	on is for you to tell u	s WHO will be	entify the participating receiving the money to Political Jurisdict	for your project -	If it's you	, put in your age	ncy]
	on is for you to tell u	(FD, PD, etc.)	receiving the money	for your project - cion (City, County, State, etc.	If it's you		ncy] (individual)
section	on is for you to tell u	(FD, PD, etc.)	receiving the money i	for your project - cion (City, County, State, etc.	If it's you	, put in your age oject Representative	ncy] (individual)
12(a) 12(b)	on is for you to tell u	(FD, PD, etc.)	receiving the money i	for your project - cion (City, County, State, etc.	If it's you	, put in your age oject Representative	ncy] (individual)
12(a) 12(b) 12(c) SUSTA	AINMENT - Identify	IS WHO will be (FD, PD, etc.) rvices any continuing	receiving the money i	for your project - ion (City, County, State, etc. SC, UNLV atted by the Project	If it's you Pr Adam (posed funding solu	ency] (individual) ector

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: HHH

Date Submitted 5/9/19

PROJECT TITLE REFERENCE:

University Police Services - Interoperable Communication Enhancements

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
(10) APX6000 portable units and related components.	\$ 59,000.00		\$ 59,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmotic capability]	LV-UASI	State-wide	SubTota
			\$ 0.00
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: HHH

Date Submitted 5/9/19

PROJECT TITLE REFERENCE:

University Police Services - Interoperable Communication Enhancements

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

	LIMITED TO TEXT BOX SIZE	From	То	Duration	
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)	
1	Receive Funding	N/A	N/A	N/A	
2	Final needs assessment.	07/01/19	07/15/19	1	
3	Distribute request for proposal and select vendor.	07/15/19	08/05/19	1	
4	Order and receive subscriber units.	08/05/19	11/04/19	3	
5	Southern Nevada Area Communications Council program the subscriber units.	11/04/19	11/18/19	1	
6	Test subscriber equipment.	11/18/19	12/02/19	1	
7	Update mutual-aid agreements with partner agencies.	08/05/19	10/07/19	2	
8	Distribute subscriber equipment.	12/02/19	12/13/19	1	
9					
10					
11					
12					

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

The new equipment will ensure all Divisions within the Southern Command are able to communicate with our regional public safety partners such as City of Henderson Police and Fire Departments (COHPD/COHFD), City of Las Vegas Fire Department (LVFD), Clark County Fire Department (CCFD), Las Vegas Metropolitan Police Department (LVMPD), North Las Vegas Police and Fire Departments (NLVPD/NLVFD), and Clark County School District Police Department during all hazards emergency response operations (including counter-terrorism). Additional features such as Over-the-air Rekeying (OTAR) and encrypted voice and data communications, will ensure interoperable communications with Las Vegas Metropolitan Police Department (LVMPD) who now require encryption for all of their radio communications after the 1 October incident.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

University Police Services' common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campuses, keeping all students and staff, campus visitors and event attendees, and surrounding community secure and safe. Equipping both Divisions of the Southern Command with the same public safety grade communications equipment would align with and support the identified strategic capacity of operation communications including: (1) continued and sustainable mission-critical voice communication for first responders; (2) increased in-building radio reception resulting in timely communication and decision-making; and (3) increased situational awareness through direct and indirect interoperable communications with regional public safety agencies.

C. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The number of radios cannot be reduced as that would be contrary to the overall goal of providing interoperable communications to all officers under the Southern Command. With primary campuses and major infrastructure throughout Southern Nevada, including the University of Nevada Las Vegas, College of Southern Nevada, and Nevada State College, the department relies on the ability to effectively communicate with other agencies in times of crisis and in support of other agencies throughout the region. Given our large jurisdiction, there is a high probability we will have a need to communicate with several regional public safety partners during large special events, responding to incidents within our jurisdiction, and in support of regional emergencies.

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: HHH

Date Submitted 5/9/19

PROJECT TITLE REFERENCE:

and "e" are limitied to visible text box size

University Police Services - Interoperable Communication Enhancements

d. Can this project continue without funding? YES NO Explain below.

This project is dependent upon HSGP funding. Having recently procured P25 Phase II capable equipment for the department's Emergency Communications Center, Emergency Management and the Central Division at a cost of over \$1.2 million, the department currently lacks the resources to provide P25 Phase II compatible hardware for the department's Regional Division that ensures interoperable communications with federal, state, and local response agencies.

e. Does this project provide a MEASUREABLE statewide benefit?

YES NO Explain below.

Within our current responsibility of being the primary law enforcement and public safety agency for our jurisdiction, we facilitate communications between internal and external agencies, including the City of Henderson Police and Fire Departments (COHPD/COHFD), City of Las Vegas Fire Department (LVFD), Clark County Fire Department (CCFD), Las Vegas Metropolitan Police Department (LVMPD), North Las Vegas Police and Fire Departments (NLVPD/NLVFD), and Clark County School District Police Department (CCSDPD). Current facilities and properties throughout the region are commonly utilized for large special events, in support of regional emergencies, and often contain or are adjacent to critical infrastructure. University Police Services wold have utilize this equipment in support of all hazard planning, regional training, and response to emergencies and disasters.

- 18) THIRA COMPLETION Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:
 - YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
 - NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- 19) ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

Having recently procured P25 Phase II capable equipment for the department's Emergency Communications Center, Emergency Management and the Central Division at a cost of over \$1.2 million, the department currently lacks the resources to provide P25 Phase II compatible hardware for the department's Regional Division that ensures interoperable communications with federal, state, and local response agencies. HSGP funding will cover the cost of (10) Motorola APX 6000 portable radios for all officers on shift within the Southern Command. Equipping both Divisions of the Southern Command with the same public safety grade communications equipment would support our mission of consolidating agencies to create a unified patrol and ensure interoperable communications with other regional public safety partners, including City of Henderson Police and Fire Departments (COHPD/COHFD), City of Las Vegas Fire Department (LVFD), Clark County Fire Department (CCFD), Las Vegas Metropolitan Police Department (LVMPD), North Las Vegas Police and Fire Departments (NLVPD/NLVFD), and Clark County School District Police Department (CCSDPD).

All requested P25 Phase II capable equipment and be compatible with all state and regional public safety radio systems, including the LVMPD, SNACC, and future NSRS systems. Additionally, all equipment will be authorized according to the FEMA Equipment List, with appropriate TDMA, Over-the-air Rekeying (OTAR), and encrypted voice and data communications features. Lastly, the additional equipment would provide several benefits including: (1) continued and sustainable mission-critical voice communication for first responders; (2) increased in-building radio reception resulting in timely communication and decision-making; (3) increased situational awareness through direct and indirect interoperable communications with regional public safety agencies; (4) and increased operational efficiency with the department's limited human and fiscal resources.

University Police Services is responsible for the safety and security of numerous high profile events that require interoperable communications, coordination, and assistance from other regional public safety partners. The (10) Motorola APX 6000 portable radios will ensure University Police Services personnel remain deployable to assist other public safety agencies and guarantee we will have the appropriate interoperable communications to do so.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

LINE II EM DETAIL BODGET												
	Agency Name	University Police Services, Southern Cor		Adam Garci 2634	*	Grant Manager Name & Contact #	Ariana Renio	riana Renick, 702-895-5792				
	IJ TITLE:	University Police Services - Interoperab	le Communication Enl	nancements								
		One Budget Per Funding Stream										
		UASI										
Line #		PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous	Salary or	% of Effort	Calculation	Personnel	Approved	Core		Requested
	Personnel	Positions Require: How Many, Type, Max Amount of										<u> </u>
1								\$ -				
2								\$ -				
3		·						\$ -				
4								\$ -				
	Personnel Sub-Total							\$ -				
DEDCOM	IEL COCT NADDATIVE DECUIDED	FOR EACH LINE ITEM ABOVE BLEASE EVELAINE IN	DETAIL THE DOCITIONS AND D	SEL IVED A DI EC	NADDATIVE WILL	DE LICED TO ENGLIDE ITEMO LI	CTED WILL DE COL	ADI ETED IN THE	ODANIT OVOLE	ITEMS MAY NOT	DE BUDGUACED OF	ITCIDE THE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #		FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous	Salarv	% of Effort	Calculation	Personnel	Approved	Core	Requested
	Fringe Benefits	Positions Require: Fringe to be separate from									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line#	CATEGORY	PURPOSE OF EACH TRAVEL.	Select Purchase Type	Previous	Category of	Justification &	Total Trips	Cost for	Total Cost	Approved	Core	Requested
	Travel Planning Training	THIS IS A NEW REQUIREMENT TO PROVIDE ALL	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15 16									-			
17			-						-			
18												
19									-			
20									-			
21									-			
22									-			
23									-			
24									-			
25									-			
26									-			
27	- 101-11								-			
	Travel Sub-Total	DR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DE							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION DESCRIPTION OF PLANNING ACTIVITES MUST BE	Select Purchase Type	Previous	QUANTITY	UNIT COST	TOTAL	Approved	Core	Requested
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous	QUANTITY	UNIT COST	TOTAL	Approved	Core	Requested
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

ine # CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous	QUANTITY	UNIT COST	TOTAL	Approved	Core	AEL Ref # (if	Requested
Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE									
	to procurement / See 2nd tab to determine whether our project requires EHP Screening									
40	APX6000 700/800 MODEL 2.5 PORTABLE	New / Enhance / Past /		10.00	\$2,208.98	\$ 22,089.80	Communication -	Operational	06CP-01-MOBL	UASI
41	ASTRO DIGITAL CAI OPERATION	New / Enhance / Past /		10.00	\$375.95	\$ 3,759.50	Communication -	Operational	06CP-01-MOBL	UASI
42	SMARTZONE OPERATION	New / Enhance / Past /		10.00	\$876.00	\$ 8,760.00	Communication -	Operational	06CP-01-MOBL	UASI
43	P25 9600 BAUD TRUNKING	New / Enhance / Past /		10.00	\$219.00	\$ 2,190.00	Communication -	Operational	06CP-01-MOBL	UASI
44	ADVANCED SYSTEM KEY - HARDWARE KEY	New / Enhance / Past /		10.00	\$3.65	\$ 36.50	Communication -	Operational	06CP-01-MOBL	UASI
45	TDMA OPERATION	New / Enhance / Past /		10.00	\$328.50	\$ 3,285.00	Communication -	Operational	06CP-01-MOBL	UASI
46	PROGRAMMING OVER P25 (OTAP)	New / Enhance / Past /		10.00	\$73.00	\$ 730.00	Communication -	Operational	06CP-01-MOBL	UASI
	LI-ION IMPRES 2 IP68 3400 MAH	New / Enhance / Past /		10.00	\$73.00	\$ 730.00	Communication -	Operational	06CP-01-MOBL	UASI
	ASTRO 25 OTAR W/ MULTIKEY	New / Enhance / Past /		10.00	\$540.20	\$ 5,402.00	Communication -	Operational	06CP-01-MOBL	UASI
	AES ENCRYPTION	New / Enhance / Past /		10.00	\$346.75	\$ 3,467.50	Communication -	Operational	06CP-01-MOBL	UASI
	1/4- WAVE 7/800 GPS STUBBY (NAR6595A)	New / Enhance / Past /		10.00	\$17.52	\$ 175.20	Communication -	Operational	06CP-01-MOBL	UASI
	5 YEAR ESSENTIAL ACCIDENTAL SERVICE	New / Enhance / Past /		10.00	\$360.00	\$ 3,600.00	Communication -	Operational	06CP-01-MOBL	UASI
	RADIO MANAGEMENT ONLINE	New / Enhance / Past /		10.00	\$0.00	\$ -	Communication -	Operational	06CP-01-MOBL	UASI
	RADIO MANAGEMENT LICENSES ONLINE	New / Enhance / Past /		10.00	\$143.11	\$ 1,431.10	Communication -	Operational	06CP-01-MOBL	UASI
	BATT IMPRES 2 LIION R IP68 3400T	New / Enhance / Past /		10.00	\$118.99	\$ 1,189.90	Communication -	Operational	06CP-01-MOBL	UASI
	IP68 REMOTE SPEAKER MICROPHONE,3.5MM,UL	New / Enhance / Past /		10.00	\$105.85	\$ 1,058.50	Communication -	Operational	06CP-01-MOBL	UASI
	CHARGER, SINGLE-UNIT, IMPRES 2, 3A, 100-240VAC	New / Enhance / Past /		10.00	\$109.50	\$ 1,095.00	Communication -	Operational	06CP-01-MOBL	UASI
EQUIPMENT Sub-Total						\$ 59,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

10 @ \$2,208.98 = \$22089.80

Portable radio unit which will be assigned to each individual officer.

P25 9600 RAUD TRUNKIN

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous	Coordinated	Is This Request on	QUANTITY	UNIT	Approved	Core	TOTAL	Requested
	Training	All Training in this category must be coordinated with						-				
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
50	your pro	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56		_				•					\$ -	
	Training Sub-Total					•					\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous	Coordinated	This request is	QUANTITY	UNIT	Approved	Core	TOTAL	Requested
	Exercise	All Exercises must be HSEEP compliant and										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative	HERE						
						Budget Total \$	59,000.00

N	evada Homeland Security	v Grant Pr	ogram (H	ISGP) UAS	SIONLY	PROJECT ID:	III
	oject Proposal for FFY19					Date Submitted	5/1/19
	PROJECT TITLE:	CCSD Stop t			200 1, 20, 20		0, 1, 10
•	PROPOSING/LEAD AGENCY:	·		rict Police Dep	artment		
3)	Project Manager Name/Title:				ergency Manager	ment	
	Project Manager Contact Info:		799-7830		nf@nv.ccsd.net		
4)	Addl Project Manager Name/Title:	,					
•	Addl Project Manager Contact Info:	Phone:		Email:			
		Rich Easter, (Grant Manag	jer			
•	Finance/Grant Contact Info:	Phone: (702)	799-5425	Email: easter	@nv.ccsd.net		
6)	CLASSIFICATION - Check the p	rimary intenti	on of the Pr	oposed Projec	t:		Choose one:
						hin the past five years; NCHS FY16-18 prioritie	
	MAINTAIN Project will MAINTA	AIN AN APPROV	ED FFY19 STF	RATEGIC CAPAC	ITY*		0
	*All NEW projects are competitive						
	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Ho capability); and where (identify the geoff oestablish a bleeding control s	e: "To (establish, i meland Security (l ographic locale; ex	mprove, expan NCHS) FFY18 pr ample: state-w	d, double, sustain iorities (See #10)] ide, LV Urban Are	, etc.)]; <u>OF WHAT Co</u> ; <u>FOR WHO</u> (identify t a, NE NV, or Reno, etc	ORE CAPABILITY (or CAPABILITY (or CAPABILITY) (or CAPABILITY) the direct users/beneficiarics.]. FIELD IS LIMITED TO VI	BILITIES [consider ies of the ISIBLE TEXT BOX.
	390,000 students and employees training of all CCSD employees i life in the event of a school shoo of Southern Nevada encompass in all CCSD high schools; the pro	in Stop the Ble ting or other so ed by the distri	ed interventi chool-based ict. An existi	ons, providing mass casualty ing partnership	the tools necessar incident within the with UMC has re	ary to dramatically ded e more than 8,600 sq sulted in funding to p	crease loss of uare mile area
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency Ma	anagement <i>A</i>	agency (FEMA)	list of Core Capab	ilities and the Crosswa	alk of Target
	FFY19 Strategic Capacity Maintai	ined*:	Not Applicable	9			
	HSGP Project Type Supporting Strat						
	If OTHER, please choose FFY16-18 N	· <u>-</u>				· ALL]	
	Core Capability aligned with Mainta	ained Project: [MASS CARE	SERVICES [Mis	sion Area - RESP]		
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						19 and/or
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment with the strategies of the strateg						
	This project aligns with MMRS a every school in the district. Scho Response Mission Area in order	ols have incre	asingly beco	me targets for	mass casualty ind		

Nevada Homeland Security Grant Program (HSGP) UASI ONLY PROJECT ID: III										
Pro	ject Proposal for FF	Y19 HSGP Fundi	ng Description - Due 4/26	/19	Date Submitted	5/1/19				
PRO	JECT TITLE REFERENCE	: CCSD Stop the	Bleed							
10)	PROCUREMENT - Indica	ate the method of pr	ocurement associated with thi	s proj	ect:					
	Request for Proposal	Provide a brief explan	ation on your method of procuremen	nt - FIEL	D IS LIMITED TO VISIB	LE TEXT BOX:				
	Sole SourceInternal	CCSD Purchasing will Bleed kits.	put out an RFP and use it's bid prod	cess to	select a vendor for t	he Stop the				
11)		•	and by whom, the Proposed Projection		•	scribe				
	The Stop the Bleed Station	ns will be installed in the	e school as follows:							
ВОХ	[A] CCSDPD, in partnersh building staff.	ip with UMC and Americ	can Medical Response (AMR) is cu	rrently	delivering training to	all CCSD				
TEXT	[B] Coordinate the purchas	se of 311 bleeding contr	rol stations following CCSD procure	ment s	standards.					
SIBLE	[C] Coordinate installation of stations at each school, working with CCSD Facilities and school leadership.									
FIELD IS LIMITED TO VISIBLE TEXT BOX	[D] Maintain the supply of	bleeding kits using scho	ool funding, as necessary.							
12)	section is for you to tell		ne participating agency(s) and juri ing the money for your project - In Political Jurisdiction (City, County, State, etc.)	f it's y		ncy]				
		ol District Police Dept	Clark County School District		ael Wilson, Director	individualy				
	12 (b)									
	12 (c)									
13)	SUSTAINMENT - Identify	any continuing financia	al obligation created by the Project,	and pr	oposed funding solut	tion				
FIELD IS LIMITED TO VISIBLE TEXT BOX	Funding to replenish and r	eplace bleeding control	kits as needed will be provided thro	ough so	chool budgets.					
14)	-	ount is derived from Field	ect's funding percentage makeup of S '15g - PROJECT TOTALS' on Page #3	tatewi	de -vs- UASI is noted b	elow for				

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: III
Date Submitted 5/1/19

PROJECT TITLE REFERENCE:

CCSD Stop the Bleed

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	pecific. Identify (LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
Purchase of 311 bleeding control stations, each containing 8 bleeding control kits.	27 07101	State Wind	54515ta
	\$ 191,269.46		\$ 191,269.4
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00
	LV-UASI	State-wide State-wide	\$ 0.00
			\$ 0.00
			SubTota

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: Ш **Date Submitted** 5/1/19

PROJECT TITLE REFERENCE:

CCSD Stop the Bleed

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Initiate procurement process	10/01/19	12/31/19	3
3	Vendor selection	12/31/19	01/30/20	1
4	Order and receive bleeding control stations	02/01/20	02/28/20	1
5	Install stations at all school sites	03/01/20	05/31/20	3
6				
7				
8				
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - *Please provide a <u>BRIEF</u> explanation for your response to these questions:*

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	School shootings have become an alarmingly frequent form of domestic terrorism and remain soft targets for global terrorists due to the potential targeting of children.
size	
text box	
ole t	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
visible	This project aligns with the Response Mission Area and Mass Care Services core capability.
ed to	
are limitied	
"c" br	

c. Can this project funding request be reduced? Is it scaleable? YES
NO Explain below.

Depending on available funding this project can easily be scaled to reduce the number of schools that receive Stop the Bleed stations.

ada	Homel	and Securi	ty Grant	Program	ı (HSGP) ı	JASI ONLY	PROJECT ID:	III
ect I	Propos	al for FFY1	9 HSGP	Funding [Descriptio	ON - Due 4/26/19	Date Submitted	5/1/19
JECT ⁻	TITLE RE	FERENCE:	CCSD S	Stop the Bleed	I			
d.	Can this p	oroject continue	without fund	ding? YES	NO 💽 Ex	olain below.		
					nployees thro	ughout the district, at	this time there is no de	edicated
e.	Does this	nroject provide	a MFASIIRF	ARI F statewide	e henefit?	VES (NO (I	Explain below.	
shoot	establishm ting or oth	ent of bleeding er terror attack.	control stati While the h	ions in all CC	SD schools wese stations i	rill offer a critical resounce of the control of th	urce in the event of a sed, the growing reality	is that
THIR	A COMP	LETION - Pleas	se indicate	the participa	ntion level in	completing the 2018	THIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Ag	gency HAS part	icipated in t	the 2018 Thre	eat and Hazai	rd Identification Risk /	Assessment (THIRA) So	urvey
	NO - Ag	ency has NOT _l	participated	d in the 2018	Threat and H	azard Identification R	Risk Assessment (THIR.	A) Survey
				indicate any	additional p	roject commentary y	ou feel may be impor	rtant. Field is
the B	Bleed traini sensus afte	ing for school di er the Sandy Ho	istrict perso ook school s	nnel. Unfortu shooting ident	ınately, schoo tified that earl	ols have been a target y access to bleeding o	of terrorism. The Ha	rtford ho are trained
	ect ECT d. While funding Funding While funding While funding ADD While funding Clark the EC Consequence Clark the EC Consequence Con	ect Proposition ECT TITLE RE d. Can this gray while the Stop funding in place of the stablishm shooting or other violence in school of the stablishm should be stablished to stablish should be stablished to sc	ect Proposal for FFY1 ECT TITLE REFERENCE: d. Can this project continue: While the Stop the Bleed trainifunding in place to provide STE e. Does this project provide: The establishment of bleeding shooting or other terror attack. violence in schools is trending THIRA COMPLETION - Please VES - Agency HAS part NO - Agency has NOT in ADDITIONAL COMMENTAR limited to the visible text box Clark County School District has bleed training for school diconsensus after the Sandy Holes.	ect Proposal for FFY19 HSGP ECT TITLE REFERENCE: d. Can this project continue without fund with the Stop the Bleed training will continue funding in place to provide STB stations as shooting or other terror attack. While the hardwide in schools is trending upward and the violence in schools is trending upward and the NO - Agency has NOT participated in NO - Agency has NOT participated in ADDITIONAL COMMENTARY - Please limited to the visible text box Clark County School District has partnered the Bleed training for school district person Consensus after the Sandy Hook school states.	ect Proposal for FFY19 HSGP Funding I ECT TITLE REFERENCE: CCSD Stop the Bleed d. Can this project continue without funding? YES (While the Stop the Bleed training will continue for all enfunding in place to provide STB stations at schools. e. Does this project provide a MEASUREABLE statewide The establishment of bleeding control stations in all CC shooting or other terror attack. While the hope is that the violence in schools is trending upward and emergency THIRA COMPLETION - Please indicate the participate VES - Agency HAS participated in the 2018 Three NO - Agency has NOT participated in the 2018 ADDITIONAL COMMENTARY - Please indicate any limited to the visible text box Clark County School District has partnered with Univerthe Bleed training for school district personnel. Unfortuconsensus after the Sandy Hook school shooting identices.	ect Proposal for FFY19 HSGP Funding Description ECT TITLE REFERENCE: d. Can this project continue without funding? YES NO SEX While the Stop the Bleed training will continue for all employees throfunding in place to provide STB stations at schools. e. Does this project provide a MEASUREABLE statewide benefit? The establishment of bleeding control stations in all CCSD schools with shooting or other terror attack. While the hope is that these stations reviolence in schools is trending upward and emergency medical preparation in schools is trending upward and emergency medical preparation. THIRA COMPLETION - Please indicate the participation level in the Section of the Visible text box Clark County School District has partnered with University Medical Consensus after the Sandy Hook school shooting identified that early consensus after the Sandy Hook school shooting identified that early section.	d. Can this project continue without funding? YES NO Explain below. While the Stop the Bleed training will continue for all employees throughout the district, at funding in place to provide STB stations at schools. P. Does this project provide a MEASUREABLE statewide benefit? YES NO The establishment of bleeding control stations in all CCSD schools will offer a critical resord shooting or other terror attack. While the hope is that these stations never have to be utilizated in schools is trending upward and emergency medical preparedness is paramount of the participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk of NO - Agency has NOT participated in th	ECT TITLE REFERENCE: CCSD Stop the Bleed d. Can this project continue without funding? YES NO Explain below. While the Stop the Bleed training will continue for all employees throughout the district, at this time there is no defunding in place to provide STB stations at schools. P. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below. The establishment of bleeding control stations in all CCSD schools will offer a critical resource in the event of a shooting or other terror attack. While the hope is that these stations never have to be utilized, the growing reality violence in schools is trending upward and emergency medical preparedness is paramount to an effective responsible of the provided of the participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Shoot Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be imposed.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEM DETAIL I	BUDGET						
	Agency Name	CCSDPD	Project Manager Name & Contact #			Grant Manager Name & Contact #	Rich Easter- 702-799	9-5425				Ш
	IJ TITLE:	Stop the Bleed										
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				_
3							1	\$ -				
4					1		1	\$ -				†
	Personnel Sub-Total							\$ -				
EDSONN	IEL COST MADDATIVE DECLIDED	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE DOCITIONS AND D	ELIVEDABLES I	NADDATIVE WILL	DE LICED TO ENCLIDE ITEMO LI	STED WILL BE COM	IDLETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITER

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	ne#	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
	6								\$ -			
	7								\$ -			
	8								\$ -			
		Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33					_		-			
34							-			
35					_					
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					1	-	\$ -			
37			·				\$ -			
38					1		\$ -			
39					•	_	\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		311 Stop the Bleed stations (8 kits per station)	New / Enhance / Past / Competitive		311.00	615.01	\$ 191,269.46			09MS-04-TNQT Tourniquet	UASI
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
	EQUIPMENT Sub-Total						\$ 191,269.46				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Funding is requested to purchase 311 Stop the Bleed stations, each containing 8 bleeding control kits. These stations will be installed at all CCSD schools to enrue 100% of sites are prepared for a bleeding-related emergency.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										1
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·								\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			<u> </u>								\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
7					Request	\$ 191,269,46	

Nevada Homeland Security	y Grant Program (F	HSGP) UASI ONLY	PROJECT ID:	JJJ
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	4/25/19
1) PROJECT TITLE:	Henderson Regional Haz	mat Response Capability Sustain	ment – HAZMAT Tr	uck Camera
2) PROPOSING/LEAD AGENCY:	City of Henderson			
3) Project Manager Name/Title:	Richard Johnson, Division	n Chief - Logistics		
Project Manager Contact Info:	Phone: (702) 267-2213	Email: Richard.Johnson@cityofh	enderson.com	
4) Addl Project Manager Name/Title:	Ryan Turner, Division Ch	ief of Emergency Management a	nd Safety	
Addl Project Manager Contact Info:	Phone: (702) 267-2212	Email: Ryan.Turner@cityofhende	erson.com	
5) Finance/Grant Contact Name/Title:	Heather Carson, Fire Dep	artment Business Analyst III		
Finance/Grant Contact Info:	Phone: (702) 267-2246	Email: Heather.Carson@cityofhe	enderson.com	

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

With funding from FFY15 Department of Homeland Security (DHS) Urban Area Security Initiative (UASI), the City of Henderson (COH) received funding to purchase a hazardous materials response vehicle. In building that vehicle, the option to include a HAZMAT Truck A/V 4K System 40' Mast and Thermo Combo Camera was not in the specifications because the base build of the project was already a significant cost and Henderson needed at least the basic vehicle for its team. However, since the purchase of the vehicle, this piece of technology has become an essential item to be added to the vehicle because it allows first responders to detect and identify potentially hazardous materials or contaminants, all while maintaining a safe distance from potential exposure. Additionally, it provides an incident commander with the real-time information required to make quick decisions. Other incident personnel from the HAZMAT vehicle may also view the live video and assist with hazard and risk assessment during an emergency event.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: THREATS AND HAZARDS IDENTIFICATION [Mission Area - MITI]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project falls under the FFY19 Strategic Capacity of Chemical, Biological, Radiological, Nuclear, and Explosive (CBRN,E) and aligns with the FY-16-19 core capabilities operational coordination along with threats and hazards identification. The City of Henderson, Nevada's second largest city seeks to prevent, protect and respond to its critical infrastructure. This investment seeks specific enhancements for the Henderson Fire Department regarding operational coordination and threats and hazards identification. This investment supports ongoing efforts to enhance mitigation, preparedness, and response capabilities for the Henderson Fire Department Hazardous Materials Response Team in operational coordination. This project is part of a regional collaboration aimed at providing coordinated capabilities for threats and hazards across the area. The project requiring investment is focused on mitigating and preparing for the risk of potential catastrophic hazardous materials incidents in the City of Henderson.

evada l	Homeland Secu	urity Grant Progi	ram (HSGP) UASI ONLY	PROJECT ID:	JJJ
oject P	roposal for FF	Y19 HSGP Fundiı	ng Description - Due 4/2	6/19 Date Submitted	4/25/19
OJECT T	TITLE REFERENCE:	Henderson Region	onal Hazmat Response Capability	/ Sustainment – HAZMAT Tr	uck Camera
PROC	UREMENT - Indica	te the method of pro	ocurement associated with th	his project:	
_	quest for Proposal		ation on your method of procureme		BLE TEXT BOX:
_	· · · · · ·	City of Henderson will f	ollow the RFP process.		
O Int	ternal				
PROJI	ı ECT IMPLEMENTA	ΓΙΟΝ - <i>Describe how. a</i>	and by whom, the Proposed Proj	iect will be implemented. De	escribe
			olished, identifying who (i.e. staff, contrac	•	
outline review	ed in Nevada Revise	d statutes. A Request F	k A/V 4K System 40' Mast and Th or Qualifications (RFQ) will be pul These short-listed applicants will	blished and a team from the	City will
	on is for you to tell ເ	is WHO will be receivi	ne participating agency(s) and ju ng the money for your project -	If it's you, put in your age	ncy]
		(FD, PD, etc.)	Political Jurisdiction (City, County, State, etc	i i	(individual)
12 (a)	Henderson Fire Dep	partment	City of Henderson	Shawn White, Fire Chief	
12 (b)					
12(0)					
12 (c)					
SUST	AINMENT - Identify	any continuing financia	I obligation created by the Projec	t, and proposed funding solu	tion
č (CBR	this project falls unde N,E), there is potentia at Response Capabil	al for additional requests	Capacity of Chemical, Biological, s from this funding stream as need	Radiological, Nuclear, and E ded to sustain the Henderso	xplosive n Regional
STAT			ct's funding percentage makeup of '15g - PROJECT TOTALS' on Page #3		below for

0% 100% Urban Area (SHSP) (UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: JJJ

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Henderson Regional Hazmat Response Capability Sustainment – HAZMAT Truck Camera

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specified Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
HAZMAT Truck A/V 4K System 40' Mast and Thermo Combo Camera including touchpanels with controller and hardware, programming, installation, wires, cables, and components.	\$ 76,226.64	\$ 0.00	\$ 76,226.6
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00 SubTota \$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide State-wide	SubTota
			SubTota \$ 0.00
			\$ 0.00

PROJECT ID: Date Submitted

__JJJ 4/25/19

PROJECT TITLE REFERENCE:

Henderson Regional Hazmat Response Capability Sustainment - HAZMAT Truck Camera

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive and Accept Sub-grant Award	09/30/19	11/30/19	2
3	Procure Equipment in Compliance with Grant Guidelines	12/01/19	06/01/20	6
4	Equipment Inventory and Installation	06/02/20	08/02/20	2
5	Test Equipment	08/03/20	10/04/20	2
6	Put Equipment into Full Service	10/05/20	11/05/20	1
7	Closeout Grant	11/06/20	12/06/20	1
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project have a nexus to terrorism?	YES 💿	No 🔵	Explain below.

Yes, through this proposal, COH will be able to identify, deter, detect, disrupt and prepare for terrorist events; reduce vulnerability of critical assets, systems and networks and mitigate potential consequences of critical infrastructure if a terrorist attack or subversive act did occur.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, this is a project which falls under a maintained strategic capacity and the explanation has been provided in section 9 of this grant proposal.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

No, all items within the proposal must be purchased together in order to be viable.

•	y Grant Program (HSGP) <mark>UASI (</mark>		PROJECT ID:	JJJ
ect Proposal for FFY19	HSGP Funding Description - Do	ue 4/26/19	Date Submitted	4/25/19
ECT TITLE REFERENCE:	Henderson Regional Hazmat Response Ca	apability Sustair	nment – HAZMAT Tr	uck Camera
d. Can this project continue w	ithout funding? YES 🔵 NO 💿 Explain belo	ow.		
a needs assessment to determine	OH to address critical needs that may not be a ne the highest priority demands for additional ruck A/V 4K System 40' Mast and Thermo C	l resources. Be	ecause of the number	r of critical
e. Does this project provide a	MEASUREABLE statewide benefit? YES	s NO Ex	xplain below.	
Yes, the project provides a meas areas of the state, if needed in a	surable "statewide" benefit as it supports the critical event.	enhancement	of a vehicle that may	travel to ot
	indicate the participation level in complet			
	articipated in the 2018 Threat and Hazard Id			_
_	- Please indicate any additional project c			
n/a				

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

	Agency Name	City of Henderson	Project Manager Name & Contact #	Richard Johnson Division Chief - Lo (702)267-2213 Richard.Johnson@c	gistics cityofhenderson.com	Grant Manager Name & Contact #		ire Department Business Analyst III Heather.Carson@cityofhenderson.com				JJJ
	IJ TITLE:	Henderson Regional Hazmat Response 40' Mast and Thermo Combo Camera V		nt UASI FFY	19 – HAZMAT	Truck A/V 4K System						
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
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1								\$ -				
2								\$ -				
3							-	\$ -				
4	Personnel Sub-Total							\$ -				
DEDSON		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN I	DETAIL THE POSITIONS AND D	ELIVEDADIES A	IADDATIVE WILL D	E LISED TO ENSURE ITEMS LIST	ED WILL BE COM	DI ETED IN THE	PANT CYCLE - I	TEMS MAY NOT B	E BURCHASED OUT	SIDE THE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIEST.

Line		FRINGE DETAIL DESCRIPTION	Select Purchase Type	Funding Type	Salary Hourly	% of Effort	(Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			i I
7								\$ -			
8								\$ -			i I
	Fringe Sub-Total							\$ -			

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	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				_					
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			
	Travel Sub-Total	OR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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	Planning	DESCRIPTION OF PLANNING ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33					·		-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Previous Purchase Type Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
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36				-	-	\$ -			
37						\$ -			
38				-		\$ -			
39						\$ -			
	Organization Sub-Total					\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY. NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL.									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40		42' Mast with Dual Camera External 42' Mast and Thermal Imager Plus SD & HD Camera with PTZ	Maintain	UASI	1.00	43,983.33	\$ 43,983.33	Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
41		10" & 7" Touchpanels w/controller and hardware One 10"touchpanel plus stand, One 7" touchpanel plus stand and system controller	Maintain	UASI	1.00	3,866.56	\$ 3,866.56	Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
42		4K VOIP 8x2 Matrix with Quad View 4K Video Over IP 8 Input 2 Output switching Matrix with Dual Monitor Quad View	Maintain	UASI	1.00	17,126.33	\$ 17,126.33	Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
43		26-Port/24 PoE+ Gigabit Managed Switch	Maintain	UASI	1.00	919.46	\$ 919.46	Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
44		Programming of all project devices	Maintain	UASI	1.00	2,100.00	\$ 2,100.00	Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
45		Installation labor to install, terminate & test devices and mast	Maintain	UASI	1.00	6,535.20	\$ 6,535.20	Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
46		Miscellaneous Wires, Cables and Components	Maintain	UASI	1.00	1,050.00	\$ 1,050.00	Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
47		Shipping	Maintain	UASI	1.00	645.75		Approved Strategic Capacity	Operational Coordination	04MD-01-IRED Camera, Infrared (IR)	UASI
48						-	\$ -				
49	EQUIPMENT Sub-Total						\$ 76,226,64				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

After approval of grant funding, the HAZMAT Truck AV 4K System 40' Mast and Thermo Combo Camera, will be procured as outlined in Nevada Revised statutes. A Request For Qualifications (RFQ) will be published and a team from the City will review and short list the most qualified applicants. These short-listed applicants will be scrutinized by staff to determine the best value for the City.

Line #		TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether									_	
50 51	your pro	ect requires EHP Screening									\$ -	
52											\$ - \$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 76,226.64	

Ne	vada Homeland Security	Grant Pi	rogram (l	HSGP) UA	SI ONLY	PROJECT ID:	k	KKK
Pr	oject Proposal for FFY19	HSGP Fu	nding De	scription	- Due 4/26/19	Date Submitted	4/2	25/19
1)	PROJECT TITLE:	LVMPD Tac	tical Respon	se / MACTAC	- B		•	
2)	PROPOSING/LEAD AGENCY:	Las Vegas N	/letropolitan l	Police Departr	nent			
3)	Project Manager Name/Title:	Justin Van N	lest					
ı	Project Manager Contact Info:	Phone: (702) 828-3389	Email: j14198	3v@lvmpd.com			
4) /	Addl Project Manager Name/Title:	Rachel Skid	more / Emer	gency Manage	er			
1	Addl Project Manager Contact Info:	Phone: (702) 828-2257	Email: r1459	0s@lvmpd.com			
5) I	Finance/Grant Contact Name/Title:	Joni Prucnal	, Director of I	Finance				
I	Finance/Grant Contact Info:	Phone: (702) 828-8267	Email: J1370	0P@LVMPD.CON	И		
6)	CLASSIFICATION - Check the pi			· · ·				ose one:
	the project has been	funded in the	past. All proj	ects in this cate	gory must align with	ithin the past five years; h NCHS FY16-18 prioritie		0
	MAINTAIN Project will MAINTA	IN AN APPRO	VED FFY19 ST	RATEGIC CAPA	CITY*			<u>O</u>
	*All NEW projects are competitive							
	Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Hor capability); and <u>WHERE</u> (identify the geo	e: "To (establish, meland Security	improve, expar (NCHS) FFY18 p	nd, double, sustai priorities (See #10	n, etc.)];	CORE CAPABILITY (or CAPA the direct users/beneficia	ABILITIES ries of t	s [consider he
3)	PROPOSED STRATEGIC CAPAC capability. Reference the Federal Capabilities to Core Capabilities he	Emergency N	lanagement .	Agency (FEMA) list of Core Capab	pilities and the Crossw	alk of	Target
	FFY19 Strategic Capacity Maintain	ned*:	Not Applicabl	e				
	HSGP Project Type Supporting Strat							
	If OTHER, please choose FFY16-18 N	NCHS Priority:	OPERATION	AL COORDINA	TION [Mission Area	- ALL]		
	Core Capability aligned with Mainta	ined Project:	Not Applicable	е				
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro						/19 an	d/or
9)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment v							
	This project aligns with several or is readily available to patrol resor			ter Action Rep	ort recommendation	ons, to provide more	equipr	ment that

			am (HSGP) UASI ONLY	PROJECT ID:	KKK
oject	Proposal for FF	Y19 HSGP Fundin	g Description - Due 4/26/	19 Date Submitted	4/25/19
OJECT	TITLE REFERENCE:	LVMPD Tactical F	Response / MACTAC - B		
PRO	CUREMENT - Indica	te the method of pro	curement associated with this	project:	
O R	Request for Proposal	Provide a brief explana	tion on your method of procurement	- FIELD IS LIMITED TO VISIB	BLE TEXT BOX:
O S	ole Source	Internal.			
⊙ Ir	nternal				
			nd by whom, the Proposed Projectished, identifying who (i.e. staff, contractor	•	scribe
Proc	curement will happen th	hrough existing contracts	that were competitively bid.		
	Agency		e participating agency(s) and jurising the money for your project - If Political Jurisdiction (City, County, State, etc.) Clark County		ncy]
42/b					
12(b))				
12(b)					
12 (c))	any continuing financial	obligation created by the Project, a	and proposed funding solut	tion
12 (c)	TAINMENT - Identify	any continuing financial ring cost for these items.		nd proposed funding solut	tion

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: KKK

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Tactical Response / MACTAC - B

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	-		
15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	L SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
90 - Ballistic Shields and scopes	\$ 215,150.00	\$ 0.00	\$ 215,150.C
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
n.a	\$ 0.00	\$ 0.00	\$ 0.00
	LV-UASI	State-wide	SubTota
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	\$ 0.00	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	\$ 0.00	\$ 0.00 State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY
Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: KKK Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Tactical Response / MACTAC - B

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive Funding	01/01/20	12/31/20	12
3	Procure Equipment	01/01/20	12/31/20	12
4	Close out Grant	01/01/20	12/31/20	12
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a <u>BRIEF</u> explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Absolutely, patrol is the first responders on scene during an event.
	7 book at 6, 1, part of the met respondence of cooking an overtice
a	
size	
t pc	
ex	
visible text box	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
isik	This directly supports Operational Coordination.
>	This directly supports operational coordination.
are limitied to	
ţį	
E	
<i>!</i>	
ູດ"	
, O	
and	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO (Explain below.
	Yes, but it would change the number of who gets them and who doesn't.
a,	Too, but it would onlying the number of who gote them and who doodn't
Fields	
je	
щ	

lev	ada Homeland Security	y Grant Program (HSGP) UASI ONLY	PROJECT ID: KKK
Proj	ect Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted 4/25/19
ROJ	ECT TITLE REFERENCE:	LVMPD Tactical Response / MACTAC - B	
	d. Can this project continue w	rithout funding? YES NO (•) Explain below.	
"e" are limitied to visible text box size	There is no funding for these sh	ields	
mitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO E	xplain below.
Fields "d" and "e" are l	You can show how many items	were procured.	
8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 2018	THIRA Survey. CHOOSE ONE:
	YES - Agency HAS partic	ripated in the 2018 Threat and Hazard Identification Risk A	Assessment (THIRA) Survey
	NO - Agency has NOT pa	articipated in the 2018 Threat and Hazard Identification R	isk Assessment (THIRA) Survey
19)	ADDITIONAL COMMENTAR' limited to the visible text box	Y - Please indicate any additional project commentary yo	ou feel may be important. Field is
	none.		

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	ITEM DETAI	LBUDGET					
	Agency Name Las Vegas Metropolitan Police Departme Project Manager Name & Contact # Rachel Skidmore 702 828 2257 Grant Manager Name & Contact # Jonit				Joni Prucnal 702 828	KKK					
	IJ TITLE:	LVMPD Tactical Response - B									
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1											
3							+				
4											
4							-				
6											
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Cost	Approved Strategic Capacity		Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -	•		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9		·							-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18					1				-			
19					 				-			
20	Travel Sub-Total								-			
TRAVEL (R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET.	ALL EACH LINE ITEM AND DELIV	EDADLES NAD	PATIVE WILL BE L	ISED TO ENGLIDE ITEMS LISTED	WILL BE COMPLE	TED IN THE CR	ANT CYCLE ITEM	AS MAY NOT BE	DUBCHASED OUTS	DE THE ITEMS LISTED

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #		PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
30							-				
31							-				
32							-				
33							-				
34							-				
35											
	Planning Sub-Total			<u> </u>			\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			<u> </u>				\$ -			
38			•		-		\$ -			
39			•				\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40											
41											
42			New / Enhance / Past /			.			0 " 1		
43		Ballistic Shields	Competitive		90.00	2.375.00	\$ 213,750.00		Operational Coordination	01LE-01-SHLD	UASI
44		Scopes with Tripods	New / Enhance / Past / Competitive		2.00	700.00			Operational Coordination	030E-02-SCOP	UASI
45			·								
46											
47											
48											1
	EQUIPMENT Sub-Total						\$ 215,150.00				
	Egon ment oub-rotal						φ 213,130.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

ballistic shields

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-			
		curement / See 2nd tab to determine whether									
50	your pro	ect requires EHP Screening								\$ -	
51										\$ -	
52										\$ -	
53										\$ -	
54										\$ -	
55										\$ -	
56										\$ -	
	Training Sub-Total									\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	ocurement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 215,150.00)

Nevada Homeland Securit	y Grant Program (I	HSGP) UASI ONLY	PROJECT ID:	LLL
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	4/25/19
1) PROJECT TITLE:	LVMPD Wireless Mesh N	letwork and TRV Enhancement -	В	
2) PROPOSING/LEAD AGENCY:	Las Vegas Metropolitan F	Police Department		
3) Project Manager Name/Title:	Brad Cupp/Sergeant			
Project Manager Contact Info:	Phone: (702) 828-4455	Email: b8104c@lvmpd.com		
4) Addl Project Manager Name/Title:	Rachel Skidmore / Emerg	gency Manager		
Addl Project Manager Contact Info:	Phone: (702) 828-2257	Email: r14590s@lvmpd.com		
5) Finance/Grant Contact Name/Title:	Joni Prucnal, Director of F	inance		
Finance/Grant Contact Info:	Phone: (702) 828-8267	Email: J13700P@LVMPD.COM		·
6) CLASSIEICATION Chack that	rimary intention of the D	canacad Drainate		Choose one:

CLASSIFICATION - Check the primary intention of the Proposed Project:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This is just an increase to a line item for drones in the already submitted request for this grant.

LVMPD is seeking to build out a valley-wide wireless mesh network to add direct live feeds into the command post and Department Operations Center. This project will allow video feeds captured from drones, robots, and other cameras to be streamed real-time to the SNCTC, DOC or a command post in the field.

Additionally, a small portion of this project will be utilized to add additional radios to the TASS TRV which would allow the vehicle to serve as a regional asset capable of deploying real-time video and integrating air-to-ground video feeds in an operational area to a command post for increased situational awareness.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

HSGP Project Type Supporting Strategic Capacity: Southern Nevada Counter Terrorism Center [FUSION]

Core Capability aligned with Maintained Project: Not Applicable

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project provides the capability to ingest video feeds from disparate systems such as a drone into the Fusion Center or another command post in real-time. This capability currently doesn't exist in southern Nevada and will provide increased situational awareness and real-time video intelligence during a major incident.

			Grant Progra				
ject F	Proposal for FF	Y19 F	ISGP Fundin	g Description - Due 4,	/26/19	Date Submitted	4/25/19
DJECT 1	TITLE REFERENCE	: T	LVMPD Wireless	Mesh Network and TRV Enha	ncement -	В	
PROC	CUREMENT - Indica	te the	method of pro	curement associated with	this proj	ect:	
○ Re	equest for Proposal	Prov	ide a brief explana	tion on your method of procure	ment - FIEL	D IS LIMITED TO VISIE	BLE TEXT BOX
_	ole Source	Interna					
⊙ In	ternal						
PR∩I	FCT IMPLEMENTA	LLLL TION -	Describe how as	nd by whom, the Proposed Pi	roiect will	he implemented De	escriba
				shed, identifying who (i.e. staff, cont	-	•	361 100
	ork will be completed ad (TASS), and the Co			s of the Emergency Managem	ent Section	n, Technical and Sur	veillance
2. Sy 4. Bio 5. Iss 6. Pr 7. Ins	eceive Funding ystem Design d Equipment sue Purchasing Order rocure Equipment stall Equipment quipment Testing	r					
	on is for you to tell u	us WH((FD, PD,	O will be receiving etc.)	e participating agency(s) and g the money for your project Political Jurisdiction (City, County, State, Clark County	ct - If it's y		ncy]
sectio	Agency Las Vegas Metropol	us WH((FD, PD,	O will be receiving etc.)	g the money for your project Political Jurisdiction (City, County, State,	ct - If it's y	ou, put in your age Project Representative (ncy]
12(a) 12(b)	Agency Las Vegas Metropol	us WH((FD, PD,	O will be receiving etc.)	g the money for your project Political Jurisdiction (City, County, State,	ct - If it's y	ou, put in your age Project Representative (ncy]
section 12(a)	Agency Las Vegas Metropol	us WH((FD, PD,	O will be receiving etc.)	g the money for your project Political Jurisdiction (City, County, State,	ct - If it's y	ou, put in your age Project Representative (ncy]
12(a) 12(b) 12(c)	Agency Las Vegas Metropol	us WHC r (FD, PD, litan Po	O will be receiving etc.) lice Department	g the money for your project Political Jurisdiction (City, County, State, Clark County	ct - If it's y ct.) Chris	ou, put in your age Project Representative (topher Tomaino	ncy] (individual)
12(a) 12(b) 12(c) SUST	Agency Las Vegas Metropol AINMENT - Identify	us WHC (FD, PD, litan Po	O will be receiving etc.) lice Department	g the money for your project Political Jurisdiction (City, County, State, Clark County obligation created by the Proj	ct - If it's y Chris	ou, put in your age Project Representative (topher Tomaino	ncy] (individual)
12(a) 12(b) 12(c) SUST	Agency Las Vegas Metropol AINMENT - Identify	us WHC (FD, PD, litan Po	O will be receiving etc.) lice Department	g the money for your project Political Jurisdiction (City, County, State, Clark County	ct - If it's y Chris	ou, put in your age Project Representative (topher Tomaino	ncy] (individual)

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID:	LLL
Date Submitted	4/25/19

PROJECT TITLE REFERENCE:

LVMPD Wireless Mesh Network and TRV Enhancement - B

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be s 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	pecific. Identify (LV-UASI	<i>UASI and State</i> State-wide	cost. SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Increase to the Drone line item.	\$ 72,000.00	\$ 0.00	\$ 72,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
n.a			
	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	\$ 0.00	\$ 0.00 State-wide	\$ 0.00 SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] n.a			
	LV-UASI	State-wide	SubTotal
n.a	\$ 0.00	State-wide \$ 0.00	SubTotal \$ 0.00
n.a	\$ 0.00	State-wide \$ 0.00 State-wide	\$ 0.00

PROJECT ID:

Date Submitted

<u>LLL</u> 4/25/19

PROJECT TITLE REFERENCE:

LVMPD Wireless Mesh Network and TRV Enhancement - B

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive Funding	01/01/20	12/31/20	12
3	Procure Equipment	01/01/20	12/31/20	12
4	Close out Grant	01/01/20	12/31/20	12
5				
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.
Real-time disparate video footage could play a critical role in a terrorist attack in terms of providing real-time intelligence information back to a command post or the Fusion Center.

b. Does this project align with the FFY19 strategic capacities? YES

NO
Explain below.

This project would allow the SNCTC Fusion Center to ingest and monitor the real-time video feeds from assets that are deployed to in the field.

c. Can this project funding request be reduced? Is it scaleable? YES NO • Explain below.

Failure to build out adequate infrastructure would not provide the coverage area necessary to support the objective of this project.

Vev	ada Homeland Security	(HSGP) UASI ONLY	PROJECT ID:	LLL	
Proj	ect Proposal for FFY19	HSGP Funding D	Description - Due 4/26/19	Date Submitted	4/25/19
RO.	ECT TITLE REFERENCE:	LVMPD Wireless Mes	h Network and TRV Enhancement -	В	
	d. Can this project continue w	thout funding? YES	NO (Explain below.		
"e" are limitied to visible text box size	There is currently no identified for	ınding source for this pr	oject.		
imiti	e. Does this project provide a			xplain below.	
Fields "d" and "e" are	Once the equipment is installed	assets can be deployed	anywhere in the state to provide th	ese capabililles il tile	niceus anses.
8)	THIRA COMPLETION - Please	indicate the narticinal	tion level in completing the 2018 1	THIRA Survey CHOO	SF ONE:
0,				-	
	YES - Agency HAS partic	ipated in the 2018 Thre	at and Hazard Identification Risk A	ssessment (THIRA) S	urvey
	NO - Agency has NOT pa	articipated in the 2018	Threat and Hazard Identification Ri	sk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any	additional project commentary yo	ou feel may be impoi	rtant. Field is
	none.				

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

	LINE II EM DE I AIL BUDGE I												
	Agency Name	LVMPD	Project Manager Name & Contact #	Sgt. Brad Ct 702-828-445	1pp 55	Grant Manager Name & Contact #	Joni Prucnal 702 828 8267			LLL			
	IJ TITLE:	Air to Ground Link/TRV Enhancement P	oject - B										
		One Budget Per Funding Stream											
		UASI											
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.											
1								\$ -				<u> </u>	
2								\$ -		 		 	
3								\$ -		 		 	
7	Personnel Sub-Total							\$ -					
DEDSONA	IEL COST NAPPATIVE PEOLIDE	FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE BOSITIONS AND D	ELIVEDABLES I	IADDATIVE WILL	BE LICED TO ENGLIBE ITEMS LIS	TED WILL BE COM	IDI ETED IN THE	CRANT CVCLE	ITEMS MAY NOT	DE BURCHASED OF	ITCIDE THE ITEM	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEM LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		 Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above								
5								\$ -		
6								\$ -		
7								\$ -		
8								\$ -		
	Fringe Sub-Total							\$ -		

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
9									-			
10									-			
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
21									-			4
22									-			
	Travel Sub-Total	R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET										

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
30							-				
31							-				
32							-				
33					_		-				
34							-				
35					_						
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Ownerinstien	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38			•		-		\$ -			
39			•			_	\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40											
41		Drones	New / Enhance / Past / Competitive		1.00	72,000.00		Fusion Center - SNCTC	Intelligence and Information Sharing	03OE-07-ROVL	UASI
42											
43											
44											
45											
46											
47											
48											
48											
	EQUIPMENT Sub-Total						\$ 72,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Drone line item increase.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAYEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			·			_					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
		curement / See 2nd tab to determine whether									
57	your pro	ject requires EHP Screening									
58										\$ -	
59										\$ -	
60			<u> </u>			<u> </u>				\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
1					Request	\$ 72,000.0	00

N	evada Homeland Security	y Grar	nt Program (F	HSGP) UASI ONLY	PROJECT ID:	000						
P	roject Proposal for FFY19	HSGF	P Funding De	Scription - Due 4/26/19	Date Submitted	4/25/19						
1)) PROJECT TITLE: Virgin Valley SNACC											
2)	2) PROPOSING/LEAD AGENCY: Mesquite Fire & Rescue											
3)	Project Manager Name/Title:	Spence	er K. Lewis, Admin	strative Captain								
	Project Manager Contact Info:	Phone:	(702) 379-0714	Email: slewis@mesquitenv.gov								
4)	Addl Project Manager Name/Title:	Sonja l	Robinson, Adminis	trative Assistant								
	Addl Project Manager Contact Info:	Phone:	(702) 346-2690	Email: srobinson@mesquitenv.go	OV							
5)	Finance/Grant Contact Name/Title:	Dave E	mpey, Director of I	inance								
	Finance/Grant Contact Info: Phone: (702) 346-5290 Email: dempey@mesquitenv.gov											
6)												

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project will greatly improve the operational communications within the Virgin Valley (City of Mesquite, Bunkerville and AZ strip) and give the Virgin Valley Interoperable communications throughout the valley, including CCFD, North Las Vegas, City of Las Vegas, AMOR, and Henderson with their specialties. This will also give the Virgin Valley area communications with incoming resources from outside of our valley. By placing SNACC communications equipment within the Virgin Valley in the North-East corner of Clark county the footprint of SNACC coverage will be greatly enlarged overlapping into neighboring counties and states. This project will be a large step towards operation communications between all emergency responders from any jurisdiction or state.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:	Not Applicable
HSGP Project Type Supporting Strategic Capacity:	OTHER
If OTHER, please choose FFY16-18 NCHS Priority:	OPERATIONAL COMMUNICATIONS [Mission Area - RESP]
Core Capability aligned with Maintained Project:	OPERATIONAL COORDINATION [Mission Area - ALL]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The departments in the Virgin Valley all have operable communications systems for themselves. These systems are good alone but when we try to get all three together we have severe communications problems. This project will correct those problems that we have in this valley and will enhance interoperability by enlarging the footprint of the SNACC system giving the outside specialty resources that respond to our area communications on their existing channels. Without this project we have to find and give radios to incoming specialty units and the abilities for the three departments in the Virgin Valley are restricted when finding a common channel for communications between the three

roi	ada momorana o o o c	arity C	irant Program (HSGP) UASI ONLY		PROJECT ID:	000		
ر- '	ect Proposal for FF	Y19 H	SGP Funding De	escription - Due 4/26/	19	Date Submitted	4/25/19		
0.	ECT TITLE REFERENCE:	: Vi	rgin Valley SNACC						
)	PROCUREMENT - Indica	te the r	nethod of procuren	nent associated with this	proje	ect:			
	Request for Proposal	Provid	e a brief explanation o	n your method of procurement	- FIELL	O IS LIMITED TO VISIE	BLE TEXT BOX:		
	O Sole Source	Mesquite	e Fire and Rescue will	post proposal for bid for 30 c	days				
	O Internal								
				whom, the Proposed Projec dentifying who (i.e. staff, contractor		•	scribe		
Mesquite Fire and Rescue will post proposal for bid for 30 days. Bid will be selected and timeline will be finalized. All tower sites will be analyzed and the best fit for this project will be selected in the first 3 months. Equipment will be ordered by contractor with in the first 3 months. Install will occur within 6 months. All issues will be found and fixed during the testing procedures and final testing should conclude at 9 months leaving the system fully operational.									
	Agency Magguita Fire & Rea	(FD, PD, e	will be receiving the	icipating agency(s) and juris money for your project - If cal Jurisdiction (City, County, State, etc.)	it's yo	ou, put in your ager Project Representative (ncy]		
	section is for you to tell u	(FD, PD, e	will be receiving the	money for your project - If cal Jurisdiction (City, County, State, etc.)	it's yo	u, put in your agei	ncy]		
	Agency Magguita Fire & Rea	(FD, PD, e	will be receiving the	money for your project - If cal Jurisdiction (City, County, State, etc.)	it's yo	ou, put in your ager Project Representative (ncy]		
	Agency 12(a) Mesquite Fire & Res	(FD, PD, e	will be receiving the	money for your project - If cal Jurisdiction (City, County, State, etc.)	it's yo	ou, put in your ager Project Representative (ncy]		
	Agency 12(a) Mesquite Fire & Res 12(b) 12(c)	(FD, PD, e	will be receiving the ic.) Politic City	money for your project - If cal Jurisdiction (City, County, State, etc.)	it's you	Project Representative (ncy] individual)		
	Agency 12(a) Mesquite Fire & Res 12(b) 12(c) SUSTAINMENT - Identify CCFD will maintain the Lice	(FD, PD, e scue	will be receiving the tc.) Politic City City Finuing financial obligated Agreements for SN	money for your project - If cal Jurisdiction (City, County, State, etc.)	Spender is seen in the seen is seen in the	project Representative (per K. Lewis proposed funding solution	ncy] individual)		

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) **UASI ONLY** Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: OOO

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Virgin Valley SNACC

[5a] Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
SNACC antenna and trunking equipment to be installed on an existing tower	\$ 460,000.00		\$ 460,000.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00 SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide State-wide	SubTotal
			SubTotal \$ 0.00
			\$ 0.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: OOO

Date Submitted 4/25/19

PROJECT TITLE REFERENCE:

Virgin Valley SNACC

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Bidding Process	06/01/19	07/01/19	1
3	Tower Site Selection	06/01/19	09/01/19	2
4	Equipment Procured	07/01/19	09/01/19	2
5	Installation	09/01/19	01/01/20	4
6	Testing and Correcting	01/01/20	04/01/20	3
7				
8				
9				
10				
11				
12				_

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Terrorist will seek to isolate victims any way possible. The Virgin Valley already has a lack of interoperable communications making it an easy target to isolate. Due to our limited resources we rely upon outside agencies for specialty services but without the completion of this project would have no way of notifying of terroism or communicating with them during an event.

b. Does this project align with the FFY19 strategic capacities? YES NO (Explain below.

Within the Virgin Valley area, (City of Mesquite, Bunkerville and AZ strip), communications interoperability, the ability of public safety agencies and service agencies to communicate on their existing channels within and across agencies and jurisdictions in real time is currently extremely difficult. This project will give the Virgin Valley area communications with local and incoming resources from outside of our valley. By placing SNACC communications equipment within the Virgin Valley in the North-East corner of Clark county the footprint of SNACC coverage will be greatly enlarged overlapping into neighboring counties and states. It is essential that public safety has the interagency operability it needs to provide emergency services for the City of Mesquite and surrounding areas.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

There are no shortcuts to creating this link for the SNACC system. Without any one piece of the equipment needed the system will not operate

Neva	ada Homeland Security	Grant Program (HSGP) UASI ONLY	PROJECT ID:	000
Proj	ect Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted	4/25/19
PROJ	ECT TITLE REFERENCE:	Virgin Valley SNACC		
	d. Can this project continue w	thout funding? YES NO 💿 Explain below.		
to visible text box size	Without funding the Virgin Valley communications will continue to	SNACC project the agencies will continue to operate as be a major problem.	normal but interoperab	ole
itied	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO	Explain below.	
Fields "d" and "e" are limitied to visible text box size		system grows and the ability to use I-OP Channels that I	nave been designated	for state
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018	THIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partic	pated in the 2018 Threat and Hazard Identification Risk	Assessment (THIRA) So	urvey
	NO - Agency has NOT pa	rticipated in the 2018 Threat and Hazard Identification F	Risk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	' - Please indicate any additional project commentary y	rou feel may be impor	tant. Field is
	state wide communications and	this project but it benefits all emergency responders. Growthe ability to move throughout the state without the loss of the neighboring jurisdictions. Since this project benefits coate communications as well.	communications or th	e need to find

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					112 11 2111 22	AIL BUDGET					
	Agency Name	Mesquite Fire and Rescue	Project Manager Name & Contact #	Spencer Lev 702-379-071	vis 4	Grant Manager Name & Contact#	Sonja Robinson 702-346-2690	t Robinson 446-2690			000
	IJ TITLE:	Virgin Valley SNACC									
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3				1				\$ - \$ -			
-	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Ctuntonia		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			i
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			
13 14									-			
15									-			
16									_			
17									-			
18									-			
19									-			
20									-			
21									-			
22									-			
23									-			
24 25									-			
26									-			
27									-			
	Travel Sub-Total								-			
TRAVEL		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETA	IL EACH LINE ITEM AND DELIV	ERABLES, NARI	RATIVE WILL BE U	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GRA	NT CYCLE - ITEM	S MAY NOT BE P	URCHASED OUTSIDE THE I	TEMS LISTED ABOVE

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27							-	-			
28							-	-			
29								-			
30								-			
31								-			
32								-			
33								-			
34			·		•	·		-			
35			·			·					
	Planning Sub-Total							\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					1	-	\$ -			
37			·				\$ -			
38					1		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		procurement / See 2nd tab to determine whether roject requires EHP Screening									
40							\$ -				
41		Modular multi-purpose network device that interconnects other network devices within the radio network			2.00	160,000.00	\$ 320,000.00			06CP-02-BRDG	
42		Microwave link for remote control of radio base stations or for links between infrastructure components and other communication assets.			1.00	126,000,00	\$ 126,000.00			06CP-03-MWAV	
43		Antenna			1.00		\$ 10,000.00			06CP-03-TOWR	
44		Non radiation-shielded transmission cable between base/repeater and antenna.			800.00	5.00	\$ 4,000.00			06CP-03-NRSC	
45							\$ -				
46					·		\$ -				
47							\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 460,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61			•								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRET. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Budget Total		
				Request	\$ 460,000.00	

Nevada Homeland Security	y Grai	nt Program (H	HSGP) RESUBMISSION	PROJECT ID:	PPP
Project Proposal for FFY19	HSGI	P Funding De	scription	Date Submitted	5/16/19
1) PROJECT TITLE:	Mass F	atality Preparedne	ess and Revise Mass Fatality Mar	nagement Plan	
2) PROPOSING/LEAD AGENCY:	Clark (County Office of the	e Coroner/Medical Examiner		
3) Project Manager Name/Title:	John F	udenberg, Corone	r		
Project Manager Contact Info:	Phone:	(702) 455-3385	Email: FUD@clarkcountynv.gov		
4) Addl Project Manager Name/Title:	David	Mills, Coroner Inve	stigative Forensic Supervisor		
Addl Project Manager Contact Info:	Phone:	(702) 455-0852	Email: DMS@clarkcountynv.gov		
5) Finance/Grant Contact Name/Title:	Elizabe	eth Vorce			
Finance/Grant Contact Info:	Phone:	(702) 455-1784	Email: C1210EJV@clarkcountyn	v.gov	

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.

MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)....]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

To review, revise, and update the Clark County Office of the Coroner/Medical Examiner (CCOCME) Mass Fatality (MF) response plan developed under previous HSGP funding in order to maintain a unified operation appropriately integrating stakeholders and supporting the integration of core capabilities: To update the list of pre-positioned MF response equipment and make available to statewide responder agencies; To provide refresher training to statewide responders and NGO collaborators on MF response; To conduct local and regional table top MF exercises to evaluate plan revisions and associated after-action training. To conduct a full-scale MF disaster portable morgue unit (DPMU) and disaster victim identification (DV) exercises. Revisions will further outline the operational response and handling of complex incidents; coordination of mutual aid; roles and responsibilities of the staff and agency core capabilities. Revisions will be adaptable to the Clark County Mass Casualty Incident Plan and as a resource to the rural areas within the State of Nevada. The revised plan would be exercised locally and/or during regional events to further train and improve our ability to effectively plan, organize, equip and to exercise the preparedness of our organization and community stakeholders. If granted the required funding, it will help develop new organizational capabilities, or significantly enhance existing capabilities through exercise and will directly expand the organization's ability to deliver core emergency management and disaster preparedness services and support to community.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

RECOVERY

HSGP Project Type Supporting Strategic Capacity: Mass Fatality [PLANNING]

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: FATALITY MANAGEMENT SERVICES [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request will align with Clark County's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan. It will allow the Urban Area to be better trained and prepared in responding to physical threats to local Southern Nevada organizations, which allows for increased ability to coordinate operational responses. After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. CCOCME will participate and assist with the coordinated efforts to train and exercise with the respective state and local entities during an annual or bi-annual county and/or statewide exercise in order to maintain statewide response proficiency.

Request for Proposal	Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:
O Sole Source	CCOCME will obtain quotes to develop an updated mass fatality response plan that outlines the
Internal	operational response and handling of complex incidents; coordination of mutual aid; roles and responsibilities of the staff and agency core capabilities.

11) PROJECT IMPLEMENTATION - *Describe how, and by whom, the Proposed Project will be implemented.* Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

Clark County Office of the Coroner/Medical Examiner (CCOCME) will obtain quotes from vendors to provide the required services to revise the CCOCME Mass Fatality Management Plan. The revisions will be adaptable to the Clark County Mass Casualty Incident Plan; serve as a resource to the rural areas of Clark County and within the State of Nevada. The revised plan would be exercised locally and/or during regional events to further train and improve our ability to effectively plan, organize, equip and to exercise the preparedness of our organization and community stakeholders. If granted the required funding, it will help develop new organizational capabilities, or significantly enhance existing capabilities through exercise and will directly expand the organization's ability to deliver core emergency management and disaster preparedness services and support to community.

In order to affect the achievement of all goals we propose to hire an project manager/plans writer; The project manager reviews, revises, and updates existing CCOCME MF plans statewide; Project manager plans, coordinates, facilitates refresher training on plan and revisions; Increased planning budget request will include that the contract project manager function also as a plans writer to facilitate workshops to develop the recommendations to the CCOCME MF response plan and to provide a comprehensive review with respective agencies and related literature to focus on various scenarios, and input from subject matter experts. The mass fatality management workshops would include a working group of operational and technical experts from local, state, and federal agencies to ensure practices are broad-based and identifiable/usable by most jurisdictions. Working groups would include representatives from area law enforcement, fire department, SNHD/public health, personnel, Funeral Homes, emergency managers, disaster consultants. Training workshop recommendations to be sustained by respective agencies.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12 (a)	Clark County Office of the Coroner/Medical Examiner (CCOCME)	Clark County	John Fudenberg
12(b)			
12(c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

After the reviews, revisions, trainings, and updates are made each local and/or state agency and NGO will self-sustain training and plans after the life of this grant. Existing MF response plans will be maintained by each respective agency after the life of this grant. The expectation is that each participating agency would conduct internal training and exercises in order to maintain proficiency. The state and local entities will coordinate a bi-annual statewide exercise in order to maintain statewide response CCOCME will require additional funding to conduct annual tabletop and/or field exercises to exercise the updated plan and to sustain a measurable level of preparedness with CCCOCME staff and Clark County/State stakeholders.

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

0%	100%
Statewide	Urban Area
(SHSP)	(UASI)

FIELD IS LIMITED TO VISIBLE TEXT BOX

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: PPP
Date Submitted 5/16/19

PROJECT TITLE REFERENCE:

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]			
	LV-UASI	State-wide	SubTotal
Increased planning budget will include that the contractor/plans writer to facilitate workshops to develop the recommendations to the CCOCME MF response plan and to provide a comprehensive review with respective agencies and related literature to focus on various scenarios, and input from subject matter experts. The mass fatality management workshops would include a working group of operational and technical experts from local, state, and federal agencies to ensure practices are broad-based and identifiable/usable by most jurisdictions. Working groups would include representatives from area law enforcement, fire department, SNHD/public health, personnel, Funeral Homes, emergency managers, disaster consultants.)		\$ 11,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Funding previously requested for FFY19 HSGP project W proposal.			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Not expected to use funding for any organization.	1	State-wide	Jubiotai
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	Cb.T.a.t.a.l
	T	State-wide	SubTotal
·	\$ 0.00	State-wide	\$ 0.00
Funding previously requested for FFY19 HSGP project W proposal. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]		State-wide	
Funding previously requested for FFY19 HSGP project W proposal.	\$ 0.00		\$ 0.00
Funding previously requested for FFY19 HSGP project W proposal. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Funding previously requested for FFY19 HSGP project W proposal.	\$ 0.00		\$ 0.00 SubTotal
Funding previously requested for FFY19 HSGP project W proposal. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	\$ 0.00	State-wide	\$ 0.00 SubTotal \$ 0.00
Funding previously requested for FFY19 HSGP project W proposal. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Funding previously requested for FFY19 HSGP project W proposal. 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	\$ 0.00	State-wide	\$ 0.00 SubTotal \$ 0.00

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID:

Date Submitted

PPP 5/16/19

PROJECT TITLE REFERENCE:

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Funding approval	07/01/19	09/01/19	2
3	Hire Project Manager/Plans Writer	09/01/19	10/01/19	2
4	Project Manager/Plans Writer to facilitate workshops	06/01/19	06/01/21	24
5	Complete the final grant report	06/01/19	06/01/21	24
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

During a terrorist or other mass causality/fatality incident, the revised CCOCME Mass Fatality Management Plan, with emphasis to planned exercises, will increase the effectiveness and preparedness of CCOCME and Clark County stakeholders. Exercising of the plan will increase the CCOCME core capability to respond to mass fatality incidents ranging from natural to man made disasters, which will provide sustainable services during a prolonged and complex recovery period. LV Strip had highest NYE terror threat level ("Sear 1") in nation after 1 Oct. Project would increase community preparedness to ensure increased capability to communicate, collaborate, and exchange information with the State, Local and Federal partners is crucial component of managing the event in an effort to deter, detect, protect citizens and visitors to Clark County.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project aligns with the State Resilience Commission identified "Recovery" as a Strategic Capacity, under which the Core Capability of Fatality Management specifically falls. The CCOCME Mass Fatality Management Plan plan update will also align with the county's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

These costs are limited to the essential aspects to adequately review, revise and update the CCOCME Mass Fatality Management response plan, with emphasis to panning and exercising the completed plan. Any reductions in funding would impact our ability to exercise the plan effectively with regard to deploying a full scale disaster portable morgue unit (DPMU).

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Date Submitted

PPP 5/16/19

PROJECT TITLE REFERENCE:

and "e" are limitied to visible text box

<u>"</u>0"

Mass Fatality Preparedness and Revise Mass Fatality Management Plan

d. Can this project continue without funding? YES NO Explain below.

After the reviews, revisions, trainings, and updates are made to the CCOCME MFMP, CCOCME and each local and/or state agency will self-sustain training and plans after the life of this grant. There was no corresponding budget for semi-annual status meetings for planned training with state oversight and the major community stakeholders and local multi-jurisdictional participants. Costs associated with such meetings, most likely at a government building or office environment, shows that no real costs with exception to travel for the participants is realistically expected. Most if not all materials can be delivered electronically, so the budget will be based on further planned exercises to be determined after completion of CCOCME MF revisions, tabletop exercise/full scale exercise and associated training costs: however, we anticipate a future funding stream will be acquired from SHSP or combined funding from UASI and SHSP grants.

e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below.

Mass fatality incidents of a large size almost always require a federal response, to include federal DMORT response in coordination with state mass fatality and NGO (Red Cross, private mortuaries, etc.) responders. The CCOCME MF plan is a statewide function, beyond a local government plan. It is designed to benefit the State of Nevada and enable an effective response, statewide, in times of crisis, and requires just as much operational coordination under an EOC, if not more, than other agencies that unquestionably fall under this and other priorities. We contend it would be detrimental to the state not to maintain the alliance, coordination, and effectiveness of these mass fatality response agencies to allow another cycle to pass without testing the Mass Fatality Preparedness response on a state wide level.

- 18) THIRA COMPLETION Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:
 - YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
 - NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- 19) ADDITIONAL COMMENTARY Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

CCOCME provides fatality management services, including decedent remains recovery and victim identification, working with local, state, tribal, territorial, insular area, and federal authorities to provide mortuary processes, temporary storage or permanent internment solutions, sharing information with mass care services for the purpose of reunifying family members and caregivers with missing persons/remains. A revised CCOCME Mass Fatality Management Plan (MFMP) will ensure that CCOCME can effectively respond and provide services during a mass fatality incident (MFI). A MFI occurs when the number and/or condition of human remains that must be managed during a response to an incident challenges local fatality management capabilities to the point that additional assistance is required to perform remains recovery, morgue services, and disposition of victims. Such high-consequence incidents are likely to occur with little or no warning and will require utilization of resources and procedures that go beyond those employed in day-to-day response.

Revising and exercising the CCOCME MFMP would provide clearer, practical guidance for responding to such incidents and to improve the sustainability of a prolonged recovery. The plan will be a step-by-step guide to the actions that need to be taken to respond to a MFI to reduce vulnerability to Clark County and the State of Nevada from increased preparedness. This guide can be used as a checklist to lead officials through the process from the time of initial notification to the return to normal operations. References within the CCOCME MFMP will provide additional information that clarifies and expands upon the required actions and resources required. Mass Fatality Preparedness is the Core Capability for CCOCME and the State Resilience Commission identified "Recovery" as a Strategic Capacity, under which the Core Capability of Fatality Management specifically falls. Fatality Management is also listed under the Strategic Capacity of Planning. The plan update will align with the Clark County's upcoming (in process) updates to the Emergency Operations Plan and Annexes, MCI Plan and FAC plan.

After the reviews, revisions, trainings, and updates are made to the CCOCME MFMP, CCOCME and each local and/or state agency will self-sustain training and plans after the life of this grant. The CCOCME MF response plan will be maintained by this agency after the life of this grant. The expectation is that CCOCME will conduct internal training and exercises in order to maintain proficiency. The facilitated workshops will assist with developing increased recommendations to the CCOCME MF response plan and to provide a comprehensive review with respective agencies and related literature to focus on various scenarios, and input from subject matter experts. The mass fatality management workshops would include a working group of operational and technical experts from local, state, and federal agencies to ensure practices are broad-based and identifiable/usable by most jurisdictions. Working groups would include representatives from area law enforcement, fire department, SNHD/public health, personnel, Funeral Homes, emergency managers, disaster consultants.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LII1L	II EWI DE I AIL	DODOLI						
	Agency Name	Clark County Coroner/Medical Examine				Grant Manager Name & Contact #		David Mills, Coroner Investigative Forensic Supervisor 02-455-0852				
	IJ TITLE:	Mass Fatality Preparedness - Project proposal	PPP									
	Project ID: PPP	One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		A Project Manager/Plans Writer will be contracted under Organization. It is not anticipated that any staff will be hired under Personnel for this project.						\$ -				
2		<u> </u>						\$ -				
4								\$ -				
	Personnel Sub-Total							\$ -				
DEDCOM	IEL COCT MADD ATIVE DECLIDED	SEOD EACH LINE ITEM ABOVE - DLEASE EVELAINE IN	DETAIL THE DOCITIONS AND I	SELIVED ADJECT	LADDATIVE MULT	DE LICED TO ENCUDE ITEMO LI	CTED WILL DE COL	ADJUSTED IN THE	ODANIT OVOLE	ITEMS MAY NOT	DE BURGHACER OF	TOIDE THE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Cost	Strategic		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		None.						\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			·

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED, ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
		Not expected to use funding for any organization.										
1									-			
2									-			
3									-			
4									-			
5									-			
	Travel Sub-Total	D EACH LINE ITEM ABOVE - DI EASE EVELAINE IN DET										

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		Contractor/plans writer to facilitate workshops (up to 5) to develop the recommendations to the CCOCME MF response plan and to provide a comprehensive review with respective agencies and related literature to focus on various scenarios, and input from subject matter experts. The mass fatality management workshops would include a working group of operational and technical experts from local, state, and federal agencies to ensure practices are broad-based and identifiable/usable by most jurisdictions. Working groups would include representatives from CCOCME staff, area law enforcement, fire department, SNHD/public health, personnel, Funeral Homes, emergency managers, disaster consultants.	Maintain	UASI	1	11,000.00	11,000.00	Planning - Mass Fatality	Fatality Management Services	UASI
28							-			UASI
29							-			UASI
30	51						-			UASI
	Planning Sub-Total						\$ 11,000.00			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.									
		Funding previously requested for FFY19 HSGP projecW proposal.									
1								\$ -			
2			·			-		\$ -			
3								\$ -			
	Organization Sub-Total				·			\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
40		None.					\$ -				
41			·				\$ -				
42			·				\$ -				
	EQUIPMENT Sub-Total						\$ -				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
50		curement / See 2nd tab to determine whether lect requires EHP Screening									¢	
30		Funding previously requested for FFY19 HSGP project W proposal.									\$ -	
											\$ -	
<u> </u>											\$ -	
2											\$ - \$ -	
3											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58		Funding previously requested for FFY19 HSGP project W proposal.	· · · · · · · · · · · · · · · · · · ·								\$ -	UASI
#REF!											\$ -	UASI
#REF!											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	11 000 00	

FFY 2019 HSGP PROJECT SUBMISSIONS WITHDRAWN PROJECTS

[SHSP-Only AND UASI-Only]

Project ID	Funding Stream	Project Title
Υ	SHSP	Cyber Tool Tracking System
z	UASI	ARMOR CBRNE Response - New Competitive
LL	SHSP	Electronic Access and Identity Verification System
FF	UASI	LVMPD TASS TRV
AAA	UASI	ARMOR CBRNE Response - New Competitive
MMM	UASI	School-based Emergency Medical Response: Bleeding Control Stations (EMR B-ConS)
NNN	UASI	UNLV Explosive Detecting Canine Units

	stration dvisor Email: daxtell@admin.nv.gov Email: scal Analyst Email: mlynn@admin.nv.gov Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project in a summary statement. Projects in this category must align with NCHS FY16-18 projects in this category must align	Choose of vears; OR oriorities. uantify the capability r CAPABILITIES [considerication of the D TO VISIBLE TEXT B] uld be to:		
PROJECT TITLE: PROPOSING/LEAD AGENCY: Project Manager Name/Title: Project Manager Contact Info: Addl Project Manager Contact Info: Addl Project Manager Contact Info: Finance/Grant Contact Name/Title: Michele Lynn, EITS Finance/Grant Contact Info: Finance/Grant Contact Info: CLASSIFICATION - Check the primary intention of the NEW* Project is NEW [No grant-funded projects have the project has been funded in the past. All project has been funded in the past. All project be the desired outcome goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, evaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (Identify the geographic locale; example: sta To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficancy; Increase knowledge base of tool use; Increase knowledge base of tool use; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Management Capabilities to Core Capabilities here: https://fema.gov/co	stration dvisor Email: daxtell@admin.nv.gov Email: scal Analyst Email: mlynn@admin.nv.gov Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project in a summary statement. Projects in this category must align with NCHS FY16-18 projects in this category must align	uantify the capability r CAPABILITIES [conspeciaries of the D TO VISIBLE TEXT B		
Project Manager Name/Title: Project Manager Contact Info: Addl Project Manager Contact Info: Addl Project Manager Contact Info: Phone: (775) 684-582 Addl Project Manager Contact Info: Michele Lynn, EITS Firmance/Grant Contact Name/Title: Phone: (775) 684-470 CLASSIFICATION - Check the primary intention of the NEW* Project is NEW [No grant-funded projects have the project has been funded in the past. All project will MAINTAIN AN APPROVED FFY19 *All NEW projects are competitive PROJECT OUTCOME - Describe the goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, evaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (identify the geographic locale; example: sta To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Management Capability. Reference the Federal Emergency Management Capabilities to Core Capabilities here: https://fema.gov/ca	Email: daxtell@admin.nv.gov Email: scal Analyst Email: mlynn@admin.nv.gov Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project: Proposed Project in a summary statement. Proposed Project in a summary	uantify the capability r CAPABILITIES [conspeciaries of the D TO VISIBLE TEXT B		
Project Manager Contact Info: Addl Project Manager Name/Title: Addl Project Manager Contact Info: Finance/Grant Contact Name/Title: Michele Lynn, EITS Finance/Grant Contact Info: Phone: (775) 684-470 CLASSIFICATION - Check the primary intention of the NEW* Project is NEW [No grant-funded projects had the project has been funded in the past. All project will MAINTAIN AN APPROVED FFY19 *All NEW projects are competitive PROJECT OUTCOME - Describe the goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, evaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (identify the geographic locale; example: sta) To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Managemee Capabilities to Core Capabilities here: https://fema.gov/ca	Email: daxtell@admin.nv.gov Email:	uantify the capability r CAPABILITIES [conspeciaries of the D TO VISIBLE TEXT B		
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Project is NEW [No grant-funded projects have the project has been funded in the past. All past.	Proposed Project: The recently addressed this capability within the past five of the rojects in this category must align with NCHS FY16-18 posterior in this category must align with NCHS FY16-18 posterior in this category must align with NCHS FY16-18 posterior in the rojects in this category must align with NCHS FY16-18 posterior in this category must align with	uantify the capability r CAPABILITIES [conspeciaries of the D TO VISIBLE TEXT B		
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*All NEW projects are competitive PROJECT OUTCOME - Describe the goal of the Proposeribe the desired outcome goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, exaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (identify the geographic locale; example: sta To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase knowledge base of tool use; Increase knowledge base of tool use; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system.	rojects in this category must align with NCHS FY16-18 projects in this category must align with NCHS FY16-18 prospect in a summary statement. OF CAPABILITY. The statement should describe HOW MUCH [quipand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or 8 priorities (See #10)]; FOR WHO (identify the direct users/ber e-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITE	uantify the capability r CAPABILITIES [conspecial conspecial All NEW projects are competitive PROJECT OUTCOME - Describe the goal of the Proposed Describe the desired outcome goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, exaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (identify the geographic locale; example: stated To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase knowledge base of tool use; Improve cybersecurity infrastructure planning; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Management Capabilities to Core Capabilities here: https://fema.gov/ca	osed Project in a summary statement. of CAPABILITY. The statement should describe HOW MUCH [que pand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or 8 priorities (See #10)]; FOR WHO (identify the direct users/ber e-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITE.	r CAPABILITIES [cons neficiaries of the D TO VISIBLE TEXT B uld be to:
PROJECT OUTCOME - Describe the goal of the Proposed Describe the desired outcome goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, exaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and WHERE (identify the geographic locale; example: stated To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase knowledge base of tool use; Improve cybersecurity infrastructure planning; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Management Capabilities to Core Capabilities here: https://fema.gov/ca	of CAPABILITY. The statement should describe HOW MUCH [que pand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or 8 priorities (See #10)]; FOR WHO (identify the direct users/ber e-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITE .	r CAPABILITIES [cons neficiaries of the D TO VISIBLE TEXT B uld be to:		
Describe the desired outcome goal of the Proposed Project in terms improvement at a high level; for example: "To (establish, improve, evaligning with Nevada Commission on Homeland Security (NCHS) FFY capability); and where (identify the geographic locale; example: sta) To improve the core competencies in cybersecurity. The Eliminate spend on poor tools; Capture tool efficacy; Identify real-world tool performance; Identify efficiencies of tool use; Increase knowledge base of tool use; Improve cybersecurity infrastructure planning; Increase operational coordination; and, Create a cyber tool community to share information. The Cyber tool assessment and tracking is designed to security management system. PROPOSED STRATEGIC CAPACITY - Identify by name capability. Reference the Federal Emergency Management Capabilities to Core Capabilities here: <a co<="" fema.gov="" href="https://fema.gov/capabilities/https://fem</td><td>of CAPABILITY. The statement should describe HOW MUCH [que pand, double, sustain, etc.)]; OF WHAT CORE CAPABILITY (or 8 priorities (See #10)]; FOR WHO (identify the direct users/bere-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITE.</td><td>r CAPABILITIES [cons
neficiaries of the
D TO VISIBLE TEXT B
uld be to:</td></tr><tr><th>capability. Reference the Federal Emergency Manageme Capabilities to Core Capabilities here: <th>identify state cybersecurity tools and is the first par</th><th></th>	identify state cybersecurity tools and is the first par			
	nt Agency (FEMA) list of Core Capabilities and the Cr ore-capabilities / https://www.fema.gov/pdf/prepared	osswalk of Targe		
HSGP Project Type Supporting Strategic Capacity: Threat Ide				
	CURITY [Mission Area - PROT]			
Core Capability aligned with Maintained Project: Please ch	pose the core capability that aligns with your MAINTAINE	D project		
*FFY19 Strategic Capacities are subject to change pending N FFY19 Homeland Security Grant Program guidance per the N		3/26/19 and/or		
STRATEGIC CAPACITY JUSTIFICATION - Describe has justification of this project's alignment with the strategic capacity to				

This project aligns directly with the Threat Identification(CYBERSECURITY) Strategic Capacity. Its focus is on providing proper tool tacking to improve infrastructure planning. This will have a direct, positive effect on their ability to protect the State's critical technology infrastructure against online, cyber terrorism, malicious interference, and targeted disruption of service.

Nev	ada F	Homeland Sec	urity	/ Grant Progr	am (HSGP) RES	SUBMISSION	PROJECT ID:	Υ
Pro	ject P	roposal for FF	Y19	HSGP Fundir	g Description		Date Submitted	4/27/19
PRO	JECT T	ITLE REFERENCE	:	Cyber Tool Track	ing System			
10)	PROC	UREMENT - <i>Indica</i>	ite th	e method of pro	curement associat	ed with this proj	iect:	
	Re	quest for Proposal	Pro	vide a brief expland	ition on your method o	f procurement - FIE	LD IS LIMITED TO VISIE	BLE TEXT BOX:
	O Sol	e Source	procu	rement using RFP	process will take place	ce.		
	O Int	ernal						
11)	PROJE	CT IMPLEMENTA	TION	- Describe how, a	nd by whom, the Pro	posed Project will	<i>be implemented.</i> De	scribe
		· · · · · · · · · · · · · · · · · · ·			ished, identifying who (i.e.			
FIELD IS LIMITED TO VISIBLE TEXT BOX	cybers Data t Tool Tool Tool Num Cost Succ Chal Ease Trair Ease	security assets withing type; footprint; name; ber of tool users; of the tool; tess stories directly relenges, gaps, or failure of use of the tool; and needed to become of management/coly rating of the tool (ingration with other tool)	n the silinclud	etate. If to the implementation of the tool; In the tool	;			Security over
12)			us WF	IO will be receiving	e participating agence og the money for you Political Jurisdiction (City,	ur project - If it's y		ncy]
	12 (a)	State of Nevada Ag	encies	3	State of Nevada		Axtell, Enterprise IT of Nevada	
	12 (b)							
	12 (c)							
13)	SUSTA	AINMENT - Identify	any c	continuing financial	obligation created by	the Project, and p	roposed funding solu	tion
FIELD IS LIMITED TO VISIBLE TEXT BOX					ng budget session as n the subsequent bier		s project will depend	on the
14)					t's funding percentage 15g - PROJECT TOTALS'		de -vs- UASI is noted k	pelow for
	1	00% 0%						

Statewide Urban Area

(UASI)

(SHSP)

Nevada Homeland Security Grant Program (HSGP) RESUBMISSION
Project Proposal for FFY19 HSGP Funding Description

PROJECT TITLE REFERENCE:

Cyber Tool Tracking System

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
Toby Organization [Establishment of organization, structure, reduceship, and operation]	EV GAG.	otate mae	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
This system would be created in a Platform as a Service (PaaS.) The cloud platform would be vendor provided as off the shelf software exists for the Cyber Tool Tracking System.		\$ 50,000.00	\$ 50,000.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
DOLLERO IF CLETO LALA			

Nevada Homeland Security Grant Program (HSGP) **RESUBMISSION**Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Y

Date Submitted 4/27/19

PROJECT TITLE REFERENCE:

Cyber Tool Tracking System

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE I	LIMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Grant award acceptance and approvals	09/03/19	11/08/19	3
3	Conduct Compliant Procurement Process	11/18/19	12/18/19	1
4	Create implementation process, procedures, and reporting mechanism	01/06/20	01/31/20	1
5	Implement data collection with state agencies, to be ongoing process	02/03/20	04/30/20	3
6	Set reporting process	05/04/20	06/30/20	2
7	Run data collection and reporting	06/30/20	05/28/21	12
8	Evaluate results	06/01/21	06/30/21	1
9	Close out the Grant	07/01/21	07/30/21	1
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Yes, the Cyber Tool Tracking System project has a nexus to terrorism. The highly damaging cyber based attacks or threats-of- attack against information systems may be made for a number of causes, to intimidate or coerce governments in pursuit of nefarious goals, converging terrorism with cyberspace with devastating results. The cyber tool tracking system is to protect state systems.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

Yes, the Cyber Tool Tracking System project has directly aligned with the Nevada Commission on Homeland Security FY19 Priorities . The Nevada Commission on Homeland Security FY19 Priorities identified Cybersecurity as a Core Capability. threat identification[CYBERSECURITY] was identified as a strategic supporting capacity.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The amount is scalable and negotiable. The amount may be able to be reduced.

	,	Grant Program (HSGP) RESUBMISS I	ON	PROJECT ID:	Υ
ect F	Proposal for FFY19	HSGP Funding Description		Date Submitted	4/27/19
ECT 1	TITLE REFERENCE:	Cyber Tool Tracking System			
d.	Can this project continue wi	thout funding? YES 💿 NO 🔵 Explain below.			
Yes, t	the project may be-possible	to continue to sustain the project through billing the	allowa	ble units.	
e.	Does this project provide a I	MEASUREABLE statewide benefit? YES NO	() E)	plain below.	
safety would	v state and the local particip I track cyber-security tools u	ants. All law enforcement benefits from the State's sused by all executive branch entities, boards, and cor	ecure	infrastructure. The ap	plication
THIR	A COMPLETION - Please	indicate the participation level in completing the 2	201 8 T	HIRA Survey. CHOO	SE ONE:
	YES - Agency HAS partici	pated in the 2018 Threat and Hazard Identification	Risk A	ssessment (THIRA) So	urvey
	NO - Agency has NOT pa	rticipated in the 2018 Threat and Hazard Identificat	ion Ri	sk Assessment (THIR	A) Survey
		- Please indicate any additional project comment	ary yo	u feel may be impor	tant. Field is
state syste	wide OIS tools to help unify ms within its scope. The go	the cyber-tool landscape. The tracking must have a al of the Cyber Tool Tracking System is to extract the	statew e maxi	vide focus that include mum value from all c	es all the sybersecurity
	e. Yes, 1 Yes, 1 THIR ADD Ilmite The a states	e. Does this project continue wi Yes, the project may be-possible Pes, measurable advantages to safety state and the local particip would track cyber-security tools to help unify the cyber-tool landso THIRA COMPLETION - Please VES - Agency HAS particip NO - Agency has NOT participe NO - Agency has NOT	d. Can this project continue without funding? YES NO Explain below. Yes, the project may be-possible to continue to sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain the project through billing the sustain t	d. Can this project continue without funding? YES NO Explain below. Yes, the project may be-possible to continue to sustain the project through billing the allowards, the project may be-possible to continue to sustain the project through billing the allowards. Yes, measurable advantages to State, County and Cities' users are of state-wide benefit. Usafety state and the local participants. All law enforcement benefits from the State's secure would track cyber-security tools used by all executive branch entities, boards, and commiss to help unify the cyber-tool landscape. THIRA COMPLETION - Please indicate the participation level in completing the 2018 To a Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Agency has Not participated in the 2018 Threat and Hazard Identification Risk As NO - Age	d. Can this project continue without funding? YES NO Explain below. Yes, the project may be-possible to continue to sustain the project through billing the allowable units. 6. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below. Yes, measurable advantages to State, County and Cities' users are of state-wide benefit. Users, state-wide, inclusafety state and the local participants. All law enforcement benefits from the State's secure infrastructure. The apwould track cyber-security tools used by all executive branch entities, boards, and commissions as well as state to help unify the cyber-tool landscape. THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOO YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey. NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be import

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	IEM DETAIL	BUDGET						
	Agency Name	Nevada Department of Administration, CIO	Project Manager Name & Contact #	Dave Axtell Architect, 7'	,	Grant Manager Name & Contact #	Alisanne Ma 685-5855	ffei, 775-				Y
	IJ TITLE:	Cyber Tool Tracking System										
		One Budget Per Funding Stream										
		SHSP										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1		n/a						\$ -				
2								\$ -				<u> </u>
3							1	\$ -				
4	Personnel Sub-Total							\$ -				
				•			•			•	•	

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5		n/a						\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Requested Funding Source
	Travel Planning Training	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-		
9		n/a							-		
10									-		
11									-		
	Travel Sub-Total								-		

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27		n/a				-	-			
28						-	-			
29							-			
30							-			
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36		n/a	·		-	-	\$ -			
37			·				\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether oject requires EHP Screening									
40		Inventory Security Asset Software for Secuirty Asset Tracking and Management	New / Enhance / Past / Competitive		1.00	50,000.00	\$ 50,000.00	Cyber - Threat Identification		04AP-07-INVN Software, Equipment Tracking and Inventory	SHSP
41							\$ -				
42							\$ -				
43							\$ -				
	EQUIPMENT Sub-Total						\$ 50,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Cybersecurity software assets tracking for better risk management will in turn provide enhanced cost management for improved decision making. *Cyber tool assessment and tracking is designed to identify state cybersecurity tools and is the first part of a chain in the security management system; AEL# 04AP-07-INVN - Software, Equipment Tracking and Inventory. Collaboration with state entities to improve security over cybersecurity assets. The goal of the Cyber Tool Tracking System is to extract the maximum value from all cybersecurity assets and as input in future planning and decision making.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						1				
	EHP Required prior to pre	ocurement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51		n/a									\$ -	
52											\$ -	
53											\$ -	
54			·			·					\$ -	
55			·			·					\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	TOTAL	Requested Funding Source
		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)									
	EHP Required prior to pr	ocurement / See 2nd tab to determine whether									
57	your pro	eject requires EHP Screening									
58		n/a								\$ -	
59										\$ -	
60										\$ -	
61										\$ -	
	Exercise Sub- Total									\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total Request	\$ 50,000,00	

Nevada Homeland	l Secu	r <mark>ity Grant</mark> Pr	ogram (HSGP)	PROJECT ID:	Z				
Project Proposal for	r FFY1	9 HSGP Fund	ling Description	Date Submitted	3/27/19				
1) PROJECT TITLE:	ARMOR	R CBRNE Respon	se - New Competitive						
2) PROPOSING/LEAD AGENCY:	LVMPD	ARMOR							
3) Project Manager Name/Title:	Roger I	Haskins							
Project Manager Contact Info:	Phone:	(702) 271-2325	Email: r5774h@lvmpd.com						
4) Addl Project Manager Name/Title:									
Addl Project Manager Contact Info:	Phone:		Email:						
5) Finance/Grant Contact Name/Title:	inance/Grant Contact Name/Title: Angela Walker								
Finance/Grant Contact Info:	Finance/Grant Contact Info: Phone: (702) 828-8210 Email: a15306w@lvmpd.com								

6) **CLASSIFICATION** - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW MUCH [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The purpose of this grant application is to enhance and expand the ability to provide on-scene protection for robotic operations enabling intelligence collection and surveillance support capabilities to the Tactical teams and ARMOR operators within the Las Vegas Urban Area (LVMPD, HPD, and NLVPD). The platform for robotic operation and transportation requested is specifically designed for robotic operations on events and providing a vehicle that can be utilized transportation and employment of robotic platforms for CBRNE and CCTA surveillance, monitoring and exploitation of potentially hazardous devices and structures.

The robotic platforms employed by the ARMOR unit can be utilized with a variety of tools for location and detection of CBRNE threats compounded with the availability of communications capability to the Operations Center. By expanding the efficiency and effectiveness of this capability within the encompassing security and availability of one vehicle platform, ARMOR will enable rapid deployment capability to a multi-threat environment to provide real-time intelligence and information to Incident Commanders.

This grant will be in support of the Intelligence and Information-sharing Core Capability and Multi-agency Operational Coordination for the All-Hazards Regional Multi-agency Operations and Response (ARMOR) unit within the Las Vegas Urban Area, Clark County, State of NV, and the surrounding regions of the United States.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: Las Vegas ARMOR [CBRN,E] If OTHER, please choose FFY16-18 NCHS Priority: INTELLIGENCE AND INFORMATION SHARING [Mission Areas - PREV/PROT]

Core Capability aligned with Maintained Project: ON-SCENE SECURITY, PROT, AND LAW ENFORCEMENT [Mission Area - RESP]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Within the Core Capability of Intelligence and Information Sharing, the description of the capability is to, "Provide timely, accurate, and actionable information resulting from the planning, direction, collection, exploitation, processing, analysis, production, dissemination, evaluation, and feedback of available information concerning threats to the United States, its people, property, or interests; the development, proliferation, or use of WMDs; or any other matter bearing on U.S. national or homeland security...."

The technological ability of the ARMOR Unit to provide the rapid and accurate detection, identification, and informational dissemination in the response, mitigation, and investigation of CBRNE threats and terrorism events is crucial to the effective and efficient response from local, state, and federal entities. As a multi-agency, state-asset, CBRNE unit, ARMOR provides numerous front-line intelligence collection, exploitation, processing, and analysis capabilities in the area of CBRNE response, identification, and mitigation.

PRO.	IECT T	ITLE REFERENCE	: ARMOR CBR	NE Response - New Compet	tive		
10) PROCUREMENT - Indicate the method of procurement associated with this project:							
	O Re	quest for Proposal	Provide a brief exp	lanation on your method of pro	ocurement - FIELD IS LIMITED TO VISIBLE TEXT BO	X:	
	SoInt	le Source ernal	The capabilities, sustainment, and maintenance of the requested equipment will be maximized by contracting the purchase from the vendor currently utilized by LVMPD for the supply of vehicles of similar design and specifications.				
11)	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work						
	Upon confirmation of the grant award, LVMPD/ARMOR will employ Federal Purchasing Guidelines for the procurent equipment based upon criteria set forth for Grant Funded purchases set to be enacted in July 1, 2017.						
FIELD IS LIMITED TO VISIBLE TEXT BOX							
	-		us WHO will be receiving the money for your proj (FD, PD, etc.) Political Jurisdiction (City, County, St				
	12(a)	LVMPD		Clark County	Roger Haskins		
	12(b)						
	12(c)						
13)	SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution						
FIELD IS LIMITED TO VISIBLE TEXT BOX	None.	The consumables	utilized by the equipm	ent under consideration will b	e handled by LVMPD.		
14)	STATI	FWIDE and/or UA	SI RENEEIT - Vous no	oiect's funding percentage ma	voun of Statewide Just 11ASI is noted helpy for		

O% 100% Urban Area (SHSP) (UASI)

your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Z

Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

ARMOR CBRNE Response - New Competitive

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
This proposal in for the procurement of a specialized CBRNE response vehicle for the ARMOR unit that can be utilized for operations, investigations, and mitigation of high-risk events of CBRNE or terrorism.			
	\$ 400,000.00		\$ 400,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
	LV-UASI	State-wide	SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV OASI		
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY19 HSGP Funding Description

PROJECT ID: Z

Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

ARMOR CBRNE Response - New Competitive

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Prepare Bidding criteria and receive responses per Federal Guidelines	09/01/19	12/01/19	3
3	Vendor and Equipment selection based upon response	12/01/19	02/01/20	3
4	Purchasing contracts and securing with vendors	02/01/20	02/01/21	12
5	Receive, training, and Implementation	02/01/21	06/01/21	4
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

As the multi-agency Law Enforcement section for the CBRNE events ARMOR Section responds and investigates all CBRNE related-events that are criminal in nature within Clark County and Southern NV. In responding to WMD and CCTA events, the ARMOR unit will play a crucial role in successful mitigation. The capability of the ARMOR section will have a direct correlation upon the ability of CBRNE counter-terrorism operations, investigations, and response in the state of NV.

b. Does this project align with the FFY19 strategic capacities? YES NO NO Explain below.

As a multi-agency, multi-discipline, state-response entity which supports agencies throughout the Las Vegas Urban Area, the furtherance of quick and accurate CBRNE location, detection, and identification is crucial to the Intelligence and Information Sharing Core Capability of the state. In providing the necessary information and intelligence to the federal, state, local, and private stakeholders, ARMOR can provide timely intelligence and Information Sharing of the diverse and technologically-advanced response in concerted effort for the mitigation of hazards.

c. Can this project funding request be reduced? Is it scaleable? YES NO (Explain below.

The securing of equipment requested requires a one-time purchase of the packaged equipment and cannot be purchased in smaller portions.

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY19 HSGP Funding Description PROJECT ID: Z Date Submitted 3/27/19

	Project Proposal for FFY19 HSGP Funding Description Date Submitted 3/27/19							
PROJECT TITLE REFERENCE: ARMOR CBRNE Response - New Competitive								
	d. Can this project continue without funding? YES NO Explain below.							
Fields "d" and "e" are limitied to visible text box size	This project was attempted to be realized through a variety of other options and programs. In attempting to limit the financial impact of this request from DHS funding, we have evaluated and rejected the donation of specialized vehicles from community businesses, securing similar vehicle through Defense Logistics Agency, and refurbishing vehicles which had reached the end of service life from agencies in the surrounding community. Each of the evaluated options presented greater financial and effectiveness obstacles that were insurmountable for the need.							
nitie	e. Does this project provide a MEASUREABLE statewide benefit? YES NO Explain below.							
Fields "d" and "e" are lii	The ARMOR Task Force is a long-recognized regional asset providing service for response, identification, intelligence, investigation, and analysis to the Southern NV Region, state-wide events, and adjoining areas. In recent years, ARMOR has responded to requests for assistance from numerous agencies throughout the Southern NV Region which exceed the available resources of the local agencies. LVMPD has a history of assisting multiple jurisdictions throughout the region as Subject Matter Experts and technical support in the area of CBRNE response, investigations, and evidentiary analysis.							
18)	THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. <u>CHOOSE ONE</u> :							
	YES - Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey							
	NO - Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) S					A) Survey		
19)	ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box					tant. Field is		

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUIDGET

				LINE	IEWIDETAIL	DUDGET					
	Agency Name	LVMPD ARMOR	Project Manager Name & Contact #	Roger Hask 2325	ins 702-271-	Grant Manager Name & Contact #	Angela Walk	ter 702-828-	8210		Z
	IJ TITLE:	ARMOR CBRNE Response - New Comp	etitive								
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3								\$ -			
4	Personnel Sub Total							S -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								s -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

_ine #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				-		-			
9									-			
10									-			
11									-			
12									-			+
13 14									-			+
15									-			+
16												1
17									-			1
18									-			1
19									-			
20									-			
21									-			
22									-			+
23									-			+
24 25									-			+
26												+
27												+
	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #		PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability		Requested Funding Source
		DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-			1	
28						-	-			i .	
29							-			1	
30							-			<u> </u>	
31							-			<u> </u>	
32										<u> </u>	
33										<u> </u>	
34							-			<u> </u>	
35										<u> </u>	
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37							\$ -			
38					-		\$ -			
39							\$ -			
	Organization Sub-Total						S -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ect requires EHP Screening									
40		Specialty CBRNE Response Vehicle	New / Enhance / Past / Competitive		1.00	400,000.00	\$ 400,000.00	CBRNE - LVMPD ARMOR	On-scene Security and Protection	12VE-00-MISS	UASI
41							\$ -				
42						-	<u>s</u> -				
43 44							s -				
45				1			s -				
46							\$ -				
47							s -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 400,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Due to the increased risks of the utilization of WMD and CBRNE materials in the event of a complex coordinated attacks, the ability to ensure the safe transportation, deployment and operation of remotely operated platforms (ROPs = Robots, sUAS, etc) into a variety of environments and high-risk events is critical. Recent events have expedited the need for a suitable vehicle for the rapid deployment capability that is sufficient for high-threat environments while allowing to minimize the distance for maximum platform coverage.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ect requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56			The state of the s								\$ -	
	Training Sub-Total										s -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/IASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			·								\$ -	
60			·								\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

				Budget Total		
				Request	\$ 400,000.00	1

	Nevada Homeland	Security	Grant Pr	ogram (HSGP)	PROJECT ID:	FF
	Project Proposal for	FFY19 H	SGP Fund	ling Description	Date Submitted	3/27/19
L)	PROJECT TITLE:	LVMPD TAS	SS TRV			
2)	PROPOSING/LEAD AGENCY:	LVMPD				
3)	Project Manager Name/Title:	Brad Cupp/S	Sergeant			
	Project Manager Contact Info:	Phone: (702	2) 828-4455	Email: b8104c@lvmpd.com		
1)	Addl Project Manager Name/Title:	Rachel Skid	more / Emerg	gency Manager		
	Addl Project Manager Contact Info:	Phone: (702	2) 828-2257	Email: r14590s@lvmpd.com		
5)	Finance/Grant Contact Name/Title:	Joni Prucnal	, Director of F	inance		
	Finance/Grant Contact Info:	Phone: (702	2) 828-8267	Email: J13700P@LVMPD.C0	OM	
5)	CLASSIFICATION - Check the pr	rimary intent	tion of the Pr	oposed Project:		Choose one:
			-	ecently addressed this capability ects in this category must align w		_
	MAINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 STI	RATEGIC CAPACITY*		0
	*All NEW projects are competitive					
	capability); and <u>WHERE</u> (identify the geo		<u> </u>			
3)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities h	Emergency N	/lanagement /	Agency (FEMA) list of Core Cap	abilities and the Crosswa	lk of Target
	FFY19 Strategic Capacity Maintai	ined*:	Not Applicable	е		
	HSGP Project Type Supporting Strat			•	•	
	If OTHER, please choose FFY16-18 I	,		AL COMMUNICATIONS [Mission	Area - RESPJ	
	Core Capability aligned with Mainta					
	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro					
)	STRATEGIC CAPACITY JUSTIF justification of this project's alignment of the strategies of the strategie		Jacquiba bass	ce of running opportunity when		19 and/or
	This project provides the capabil			this project aligns with the		en. Describe the
	another command post in real-tir situational awareness and real-ti	me. This capa	c capacity to be rideo feeds fro ability current	this project aligns with the maintained. If it does not, please just om disparate systems such astly doesn't exist in southern N	stify. FIELD IS LIMITED TO VI	P. Describe the SIBLE TEXT BOX.
		me. This capa	c capacity to be rideo feeds fro ability current	this project aligns with the maintained. If it does not, please just om disparate systems such astly doesn't exist in southern N	stify. FIELD IS LIMITED TO VI	P. Describe the SIBLE TEXT BOX.
		me. This capa	c capacity to be rideo feeds fro ability current	this project aligns with the maintained. If it does not, please just om disparate systems such astly doesn't exist in southern N	stify. FIELD IS LIMITED TO VI	P. Describe the SIBLE TEXT BOX.

O% 100% Statewide Urban Area (SHSP) (UASI)

PROJECT ID: FF

Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

LVMPD TASS TRV

15c) Equipment (Procurement and installation of equipment, systems, facilities) 15d) Training (Development and delivery of training to perform assigned missions and tasks) 15e) Exercise (Development and execution of exercises to evaluate and improve capabilities) 15f) Personnel (Staff (not contractors) directly implementing project and programmatic capabilities) 15f) Personnel (Staff (not contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities) 15e) Exercise (Development contractors) directly implementing project and programmatic capabilities)	15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
15c) Equipment [Procurement and installation of equipment, systems, facilities] LV-UASI State-wide SubTot S 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000 \$				\$ 0.0
15c) Equipment [Procurement and installation of equipment, systems, facilities] LV-UASI State-wide SubTot	15h) Organization [Establishment of organization structure leadership and operation]	IV-UASI	State-wide	SubTo
TASS TRV \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 300,000.00 \$ 5ubTo \$ 0.00 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] LV-UASI State-wide SubTo \$ 0.00 15f) Personnel [staff (not contractors) directly implementing project and programmatic capability) LV-UASI State-wide SubTo \$ 0.00	Organization [Establishment of organization, structure, leadership, and operation]	1	State Wide	34510
TASS TRV \$ 300,000.00 \$ 300,00				\$ 0.0
TASS TRV \$ 300,000.00 \$ 300,00	15c) Equipment (Procurement and installation of equipment, systems, facilities)	LV-UASI	State-wide	SubTo
15d) Training (Development and delivery of training to perform assigned missions and tasks) LV-UASI State-wide SubTo \$ 0.0 15e) Exercise (Development and execution of exercises to evaluate and improve capabilities) LV-UASI State-wide SubTo \$ 0.0 15f) Personnel (Staff (not contractors) directly implementing project and programmatic capability) LV-UASI State-wide SubTo \$ 0.0 15f) Personnel (Staff (not contractors) directly implementing project and programmatic capability) LV-UASI State-wide SubTo \$ 0.0				
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] LV-UASI State-wide SubTo \$ 0.0 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] LV-UASI State-wide SubTo \$ 0.0		\$ 300,000.00		\$ 300,00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] LV-UASI State-wide SubTo \$ 0.0 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] LV-UASI State-wide SubTo \$ 0.0	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTo
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] LV-UASI State-wide SubTo				\$ 0.0
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] LV-UASI State-wide SubTo \$ 0.0				
\$ 0.0	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTo
\$ 0.0 LV-UASI State-wide TOTA	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTo \$ 0.0
LV-UASI State-wide TOTA				\$ 0.0
ET ONS I STATE WILL TO I				\$ 0.0

PROJECT ID: FF
Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

LVMPD TASS TRV

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	System Design	10/01/19	10/31/19	1
3	Bid Equipment	10/01/19	10/31/19	1
4	Issue Purchasing Request	10/01/19	10/31/19	1
5	Procure Equipment	11/01/19	11/30/19	1
6	Install Equipment	12/01/19	06/30/19	6
7	Equipment Testing	12/01/19	06/30/19	6
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Real-time disparate video footage could play a critical role in a terrorist attack in terms of providing real-time intelligence information back to a command post or the Fusion Center.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project would allow the SNCTC Fusion Center to ingest and monitor the real-time video feeds from assets that are deployed to in the field.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

Failure to build out adequate infrastructure would not provide the coverage area necessary to support the objective of this project.

	Nevada Homelan	d Security Grant Program (HSGP)	PROJECT ID:	FF
	Project Proposal fo	r FFY19 HSGP Funding Description	Date Submitted	3/27/19
PROJ	ECT TITLE REFERENCE:	LVMPD TASS TRV		
	d. Can this project continue w	vithout funding? YES NO (•) Explain below.		
"e" are limitied to visible text box size	There is currently no identified f	funding source for this project.		
nitie	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO	Explain below.	
Fields "d" and "e" are l	Once the equipment is installed	assets can be deployed anywhere in the state to provide	e these capabilities if the	needs arises.
L8)	THIRA COMPLETION - Please	e indicate the participation level in completing the 20.	18 THIRA Survey. <u>CHOC</u>	SE ONE:
	YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIRA) S	urvey
	NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identificatio	n Risk Assessment (THIR	A) Survey
19)	ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentar	y you feel may be impoi	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

				LINE	I EM DE I AIL	BUDGET					
	Agency Name	LVMPD	Project Manager Name & Contact #	Sgt. Brad C 702-828-44	upp 55	Grant Manager Name & Contact #	Joni Prucnal 702 828	8267			FF
	IJ TITLE:	TASS TRV									
		One Budget Per Funding Stream									
		UASI									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3				ļ				\$ -		ļ	
4	Paragnus Sub Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line	# CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								s -			
6								- \$		1	
7								\$ -		i '	
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type				,		-			
9									-			
10									-			
11									-			
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23									-			
24									-			
25									-			
26									-			
27									-			
	Travel Sub-Total	EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL							-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref#	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-	-				
28						-	-				
29							-				
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33			The state of the s				-				
34							-				
35											
	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38					-		s -			
39			•				s -			
	Organization Sub-Total		•				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL is not listed	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL										
		curement / See 2nd tab to determine whether ect requires EHP Screening										
40		TASS Tactical Response Vehicle	New / Enhance / Past / Competitive			1.00	300,000.00	\$ 300,000.00	Operational Coordination	Operational Coordination	12VE-00MISS	UASI
41												
42												
43												
45												
46					_						_	
47												
49	FOLIPMENT Sub-Total							\$ 300,000,00				
46	EQUIPMENT Sub-Total							\$ 300,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

TASS Tactical Response Vehicle.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)										
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
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55						·					s -	
56						·					s -	
	Training Sub-Total										s -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/IASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ject requires EHP Screening										
58											\$ -	
59			•								\$ -	
60			•								\$ -	
61			•								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 300,000.00	

	Nevada Homeland	l Secu	ırity Grant Pr	ogram (HSGP)	PROJECT ID:	LL
	Project Proposal for	FFY1	.9 HSGP Fund	ling Description	Date Submitted	3/27/19
1)	PROJECT TITLE:	Electro	onic Access and Ide	entity Verification System		
2)	PROPOSING/LEAD AGENCY:	BOR o	of NSHE obo Unive	rsity Police Services		
3)	Project Manager Name/Title:	Todd F	Renwick, Interim Di	rector		
	Project Manager Contact Info:	Phone:	(775) 784-4013	Email: trenwick@unr.edu		
4)	Addl Project Manager Name/Title:	Debbie	e Penrod			
	Addl Project Manager Contact Info:	Phone:	(775) 682-7248	Email: debbie@unr.edu		
5)	Finance/Grant Contact Name/Title:	Karim	Hussein, Director o	f Sponsored Projects		
	Finance/Grant Contact Info:	Phone:	(775) 784-4040	Email: ospadmin@unr.edu		

6) **CLASSIFICATION** - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*

*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe HOW MUCH [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal is 100% improvement of access control and identify verification for all persons using facilities at the WNC campuses. The campuses are currently using outdated key and lock systems on all facilities. These cannot be monitored for who is entering and exiting buildings, or when locks are accessed. If keys are lost, expensive and time consuming lock replacement is required. The proposed project would be implemented by an outside contractor such as RFI (who provided the attached quote) and supervised by Police Services and WNC facilities personnel. The College of Western Nevada faces many all-hazard risks as a result of inadequate access and identification controls on its two campuses. As mentioned in the State THIRA and SPR, Nevada has many risks related to weather, earthquake, fire and other natural disasters in addition to threats of terrorism and active shooter style violence that plagues college campuses nationwide. With this request, WNC wishes to prepare for and prevent these challenges from harming persons and facilities who depend on this institution for education, training and as a valuable community resource. By improving access and identification controls, the campuses will be prepared to respond to emergency situations by remote access when needed, monitor and identify persons accessing facilities and gather and retain data for timely public notification in the event of a crisis. All college campuses face risks of acts of terrorism and WNC is no exception. In spite of it's size, it serves a vast area of Nevada including persons traveling from rural areas to access the programs there. With improved controls, the campus will more fully align its infrastructure with Homeland Security goals of improved operational coordination, cybersecurity and physical protective measures.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

Not Applicable

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: ACCESS CONTROL AND IDENTITY VERIFICATION [Mission Areas - PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request will address page 20 of the 2017 Nevada THIRA regarding Access Control and Identify Verification /Impacts and Desired Outcomes. The THIRA lists several negative outcomes related to the lack of adequate access controls and identification systems. All of these risks are currently in place for the Western Nevada College Campuses. Specifically this request wishes to address the Active Shooter and Cyber Attack impacts for this campus. The current locking systems are breach-able and lack appropriate identification controls to prevent physical attacks or terrorism attempts, or protection for vulnerable equipment and intellectual properties. See pages 20 and 21 of the 2017 THIRA

The proposed investment will address the security gaps noted in the THIRA by providing upgraded electronic locking systems which will allow for identification controls, remote access and monitoring and data capture.

PROJECT ID: LL

Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

Electronic Access and Identity Verification System

10) PI	ROCUREMENT	- Indicate the	method of	[:] procurement	associated w	vith this	proiect:
--------	------------	----------------	-----------	--------------------------	--------------	-----------	----------

Request for Proposal

Provide a brief explanation on your method of procurement - FIELD IS LIMITED TO VISIBLE TEXT BOX:

- O Sole Source
- Internal

FIELD IS LIMITED TO VISIBLE TEXT BOX

In the event of a a grant award, the managers of this project will follow all state regulations regarding purchasing including request for proposals from qualified vendors and working with institutional purchasing offices to insure fairness and accuracy in all related work.

11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe

in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work

- 1. Processing of award documents will be done by the University of Nevada Office of Sponsored Projects. Project management, including reporting and account monitoring will be done by the grant manager at Police Services.
- 2. Police Service personnel will meet with WNC personnel to create an RFP for qualified vendors
- 3. Quotes will be accepted and reviewed by the appropriate purchasing and facilities personnel
- 4. Selected contractor will commence work on replacement of locking systems work will be monitored by WNC and Police Services personnel
- 5. Software systems will be installed
- 6. Locking system and software will be tested by WNC personnel
- 7. On site training will take place contractor will train WNC personnel
- 8. Once project is completed and deemed functional by appropriate personnel, WNC will sign off on completion
- 9. Grant progress and financial reporting will be completed by grant manager at Police Services
- 1o. Project will be closed out in communication with DHS to ensure all deliverables and reports are completed

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. [This section is for you to tell us WHO will be receiving the money for your project - If it's you, put in your agency]

	Agency (FD, PD, etc.)	Political Jurisdiction (City, County, State, etc.)	Project Representative (individual)
12(a)	University Police	BOR of NSHE obo University of Nevada	Todd Renwick
12(b)			
12(c)			

13) SUSTAINMENT - Identify any continuing financial obligation created by the Project, and proposed funding solution

It is anticipated that locking system will be functional for many years. In the event of malfunction or needed repairs, the WNC will assume responsibility of maintenance costs, software updates and/or annual licensing fees.

14) STATEWIDE and/or UASI BENEFIT - Your project's funding percentage makeup of Statewide -vs- UASI is noted below for your convenience. This amount is derived from Field '15g - PROJECT TOTALS' on Page #3

100%

FIELD IS LIMITED TO VISIBLE TEXT BOX

0%

Statewide Urban Area
(SHSP) (UASI)

PROJECT ID: LL Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

Electronic Access and Identity Verification System

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Electronic Access, Identity Verification system and bomb blankets for use by WNC and Police Services at a total cost of \$170,174.10 + indirect cost of \$59,560.92 (35% as required by NSHE)	LV-UA3I	State-wide	SubTotal
		\$ 229,734.99	\$ 229,734.99
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

PROJECT ID: LL

Date Submitted 3/27/19

PROJECT TITLE REFERENCE:

Electronic Access and Identity Verification System

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Process award documents through Sponsored Projects, set up account	10/01/19	10/31/19	1
3	Determine project criteria and complete an RFP	11/01/19	11/30/19	1
4	Accept and review quotes	12/01/19	12/31/19	1
5	Hire contractor, purchase equipment and work on installation	01/01/20	03/31/20	3
6	System testing	04/01/20	04/30/20	1
7	On site training	05/01/20	05/31/20	1
8	Completion of work with contractor and finalizing financial docs	06/01/20	06/30/20	1
9	Grant reporting by University Police and Sponsored Projects personnel	07/01/20	07/31/20	1
10	Final close out	08/01/20	08/31/20	1
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

Western Nevada College serves students from a wide region of Nevada, including the Fallon area. Their programs and houses sensitive data and equipment related to state of the art training programs in manufacturing, metatronics and advanced technologies. Loss of integrity of these facilities would impact not only the school, but the industries that rely on these highly trained employees.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

This project supports the FY19 strategic plan of supporting state, local, and tribal 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.

c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.

The project could be scaled to partial implementation.

PROJECT ID: LL

Date Submitted 3/27/19

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Fields "d" and "e" are limitied to visible text box size

Electronic Access and Identity Verification System

d.	Can this project continue without funding?	YES (NO 💿	Explain below.

WNC budget has no funds for this improvement project at this time. University Police budgets do not currently include this project.

e. Does this project provide a MEASUREABLE statewide benefit?

YES

NO Explain below.

This project will be measurable in the number of facilities impacted by improved control systems and other equipment requested for managing critical incidents. The beneficiaries of this project will be, specifically, 3,420 students, 440 faculty and staff of WNC and the community members of 7 counties using the facilities. Also, some 40,000 students, faculty and staff of the other institutions under the jurisdiction of University Police Services.

18) THIRA COMPLETION - Please indicate the participation level in completing the 2018 THIRA Survey. CHOOSE ONE:

- YES Agency HAS participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey
- NO Agency has NOT participated in the 2018 Threat and Hazard Identification Risk Assessment (THIRA) Survey

19) ADDITIONAL COMMENTARY - Please indicate any additional project commentary you feel may be important. Field is limited to the visible text box

University and College campuses are an extremely valuable resource for the entire population of Nevada. It's very difficult to accurately assess the impact of loss of integrity of facilities or harm to persons due to terrorism on any level. Persons from every city, town and rural community in Nevada and ages from kindergarten to senior citizen visit, attend programs or participate in learning activities at these campuses every day. They are members of their Local Emergency Planning Committees and serve as temporary EOC's, evacuation sites, and gathering places during extreme situations and man-made or natiural disasters. Their importance and the need to protect them from harm should not be underestimated.

University Police have law enforcement responsibility at the University of Nevada, Reno, Truckee Meadows Community College, the Desert Research Institute and Western Nevada College. As the Board of Regents continues to evaluate security on the state's many college campuses, the responsibilities of University Police Services are likely to continue to expand.

Over the next 3 - 5 years, Police Services will continue to evaluate the needs and possible threats to the NSHE facilities in our jurisdiction and make recommendations for improvements. It may take some time for budgets to catch up with demand, therefore we rely on grant opportunities such as this to address needs as they are recognized.

Thank you for the opportunity to apply for these funds.

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

					I EIVI DE I AIE						
	Agency Name	BOR of NSHE obo University Police		Todd Renwi 4013, trenwi	,	Grant Manager Name & Contact #	Debbie Penrod, 775-6	582-7248, debbie@u	ınr.edu		LL
	IJ TITLE:	Acess Control and Identity Verification	for WNC								
		One Budget Per Funding Stream									
		SHSP									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
2								\$ -			
3								\$ -			
4						1		\$ -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Approved Strategic Capacity		Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type									
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26									-			
27	Travel Sub-Total								-			
TD AVEL		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL	EACH LINE ITEM AND DELIVE	DADLES NADD	ATIVE WILL BE USE	D TO ENGLIDE ITEMS LISTED WIL	L DE COMPLETE	IN THE CRANE	CVCLE ITEMS M	AV NOT DE DUD	CHACED OUTGIDE TO	IE ITEMO LICTED

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTE ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28										
29										
30										
31										
32										
33			•							
34			•							
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			·				\$ -			
38					1		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEEY FOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		rement / See 2nd tab to determine whether your t requires EHP Screening									
40	Electronic Access Control System	One year subscription of Web Hosting Software			1.00	1,467.00	\$ 1,467.00		Operational Coordination	14SW-01-PACS System, Physical Access Control	
41	Electronic Access Control System	Small format interchangeable core smart cylinders			600.00	229.35	\$ 137,610.00		Operational Coordination	14SW-01-PACS System, Physical Access Control	
42		Gen 3 Slim key with chargers			190.00	120.05	\$ 22,810.07		Operational Coordination	14SW-01-PACS System, Physical Access Control 14SW-01-PACS	
43	Electronic Access Control System	Gen 3 slim line bluetooth key with chargers			10.00	146.50	\$ 1,465.00		Operational Coordination	System, Physical Access Control 14SW-01-PACS	
44	Electronic Access Control Sys	USB Programmer Station			1.00	210.00	\$ 210.00		Operational Coordination	System, Physical Access Control 14SW-01-PACS	
45	Electronic Access Control Sys	Mobile Progammer for Android			1.00	625.00	\$ 625.00		Operational Coordination	System, Physical Access Control 14SW-01-PACS	
46	Electronic Access Control Sys	multi key charger			1.00	480.00	\$ 480.00		Operational Coordination	System, Physical Access Control 14SW-01-PACS	
47	Electronic Access Control Sys	account set up, programming, training			1.00	1,760.00	\$ 1,760.00		Operational Coordination	System, Physical Access Control 02EX-00-MITA	
48 49	Bomb Blanket Indirect Cost	US Armor Bomb Disposal Blanket Govt. Registered Indirect Cost rate @35%			3.00 1.00	1,249.00 59.560.92			Operational Coordination	Mitigation Area, Explosive	
49	EQUIPMENT Sub-Total	Govi. Negisteled Hullect Cost late @33%			1.00		\$ 59,560.92 \$ 229,734.99				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Electronic access control system will replace outdated key locks on all buildings at WNC in Carson City and Fallon, Novada. The budget will cover 600 locks plus software and programming and charging stations. Bomb blankets will be used by police services in response to explosive incidents. They will be



Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
		All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)										
		rement / See 2nd tab to determine whether your										
50	projec	ct requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54						·					\$ -	
55											\$ -	
56						·					\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to procu	rement / See 2nd tab to determine whether your										
57	projec	ct requires EHP Screening										
58											\$ -	
59			•								\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 229,734.99	

evad	a Homeland Security	y Grant P	rogram (HSGP) UASI	ONLY	PROJECT ID:	AA	Α
rojec	t Proposal for FFY19	HSGP Fu	inding De	escription - i	Due 4/26/19	Date Submitted	04/26/2	201
PROJ	ECT TITLE:	ARMOR CBR	NE Response -	- New Competitive				
PROF	POSING/LEAD AGENCY:	NV DPS - Inv	estigations Div	vision				
Projec	ct Manager Name/Title:	Patrick Halliga	an					
Projec	ct Manager Contact Info:	Phone: 702	2-494-9160	Email: phalligan@	dps.state.nv.us			
Addl F	Project Manager Name/Title:	n/a		•				
Addl P	roject Manager Contact Info:	Phone:		Email:				
Financ	ce/Grant Contact Name/Title:	Melissa Carı	r, Administrat	tive Services Office	cer II			
Financ	e/Grant Contact Info:	Phone: 775	5-684-4593	Email: mcarr@d	ps.state.nv.us			
CLA	ASSIFICATION - Check the p	rimary inten	tion of the P	Proposed Project:			Choose	one
	NIE VV		-	•		hin the past five years NCHS FY16-18 prioriti	_)
M	AINTAIN Project will MAINTA	AIN AN APPRO	VED FFY19 ST	RATEGIC CAPACIT	γ*		C	<u>) </u>
*A	II NEW projects are competitive							
ena Ve; req and	e purpose of this grant applica abling intelligence collection a gas Urban Area (NV DPS/Inve juested is specifically designe d employment of robotic platfo	nd surveilland estigations, L d for robotic of orms for CBR	ce support ca VMPD, HPD, operations or NE and CCT.	apabilities to the T , and NLVPD). T n events and prov A surveillance, m	actical teams ar he platform for ro iding a vehicle th onitoring and ex	nd ARMOR operator obotic operation and hat can be utilized tr ploitation of potentia	rs within the last transportation of the last tr	he Latio
сар	OPOSED STRATEGIC CAPA ability. Reference the Federal abilities to Core Capabilities h	Emergency N	/Janagement	Agency (FEMA) lis	st of Core Capabi	lities and the Crossw	alk of Tar	get
	19 Strategic Capacity Maintai				IOLOGICAL, NUC	CLEAR, AND EXPLOS	VE	
	GP Project Type Supporting Stra		_		TION CLIABILICS	NAIs-is- A DDT:	(DDCT	
	THER, please choose FFY16-18 I							
Cor	e Capability aligned with Mainta	ained Project:	ON-SCENE S	SECURITY, PROT,	AND LAW ENFO	RCEMENT [Mission Ar	ea - RESP]
	FY19 Strategic Capacities are sub Y19 Homeland Security Grant Pro						/19 and/o	r
	RATEGIC CAPACITY JUSTII tification of this project's alignment							
acc pro	thin the Core Capability of Intecurate, and actionable information, duction, dissemination, evaluperty, or interests; the develo	ation resulting ation, and fee	from the pla edback of ava	nning, direction, dailable information	collection, exploin concerning three	tation, processing, a eats to the United St	ınalysis, ates, its p	еор

	ada Homeland Secા	_				PROJECT ID:	AAA
roj	ect Proposal for FF	Y19 HSGP	Funding De	scription - Due 4/26	/19	Date Submitted	04/26/2019
SOI	ECT TITLE REFERENCE:	ARMOR	R CBRNE Respor	nse - New Competitive			
)	PROCUREMENT - Indica	te the metho	od of procurem	ent associated with thi	s proj	ect:	
	Request for Proposal	Provide a bri	rief explanation on	your method of procuremen	nt - FIEL	.D IS LIMITED TO VISI	BLE TEXT BOX:
	Solo Source			and maintenance of the req			
			ie purcnase from t n and specification	he vendor currently utilized	i by Lv	MPD for the supply	of venicles of
			·				
	PROJECT IMPLEMENTAT in rough order the process by which		-			•	escribe
	Upon confirmation of the gr		•				nd State
	Purchasing Guidelines for t	he procureme	ent of equipment b	pased upon criteria set forth	for G	rant Funded purchas	ses set to be
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FIELD IS LIMITED TO VISIBLE TEXT BOX							
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,	SUB-GRANT AWARD RE section is for you to tell u						
		(FD, PD, etc.)	Politic	al Jurisdiction (City, County, State, etc.)		Project Representative	(individual)
	Department of Public	Safety	State	of NV	Patric	k Halligan	
	12(d)						
	12 (b)						
	12 (c)						
)	SUSTAINMENT - Identify	any continuin	na financial obliga	tion created by the Project	and ni	rangsed funding salı	ıtion
,	None. The consumables up	-	-	•			
č	Trong. The concumation at	anzod by ano o	oquipinioni unuoi	sonoration will be named	ou by .	v Doparamoni or r	iono caroty.
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FIELD IS LIMITED TO VISIBLE TEXT BOX							
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)	STATEWIDE and/or UAS				tatewi	de -vs- UASI is noted	below for
	your convenience. This amou	ınt is derived fr	from Field '15g - PR	OJECT TOTALS' on Page #3			
	0% 100%]					
		_					
	Statewide Urban A	rea					

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: AAA

Date Submitted 04/26/2019

PROJECT TITLE REFERENCE:

ARMOR CBRNE Response - New Competitive

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
This proposal in for the procurement of a specialized CBRNE response vehicle for the ARMOR unit that can be utilized for operations, investigations, and mitigation of high-risk events of CBRNE or terrorism.	400000		\$ 400,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15~) DDO IECT TOTALS	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS	\$ 400,000.00	\$ 0.00	\$ 400,000.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: AAA

Date Submitted 04/26/2019

PROJECT TITLE REFERENCE:

ARMOR CBRNE Response - New Competitive

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Prepare Bidding criteria and receive responses per Federal Guidelines	09/01/19	12/01/19	3
3	Vendor and Equipment selection based upon response	12/01/19	02/01/20	3
4	Purchasing contracts and securing with vendors	02/01/20	02/01/21	12
5	Receive, training, and Implementation	02/01/21	06/01/21	4
6				
7				
8				
9				
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a.	Does this project have a nexus to terrorism? YES	5 6) NO (Explain below.
a.	Dues this project have a nexus to terrorish; TE) (I	י טעו עי) Explain be

As the multi-agency Law Enforcement section for the CBRNE events ARMOR Section responds and investigates all CBRNE related-events that are criminal in nature within Clark County and Southern NV. In responding to WMD and CCTA events, the ARMOR unit will play a crucial role in successful mitigation. The capability of the ARMOR section will have a direct correlation upon the ability of CBRNE counter-terrorism operations, investigations, and response throughout the state of NV.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

As a multi-agency, multi-discipline, state-response entity which supports agencies throughout the Las Vegas Urban Area, the furtherance of quick and accurate CBRNE location, detection, and identification is crucial to the Intelligence and Information Sharing Core Capability of the state. In providing the necessary information and intelligence to the federal, state, local, and private stakeholders, ARMOR can provide timely intelligence and Information Sharing of the diverse and technologically-advanced response in concerted effort for the mitigation of hazards.

c. Can this project funding request be reduced? Is it scaleable? YES NO NO Explain below.

The securing of equipment requested requires a one-time purchase of the packaged equipment and cannot be purchased in smaller portions.

Nev	ada	Homeland Securit	y Grant Prograr	n (HSGP) UAS	SIONLY	PROJECT ID:	AAA
Pro	ject I	Proposal for FFY19	HSGP Funding	Description -	Due 4/26/19	Date Submitted	04/26/2019
PRO.	JECT ⁻	TITLE REFERENCE:	ARMOR CBRNE Re	sponse - New Com	petitive		
Fields "d" and "e" are limitied to visible text box size	impac vehic which prese	Can this project continue was attempted to be continue to be continued to be continued to the continue to the	e realized through a variance funding, the ARMOR sses, securing similar ervice life from agencie effectiveness obstacle	riety of other optior Task Force has eva vehicle through De es in the surroundin s that were insurmo	ns and programs. In all all all all all all all all all al	ed the donation of sp ency, and refurbishin th of the evaluated o ed.	ecialized ng vehicles
Fields "d" and "e" are limi	invest respo resou	Does this project provide a RMOR Task Force is a lor igation, and analysis to the nded to requests for assist rces of the local agencies. ts and technical support in	ng-recognized regional Southern NV Region ance from numerous a ARMOR has a history	asset providing se , state-wide events, agencies throughou of assisting multipl	rvice for response, and adjoining area t the Southern NV e jurisdictions thro	as. In recent years, Region which excee ughout the region as	ARMOR has d the available
18)	THIR	A COMPLETION - Please	e indicate the particip	ation level in comp	oleting the 2018 T	HIRA Survey. CHOO	SE ONE:
		YES - Agency HAS partio	ipated in the 2018 Thi	reat and Hazard Ide	entification Risk As	ssessment (THIRA) S	urvey
		NO - Agency has NOT p	articipated in the 2018	3 Threat and Hazar	d Identification Ris	sk Assessment (THIR	A) Survey
19)		ITIONAL COMMENTAR ed to the visible text box	Y - Please indicate an	y additional projec	ct commentary yo	u feel may be impol	rtant. Field is
	N/A						

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

				LIN	E II EWI DE LA	IL BUDGET					
	Agency Name	NV Department of Public Saftey/Investig	Name & Cantant #			Grant Manager Name & Contact #					AAA
	IJ TITLE:	ARMOR CBRNE Response - New Comp	etitive								
		One Budget Per Funding Stream									
		Select Funding Stream									
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.									
1								\$ -			
3								\$ - ¢ -			
4								\$ -			
	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Personnel Cost Amount	Strategic		Requested Funding Source
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
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	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

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Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPILIANCE)	Select Type				-		-			
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	Travel Sub-Total								-			

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
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33							-				
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	Planning Sub-Total						\$ -				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					-	-	\$ -			
37			•				\$ -			
38			·		-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #		EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		ocurement / See 2nd tab to determine whether ject requires EHP Screening									
			New / Enhance / Past /					CBRNE - LVMPD	On-scene		
40		Specialty CBRNE Response Vehicle	Competitive		1.00	400.000.00	\$ 400,000.00		Protection	12VE-00-MISS	UASI
41							\$ -				
42							\$ -				
43							\$ -				
44							\$ -				
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 400,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Due to the increased risks of the utilization of WMD and CBRNE materials in the event of a complex coordinated attacks, the ability to ensure the safe transportation, deployment and operation of remotely operated platforms (ROPs = Robots, sUAS, etc) into a variety of environments and high-risk events is critical. Recent events have expedited the need for a suitable vehicle for the rapid deployment capability that is sufficient for high-threat environments while allowing to minimize the distance for maximum platform coverage.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether									_	
50	your pro	ect requires EHP Screening									\$ -	
51 52												
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
57	EHP Required prior to pro-	curement / See 2nd tab to determine whether ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUIRE. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

					Budget Total		
					Request	\$ 400,000.00	

Ν	evada Homeland Security	Grant Pr	ogram (I	HSGP) UAS	SIONLY	PROJECT ID:	MMM
Pi	oject Proposal for FFY19	HSGP Fu	nding De	scription	- Due 4/26/19	Date Submitted	4/26/19
	PROJECT TITLE:					Control Stations (EMR	B-ConS)
2)	PROPOSING/LEAD AGENCY:	Washoe Cou	unty School [District			
3)	Project Manager Name/Title:	Roy Anderso	on, Emergen	cy Manager			
	Project Manager Contact Info:	Phone: (775) 348-0285	Email: roy.and	lerson@washoes	schools.net	
4)	Addl Project Manager Name/Title:	Leslie Allfree	e, CPR & AE	D Coordinator			
	Addl Project Manager Contact Info:	Phone: (775) 353-5958	Email: leslie.a	llfree@washoes	chools.net	
5)	Finance/Grant Contact Name/Title:	Roy Anderso	n, Emergend	cy Manager			
	Finance/Grant Contact Info:	Phone: (775) 348-0285	Email: roy.and	derson@washoe	schools.net	
6)	CLASSIFICATION - Check the pi	rimary intent	ion of the Pr	oposed Projec	t:		Choose one:
	the project has been	funded in the	past. All proj	ects in this categ	gory must align wit	ithin the past five years; h NCHS FY16-18 prioritie	_
	MAINTAIN Project will MAINTA	IN AN APPRO	VED FFY19 ST	RATEGIC CAPAC	ITY*		<u> </u>
	*All NEW projects are competitive						
7)	PROJECT OUTCOME - Describe Describe the desired outcome goal of the improvement at a high level; for example aligning with Nevada Commission on Horcapability); and WHERE (identify the geo	e Proposed Proje e: "To (establish, meland Security	ect in terms of C improve, expar (NCHS) FFY18 p	APABILITY. The st id, double, sustain riorities (See #10)	atement should desc , etc.)]; OF WHAT (; FOR WHO (identify	cribe <u>HOW MUCH</u> [quantify CORE CAPABILITY (or CAPA y the direct users/benefician	BILITIES [consider ies of the
	terrorism/mass casualty events in						
8)	PROPOSED STRATEGIC CAPA capability. Reference the Federal Capabilities to Core Capabilities he	Emergency N	lanagement <i>i</i>	Agency (FEMA)	list of Core Capal	bilities and the Crosswa	alk of Target
	FFY19 Strategic Capacity Maintai		RECOVERY				<u> </u>
	HSGP Project Type Supporting Strat			ster Recovery Fr	amework [RECOVI	ERYI	
	If OTHER, please choose FFY16-18 N						oject
	Core Capability aligned with Mainta	-					
9)	*FFY19 Strategic Capacities are sub FFY19 Homeland Security Grant Pro STRATEGIC CAPACITY JUSTIF	gram guidanc	e per the Noti	ce of Funding O	pportunity when r	released.	
	justification of this project's alignment v						
	Uncontrolled bleeding is a leadin control life-threatening bleeding, reach the scene of a mass casual	citizens can b	oe prepared t				

vada l	Homeland Secu	urity Grant Pr	ogram (HSGP) UASI ONLY		PROJECT ID:	MMM				
oject F	Proposal for FF	Y19 HSGP Fun	iding Description - Due 4/26,	/19	Date Submitted	4/26/19				
OJECT 1	TITLE REFERENCE:	School-based	d Emergency Medical Response: Bleed	ding Co	ntrol Stations (EMR	B-ConS)				
PROC	CUREMENT - Indica	te the method of	procurement associated with this	s proje	ect:					
⊙ Re	equest for Proposal	Provide a brief exp	planation on your method of procuremen	t - FIELL	D IS LIMITED TO VISIE	BLE TEXT BOX:				
O So	le Source		y School District Purchasing Departme	nt over	see procurement in	accordance				
O In	ternal	with NRS and appli	cable public procurement guidelines.							
PROJ	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implemented. Describe									
in rough	n order the process by whi	ch the project will be acc	complished, identifying who (i.e. staff, contracto	or, or ?) w	vill perform what work					
			quest for Proposal, (2) designating instancersonnel, and (3) providing bleeding co							
	on is for you to tell u	IS WHO will be rec (FD, PD, etc.)	fy the participating agency(s) and juriseiving the money for your project - If Political Jurisdiction (City, County, State, etc.) Washoe County, Nevada	f it's yo I Leslie		ncy] (individual)				
				OI K	X ALD I Togram					
12 (b)										
12 (c)										
SUST	AINMENT - Identify	any continuing fina	ncial obligation created by the Project,	and pro	oposed funding solu	tion				
			degraded materials such as nitrile glove							
sourc	es over time and in co	onjunction with othe	r emergency medical supplies, such as	Autom	nated External Defib	rillators.				
			project's funding percentage makeup of St ield '15g - PROJECT TOTALS' on Page #3	tatewid	le -vs- UASI is noted b	elow for				
Γ		7	ield 15g - FROSECT TOTALS OFF tage #5							
L	0% 100%	6								
St	tatewide Urban A	rea								

(SHSP)

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: MMM Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

School-based Emergency Medical Response: Bleeding Control Stations (EMR B-ConS)

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Bleeding Control Stations to be co-located with Automatic External Defibrillators (AEDs) to provide readily accessible medical supplies to help control major bleeding. Each station includes: 1 wall-mount case, 1 carrying case, 8 individual vacuum-sealed Bleeding Control Kits. Each Bleeding Control Kit contains: 1 CAT tourniquet, 1 6-inch emergency trauma dressing, 2 Z-rolled gauze, 2 pair nitrile gloves, and 1 trauma shears. This cost includes the cost of installation hardware, as well as lead and asbestos containment supplies.	\$ 128,798.40		\$ 128,798.4
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide State-wide	

PROJECT ID: MMM Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

School-based Emergency Medical Response: Bleeding Control Stations (EMR B-ConS)

TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Issue RFP and secure Board of Regents approval	07/01/19	08/30/19	2
3	Purchase/receive bleeding control stations	09/01/19	10/31/19	2
4	Identify installation locations	07/01/19	09/30/19	3
5	Installation by facilities management	11/01/19	06/30/20	8
6				
7				
8				
9				
10				
11				
12				

SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

	a. Does this project have a nexus to terrorism? YES NO Explain below.
	Schools and sporting events are common targets of domestic and international terrorism.
_	
size	
visible text box	
texi	
p/e	b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.
	Access to bleeding control training and equipment is critical to urban response and recovery for mass casualty/terrorist events.
are limitied to	
nitie	
il e	
, and	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES NO Explain below.
٠.	Project funding can be reduced as needed by scaling the deployment of these bleeding control stations. All school locations

should receive 1-2 individual bleeding control kits. Larger stations containing multiple kits should initially be placed in locations

designated as high-risk for terrorism/mass casualty events, including high schools and large sports stadiums. Futher

deployment of stations can be made as funds allow.

	•	Grant Program (HSGP) UASI ONLY	PROJECT ID:	MIMIM
Proj	ect Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted	4/26/19
PROJ	ECT TITLE REFERENCE:	School-based Emergency Medical Response: Bleeding Co	entrol Stations (EMR	B-ConS)
	d. Can this project continue w	thout funding? YES NO (Explain below.		
Fields "d" and "e" are limitied to visible text box size		an continue within an existing training framework, supplies n es not currently exist within Washoe County School District.	eeded to control life	-threatening
nitiec	e. Does this project provide a	MEASUREABLE statewide benefit? YES NO Ex	plain below.	
Fields "d" and "e" are lii	Northern Nevada. This project w	s the second largest educational entity in Nevada, serving a ill deploy bleeding control equipment in the hands of lay-reso urable benefit in both access to equipment needed in a mass ualty event.	cuers responsible fo	r the lives of
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2018 Th	HIRA Survey. <u>CHOO</u>	SE ONE:
	YES - Agency HAS partice	pated in the 2018 Threat and Hazard Identification Risk As.	sessment (THIRA) S	urvey
	NO - Agency has NOT pa	orticipated in the 2018 Threat and Hazard Identification Ris	k Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY limited to the visible text box	- Please indicate any additional project commentary you	u feel may be impor	rtant. Field is

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019

LINE ITEM DETAIL BUDGET

Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Select Purchase Type Funding Type Funding Type Funding Type Funding Type Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source Funding Source												
One Budget Per Funding Stream Select Funding Stream CATEGORY PERSONNEL DETAIL DESCRIPTION Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Select Purchase Type Frevious Funding Type Previous Funding Type Salary or Hourly % of Effort Calculation (hours) More and the control of Cost Amount Capability Capability Capability Source Source Source Source		Agency Name	Washoe County School District	Project Manager Name & Contact #	Roy Anders 775-348-028	on 85						MMM
Select Funding Stream Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Personnel 1		IJ TITLE:	School-based Emergency Medical Resp	onse: Bleeding Contro	ol Stations (E	MR B-ConS)						
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Personnel 1			One Budget Per Funding Stream									
Line # CATEGORY PERSONNEL DETAIL DESCRIPTION Select Purchase Type Funding Type Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. Select Purchase Type Funding Type Funding Type Funding Type Funding Salary or Hourly % of Effort Calculation (hours) Amount Cost Amount Capability Capability Funding Source Funding Source			Select Funding Stream									
Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise. 1	Line #	CATEGORY		Select Purchase Type	Funding		% of Effort		Cost	Strategic		
1			Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or									
2	1								\$ -			
4	2								\$ -			
Ψ -	3					-	1	 	÷ -		-	
Personnel Sub-Total \$ - \$ -	-4	Personnel Sub-Total							\$ -			

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Lin	e #	CATEGORY	FRINGE DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)		Approved Strategic Capacity		Requested Funding Source
	Fring		Positions Require: Fringe to be separate from Personnel Costs above									
	5								\$ -			
-	6								\$ -			
	7								\$ -			
- 1	3		-						\$ -	_		
	Fring	ge Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type		Justification & Narrative for each trip must be included here		Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			
11									-			
12									-			
14												
15									-			
16									-			
17									-			
18									-			
19									-			
20									-			
21									-			
22									-			
24									-			├
25			1									
26					1				-			
27									-			
	Travel Sub-Total								-			
TRAVEL		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	All EACH LINE ITEM AND DELLY	FRARIES NAR	PATIVE WILL BE II	SED TO ENSURE ITEMS LISTED	WILL BE COMPLE	TED IN THE GR	ANT CYCLE - ITEM	AS MAY NOT BE	PURCHASED OUTSI	DE THE ITEMS

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability		Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY									
27						-					
28						-	,			1	
29										1	
30											
31							,			1	
32										1	
33				•			-				
34							-			1	
35											
	Planning Sub-Total			· ·			\$				

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Oznanization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$ -			
37							\$ -			
38	_			_	-		\$ -			
39							\$ -			
	Organization Sub-Total						\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40	Bleeding Control Stations	each station includes: I wain-mount case, I carrying case, 8 individual vacuum-sealed Bleeding Control Kits. Each Bleeding Control Kit contains: 1 CAT tourniquet, 1 6-inch emergency trauma dressing, 2 Z-rolled gauze, 2 pair nitrile gloves, and 1 trauma shears.	New / Enhance / Past / Competitive		160.00	779.99	\$ 124,798.40	Implementation	Public Health and Medical Services		UASI
41	Installation Equipment	Installation hardware and lead/asbestos containment	New / Enhance / Past / Competitive		160.00	25.00	\$ 4,000.00		Public Health and Medical Services		UASI
42							\$ -				
43			•				\$ -				
44 45							\$ -				
45 46							\$ -	-	-		
47							\$ -				
48							\$ -				
49							\$ -				
	EQUIPMENT Sub-Total						\$ 128,798.40				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro	curement / See 2nd tab to determine whether										
57	your pro	ect requires EHP Screening										
58											\$ -	
59											\$ -	
60											\$ -	
61											\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Ī					Budget Total	\$ 128 798 40	

Nevada Homeland Security	y Grant Program (ł	HSGP) UASI ONLY	PROJECT ID:	NNN								
Project Proposal for FFY19	HSGP Funding De	scription - Due 4/26/19	Date Submitted	4/26/19								
1) PROJECT TITLE:	UNLV Explosive Detectin	g Canine Units										
2) PROPOSING/LEAD AGENCY:	University Police Services	s, Southern Command										
Adam Garcia, Associate Vice President & Director												
Project Manager Contact Info:	Phone: (702) 895-2634	Email: adam.garcia@unlv.edu										
4) Addl Project Manager Name/Title:	Richard Dohme, Assistan	t Chief										
Addl Project Manager Contact Info:	Phone: (702) 895-4741	Email: richard.dohme@unlv.edu										
5) Finance/Grant Contact Name/Title:	Ariana Renick, Publications Writer											
Finance/Grant Contact Info:	ance/Grant Contact Info: Phone: (702) 895-5792 Email: ariana.renick@unlv.edu											

6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:

NEW*

Project is **NEW** [No grant-funded projects have recently addressed this capability within the past five years; **OR** the project has been funded in the past. All projects in this category must align with NCHS FY16-18 priorities.



MAINTAIN Project will MAINTAIN AN APPROVED FFY19 STRATEGIC CAPACITY*



*All NEW projects are competitive

7) PROJECT OUTCOME - Describe the goal of the Proposed Project in a summary statement.

Describe the desired outcome goal of the Proposed Project in terms of CAPABILITY. The statement should describe **HOW MUCH** [quantify the capability improvement at a high level; for example: "To (establish, improve, expand, double, sustain, etc.)...]; OF WHAT CORE CAPABILITY (or CAPABILITIES [consider aligning with Nevada Commission on Homeland Security (NCHS) FFY18 priorities (See #10)]; FOR WHO (identify the direct users/beneficiaries of the capability); and WHERE (identify the geographic locale; example: state-wide, LV Urban Area, NE NV, or Reno, etc.]. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Being in close proximity to the Las Vegas Strip, the University of Nevada, Las Vegas (UNLV) venues share similar threats and hazards and are a potential target for terrorism and other man-made emergencies. Security threats identified in previous semesters have led us to conclude that the current systems in place around the UNLV are not adequate to support the growing number of visitors to the educational, sporting and entertainment events held each year. In 2018 UNLV hosted 21 events at Sam Boyd Stadium (224,000 attendees), 49 events at Cox Pavilion (35,000 attendees), and 138 events at the Thomas & Mack Center (807,000 attendees). To improve safety and security for these events and venues, UNLV proposes to purchase 2 Explosive Detecting Canines (K-9 Units) to reduce man-made risks associated with these activities. These K-9 Units may be utilized by partner agencies within southern Nevada and throughout the Urban Area. UNLV is transforming its safety and security protocols to continue to strengthen community (University) resilience. The proposal includes 1 Person-Borne Explosive K-9 Unit and 1 Explosive Detection K-9 Unit. The K-9 units will allow for detection and identification of concealed explosives and other CBRNE. Establishing these enhanced security measures (updated plans and expanded use of K-9 units), will significantly reduce risks associated with the high profile events held at UNLV and potentially around the region.

8) PROPOSED STRATEGIC CAPACITY - Identify by name the proposed strategic capacity, project type, and associated core capability. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: https://fema.gov/core-capabilities / https://www.fema.gov/pdf/prepared/crosswalk.pdf

FFY19 Strategic Capacity Maintained*:

CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR, AND EXPLOSIVE

HSGP Project Type Supporting Strategic Capacity: OTHER

If OTHER, please choose FFY16-18 NCHS Priority: OPERATIONAL COORDINATION [Mission Area - ALL]

Core Capability aligned with Maintained Project: | SCREENING, SEARCH, AND DETECTION [Mission Areas - PREV/PROT]

*FFY19 Strategic Capacities are subject to change pending Nevada Commission on Homeland Security Approval on 3/26/19 and/or FFY19 Homeland Security Grant Program quidance per the Notice of Funding Opportunity when released.

9) STRATEGIC CAPACITY JUSTIFICATION - Describe how this project alians with the strategic capacity chosen. Describe the justification of this project's alignment with the strategic capacity to be maintained. If it does not, please justify. FIELD IS LIMITED TO VISIBLE TEXT BOX.

University Police Services and UNLV's Office of Emergency Management's common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campus, keeping UNLV students and staff, campus visitors and event attendees, and surrounding community secure and safe. UNLV has identified a need for enhanced security (K-9 Units) at multiple, high profile events. K-9 Units will also be used to "clear" building/facilities after bomb threats, etc. Even though K-9 Units may also serve as a prevention tool, they also serve as an active deterrent during patrols around campus and at events, and will enhance community (University) resilience and reduce potential risks identified during UNLV's broader planning process.

Nev	ada Homeland Sec	urity Grant Progra	am (HSGP) UASI ONLY	PROJECT ID:	NNN									
Proj	ject Proposal for FF	Y19 HSGP Funding	g Description - Due 4/26,	/19 Date Submitted	4/26/19									
PRO.	JECT TITLE REFERENCE	: UNLV Explosive D	etecting Canine Units											
10)	PROCUREMENT - Indica	ate the method of proc	curement associated with this	s project:										
	Request for Proposal	Provide a brief explanat	tion on your method of procurement	t - FIELD IS LIMITED TO VISIE	BLE TEXT BOX:									
	Sole SourceInternal		s has identified the equipment (K- ents, and campus population.	9 Units) for purchase that I	pest suits the									
11)		· ·	nd by whom, the Proposed Project shed, identifying who (i.e. staff, contractor	•	scribe									
	University Police Services	will perform the following	implementation steps:											
FIELD IS LIMITED TO VISIBLE TEXT BOX	 Conduct final needs assessment Distribute Request for Quotes and select vendor. Order K-9 Units Participate in multi-week handler training and initial certification process Update security plan, including K-9 Unit deployment locations Update organizational procedures. Establish mutual-aid agreements with partner agencies Deploy K-9 Units Regular training and care. 													
12)	section is for you to tell		participating agency(s) and juris the money for your project - If Political Jurisdiction (City, County, State, etc.)		ncy]									
	12(a) University Police Se			Adam Garcia, AVP & Dire										
	12(b)													
	12 (c)													
13)		will be responsible for cor	obligation created by the Project, a											
14)		ount is derived from Field '19	's funding percentage makeup of St 5g - PROJECT TOTALS' on Page #3	atewide -vs- UASI is noted b	elow for									

Statewide

(SHSP)

Urban Area

(UASI)

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: NNN

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

UNLV Explosive Detecting Canine Units

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be sp. 15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
,			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
(1) Explosive Detection Canine(1) Person-Borne Explosive Detection Canine	\$ 37,000.00		\$ 37,000.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTota \$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide State-wide	\$ 0.00

Nevada Homeland Security Grant Program (HSGP) UASI ONLY Project Proposal for FFY19 HSGP Funding Description - Due 4/26/19

PROJECT ID: NNN

Date Submitted 4/26/19

PROJECT TITLE REFERENCE:

UNLV Explosive Detecting Canine Units

16) TASKS & SCHEDULE - Identify the necessary tasks/steps, and time needed.

FIELDS ARE L	IMITED TO TEXT BOX SIZE	From	То	Duration
Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Conduct final needs assessment.	07/01/19	07/05/19	1
3	Distribute Request for Quotes and select vendor.	07/05/19	08/05/19	1
4	Order K-9 Units.	08/05/19	11/05/19	3
5	Participate in multi-week handler training and initial certification process.	11/05/19	12/10/19	1
6	Update security plan, including K-9 Unit deployment locations.	08/05/19	09/05/19	1
7	Update organizational procedures.	08/05/19	09/05/19	3
8	Establish mutual-aid agreements with partner agencies.	09/05/19	12/05/19	3
9	Deploy K-9 Units.	12/10/19		
10				
11				
12				

17) SUPPLEMENTARY INFORMATION - Please provide a BRIEF explanation for your response to these questions:

a. Does this project have a nexus to terrorism? YES NO Explain below.

According to the Homeland Security Digital Library, on December 17, 2003, President Bush issued Homeland Security Presidential Directive 7 establishing a national policy for Federal departments and agencies to identify and prioritize critical infrastructure and key resources to protect them from terrorist attacks. The Department of Homeland Security and Congress identified public assembly facilities as part of this critical infrastructure. These K-9 Units will serve as a counter-terrorism and security measures that prevents explosives from being used an attack method on high profiles events, and will be utilized to "clear" buildings/facilities after a bomb threat, etc.

b. Does this project align with the FFY19 strategic capacities? YES NO Explain below.

University Police Services and UNLV's Office of Emergency Management's common campus purpose is to sustain and build systems that will prepare for, respond to, and recover from any threat which may face our campus, keeping UNLV students and staff, campus visitors and event attendees, and surrounding community secure and safe. UNLV has identified a need for enhanced security (K-9 Units) at multiple, high profile events. Even though K-9 Units may also serve as a prevention tool, they will enhance community (University) resilience and reduce potential risks identified during UNLV's broader planning process.

c. Can this project funding request be reduced? Is it scaleable? YES () NO () Explain below.

Although the number of K-9 Units can be reduced, both K-9 Units are required to meet security needs at an ever growing number of high profile and special events associated with southern Nevada's Higher Education Institutions.

ada Homeland Securit	y Grant Program (HSGP) UASI ONLY	PROJECT ID:	NNN
ect Proposal for FFY19	HSGP Funding Description - Due 4/26/19	Date Submitted	4/26/19
ECT TITLE REFERENCE:	UNLV Explosive Detecting Canine Units		
d. Can this project continue w	vithout funding? YES NO (•) Explain below.		
	HSGP funding. Funding is not currently available from any of security measures, or employ the use of additional K-9 Units		
UNLV regularly hosts national,	state, and regional events, including 2016 Presidential Deba		
over a million visitors. Additionato be utilized by partner agencial consolidation of University Police	urt visits Nevada Supreme Court visits, National Finals Rode ally, University Police Services plans to establish mutual-aid as within southern Nevada and throughout the Urban Area. Se Services, Southern Command this equipment can be deparch Institute, Las Vegas, Nevada State College, and Unive	partner agreements In accordance with the loyed for use on all C	for K-9 Unit ie ollege of
THIRA COMPLETION - Please	e indicate the participation level in completing the 2018 1	THIRA Survey. <u>CHOO</u>	SE ONE:
YES - Agency HAS partic	cipated in the 2018 Threat and Hazard Identification Risk A	ssessment (THIRA) Si	urvey
NO - Agency has NOT p	articipated in the 2018 Threat and Hazard Identification Ri	sk Assessment (THIR	A) Survey
ADDITIONAL COMMENTAR limited to the visible text box	Y - Please indicate any additional project commentary yo	ou feel may be impor	tant. Field
ceremonies, Federal Appeals C which draws over a million visit tragedy. Additionally, the Thom the Southern Nevada Health Di arenas around the country that	state, and regional events, including the 2016 Presidential Ecourt visits, Nevada Supreme Court visits, National Finals Repors. The Thomas & Mack Center served as an area of refugas and Mack Center is a designated Mega-Point of Dispensistrict. UNLV has limited K-9 capability and has not been able have K-9 Units as part of their standard pre-event and continuous ensure the safety and well-being of the campus and its sur	odeo, and NBA Sumr ge for victims of the 1 sing (POD) by Clark (le to follow suit with si inuing event security	ner League October County and imilar event operations.
bomb sniffers, which are trained the odor itself, enabling them to is in motion. They can accurate	e specifically trained to detect body-worn explosives on a mod to view static objects or people as their "productive area," o consistently and effectively follow an explosive target to its ely screen hundreds of people passing through an entry point 17 different kinds of explosives and are necessary for specific	Person-Borne dogs a source in real time w nt in a non-intrusive w	re obedien hile the tar ay. Both of

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2019 LINE ITEM DETAIL BUDGET

LINE TIEM DETAIL BUDGET												
	Agency Name	University Police Services			Grant Manager Name & Contact #	Ariana Renick 702-895-5792					NNN	
	IJ TITLE:	UNLV Explosive Detecting Canine Units	3									
		One Budget Per Funding Stream										
		UASI										
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Approved Strategic Capacity	Core Capability		Requested Funding Source
		Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. All personnel must be put under this category, please note each line with planning, organization, training or exercise.										
1								\$ -				
2								\$ -				
3								\$ -				
4	Personnel Sub-Total							\$ -				
		FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN	DETAIL THE POSITIONS AND D	ELIVEDADI EC	NADDATIVE WILL	RE LISED TO ENGLIDE ITEMS LIS	TED WILL BE COM	OI ETED IN THE	CRANT CYCLE	ITEMS MAY NOT	BE BURCHASED OF	ITCIDE THE ITEMS

PERSONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Line #			Select Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (Input hours)	Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
		Positions Require: Fringe to be separate from Personnel Costs above									
5								\$ -			
6								\$ -			
7								\$ -			
8								\$ -			
	Fringe Sub-Total							\$ -			

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

FRINGE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Select Purchase Type	Previous Funding Type	Category of Each Travel	Justification & Narrative for each trip must be included here	Total Trips	Cost for each Trip	Total Cost	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Travel Planning Training Exercise Equipment Organization	THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ADDENDUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Select Type						-			
9									-			
10									-			ļ
11									-			
12									-			
13									-			
14									-			
15									-			
16									-			
17									-			
18 19									-			
20									-			
21									-			
22									-			
23									_			
	Travel Sub-Total								-			
		R EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DET	ALL EACH LINE ITEM AND DELLY	EDABLES NAD	DATIVE WILL BE II	ISED TO ENGLIDE ITEMS LISTED	WILL BE COMPLE	TED IN THE CP	ANT CYCLE - ITEM	AS MAY NOT BE	DIDCHASED OUTSI	DE THE ITEMS LISTED

TRAVEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL EACH LINE ITEM AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Select Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	Requested Funding Source
	Planning	DESCRIPTION OF PLANNING ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY, NO OVERTIME IN THIS CATEGORY								
27						-	-			
28						-	-			
29							-			
30							-			
31							-			
32							-			
33							-			
34							-			
35										
	Planning Sub-Total						\$ -			

PLANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity		Requested Funding Source
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.								
36					ı	-	\$ -			
37							\$ -			
38			•		-		\$ -			
39			•				\$ -			
	Organization Sub-Total		·				\$ -			

ORGANIZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Approved Strategic Capacity	Core Capability	AEL Ref # (if AEL is not listed this will not be approved)	Requested Funding Source
	Equipment	DESCRIPTION OF EQUIPMENT ACTIVITIES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO TRAVEL IN THIS CATEGORY - NO OVERTIME IN THIS CATEGORY, MUST HAVE AN AEL									
		curement / See 2nd tab to determine whether ject requires EHP Screening									
40		Person-Borne Explosive Detection Canine with 5 week handler training, Initial Certification, 1 year of follow up training and Certification.	New / Enhance / Past / Competitive		1.00	20,000.00		Community	Screening, Search, and Detection	07ED-01-DOGS Canines, Explosive Detecting	UASI
41		Explosive Detection Canine with 5 week handler training, Initial Certification, 1 year of follow up training and Certification.	New / Enhance / Past / Competitive		1.00	17,000.00		Community	Screening, Search, and Detection	07ED-01-DOGS Canines, Explosive Detecting	UASI
42							\$ -				
43						1	\$ -		-		
45							\$ -				
46							\$ -				
47							\$ -				
48							\$ -				
49	EQUIPMENT Sub-Total						\$ 37,000.00				

EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST.

INTERESOR SOURCE - STORMED

Person-Borne working dogs are specifically trained to detect body-worn explosives on a moving target. This is what enables a Person-Borne canine to follow an explosive target to its source in real time while the target is in motion. Trained to sniff out 17 different kinds of explosives. Cost includes:

- Canine

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Training	All Training in this category must be coordinated with the State/UASI Training Officer, Training Must have a FEMA/DHS Course #. Must Support SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY) Add Course # in Description (NO OVERTIME IN THIS CATEGORY)						-				
		curement / See 2nd tab to determine whether										
50	your pro	ject requires EHP Screening									\$ -	
51											\$ -	
52											\$ -	
53											\$ -	
54											\$ -	
55											\$ -	
56											\$ -	
	Training Sub-Total										\$ -	

TRAINING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP APPROVAL PLEASE SEE SCREENING MEMO

Narrative HERE

Line #		EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	This request is required to be on the TEPW	QUANTITY	UNIT COST	Approved Strategic Capacity	Core Capability	TOTAL	Requested Funding Source
	Exercise	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS CATEGORY)										
	EHP Required prior to pro											
57	your pro	ject requires EHP Screening										
58											\$ -	
59											\$ -	
60			·								\$ -	
61			·								\$ -	
	Exercise Sub- Total										\$ -	

EXERCISE COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT A PRE-APPROVED PROJECT CHANGE REQUEST. MAY REQUIRE EHP, PLEASE SEE EHP SCREENING MEMO

Narrative HERE

					E	Budget Total		
					F	Request	\$ 37,000.0	0

NEVADA HOMELAND SECURITY COMMISSION BYLAWS

I. Authority

The Nevada Homeland Security Commission ("Commission") was established in Chapter 239C of the Nevada Revised Statutes.

II. Purpose and Mission

The Commission was established by the Legislature to make recommendations to the Governor, the Legislature, state agencies, political subdivisions, tribal governments, businesses and private persons concerning the prevention, detection and deterrence of terrorism and related emergencies within the State of Nevada. The Commission will also perform any other acts related to their duties set forth in NRS 239C.160 that the Commission determines are necessary to protect or enhance the safety and security of the State of Nevada.

III. Membership

The Governor shall appoint to the Commission sixteen (16) voting members that he determines to be appropriate, and who serve at his pleasure, which must include at least (set forth in NRS 239C.120):

- a. The Sheriff of each county whose population is 100,000 or more;
- b. The chief of the county fire department in each county whose population is 100,000 or more;
- c. A member of the medical community in a county whose population is 700,000 or more.
- d. An Employee of the largest incorporated city in each county whose population is 700,000 or more;
- e. A representative of the broadcaster community; and
- f. A representative recommended by the Inter-Tribal Council of Nevada, Inc., or its successor organization, to represent tribal governments in Nevada.

The Governor shall appoint at least three (3) non-voting members that he determines to be appropriate, and who serve at his pleasure, which must include:

- a. An officer of the United States Department of Homeland Security whom the Department of Homeland Security has designated for this State
- b. The agent in charge of the office of the Federal Bureau of Investigation in this State: and
- c. The Chief of the Division of Emergency Management.

The Senate Majority Leader shall appoint one member of the Senate as a nonvoting member of the Commission.

The Speaker of the Assembly shall appoint one member of the Assembly as a nonvoting member of the Commission.

IV. Officers and Duties

The officers of the Commission shall consist of the Chair and Vice Chair as set forth in NRS 239C.120.

a) Chair – The Chair is appointed by the Governor or his designee. The Chair is the leader of the Commission, convenes meetings and appoints subcommittee chairmen.

The Chair shall provide reports to the Office of the Governor on or before February 15 of each year detailing the activities of the Commission.

b) Vice Chair – The Vice Chair is appointed by the Governor, or his designee, and presides in the absence of the Chair.

V. Meetings

Commission meetings will be called at the discretion of the Chair but not less than quarterly.

Commission meetings are subject to the Nevada Open Meeting Law contained in Chapter 241 of the Nevada Revised Statutes. However, the Commission may hold a closed meeting pursuant to the conditions contained in NRS 239C.140(2).

VI. Committees

The Chair shall, with the approval of the Commission, appoint a Committee on Finance to provide recommendations to the Commission on homeland security grant funding; and appoint any other advisory committees deemed necessary by the Chair to assist in carrying out the duties of the Commission.

The Chair of the Commission shall appoint to a committee the number of voting members or nonvoting members, or both, that the Chair determines to be appropriate. The Chair may appoint any person the Chair deems appropriate to serve on a committee, except that a committee must include at least one member of the Commission. At the committee's first meeting and annually thereafter, the committee shall select a chair and a vice chair from the members of the committee.

Committee meetings are subject to the Nevada Open Meeting Law contained in Chapter 241 of the Nevada Revised Statutes. However, a committee may hold a closed meeting pursuant to the conditions contained in NRS 239C.140(2).

VII. Voting

A majority of voting members of the Commission constitutes a quorum for the transaction of business and a majority of those voting members present at any meeting is sufficient for any official action taken by the Commission (set forth by NRS 239C.130).

Proxies and/or alternates do not count towards quorum and cannot vote.

VIII. Administrative Support

The Nevada Division of Emergency Management shall provide administrative support to the Commission.

IX. Amendments

The Bylaws may be amended when necessary by a vote of the Commission. No amendment shall be made which contradicts or conflicts with enabling authority for the Commission found in Chapter 239C of the Nevada Revised Statutes.

These Bylaws were adopted by the Nevada Homeland Security Commission on October 16, 2012 and amended October 4, 2013.