	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	А
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/4/17
1)	PROJECT TITLE:	Cybersecurity Capabilitie	S		
2)	Proposing/Lead Agency:	State of Nevada, Enterp	rise Information Technology Servi	ices	
3)	1° Project Manager Name/Title:	Shannon Rahming			
	1º Project Manager Contact Info:	Phone: (775) 684-5899	Email: srahming@admin.nv.gov		
4)	2 [°] Project Manager Name/Title:	James Earl			
	2 ^o Project Manager Contact Info:	Phone: (775) 684-7330	Email: jearl@admin.nv.gov		
5)	Finance/Grant Contact Name/Title:	Rachel Bennett			
	Finance/Grant Contact Info:	Phone: (775) 684-5864	Email: rbennett@admin.nv.gov		

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The desired outcome goal for this phased project is to further strengthen the State's cybersecurity capabilities, through the collection and analysis of new and different types of cybersecurity data not otherwise accessible from the State's technology infrastructure. This will provide greater visibility into and better detection of security events and incidents through a richer and more in-depth correlation of network and critical system logs specifically relevant to cybersecurity analysis – enabling more effective incident detection and response management. This next level of cybersecurity protection benefits those agencies and organizations statewide which use the State's wide area network (WAN) infrastructure, SilverNet.

While recognizing previous Nevada cybersecurity efforts to build a resilient State response to cyber threats, incidents and potential terrorist attacks, such as Nation-State threat actors (sometimes referred to as Advanced Persistent Threats, or APTs) and other more sophisticated foreign and domestic "Black Hats for Hire", an increasing wealth of cyber intelligence and threat data combined with advances in security technologies provides empirical support for continued and accelerated construction of the State's Information Security Management System (ISMS). On the basis of intelligence and threat reports intensifying daily, this grant cycle is essential for supporting the continuous modernization of the State's ISMS. Prior implementations of components for the State's ISMS have been effective in creating and enhancing the State's ISMS defenses. However, in response to successful deployments of cyber defenses, the Tactics, Techniques and Procedures (TTPs) of nefarious individuals and enterprises have changed in attacking our hardened infrastructure. In effect, those who wish to do the State harm using cyber tools and methods have evolved in response to the advent of new technologies. See attachment.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
Secondary Core Capability:	
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Cybersecurity Capability project is aligned by directly supporting the cybersecurity core capability. These steps protect directly the electronic communications systems, information, and services from damage, unauthorized use, and exploitation. The project will Implement and maintain procedures to detect malicious activity and to conduct technical and investigative-based countermeasures, mitigations, and operations against malicious actors to counter existing and emerging cyber based threats, consistent with established protocols. in order to meet new threats, the State must respond with reciprocal evolutionary cyber strategies that augment and harden the current infrastructure, while integrating new security capabilities that create a significant advance in the State's cybersecurity posture.

_	Nevada Homeland	l Sec	urity Grant Program (HSGP)	PROJECT ID:	Α
	Project Proposal for	r FFY	17 HSGP Funding Description	Date Submitted	4/4/17
PRC	JECT TITLE REFERENCE:	Cybe	rsecurity Capabilities		
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nev	ada Commission on Homeland Security (NCHS) Pi	iority and Urban Area	a Strategy
	NCHS FFY17 Priority		#1 - CYBERSECURITY		
	Urban Area Strategy Priority		NO URBAN AREA STRATEGY PRIORITY		
FIELD IS LIMITED TO VISIBLE TEXT BOX	based on a perpetual cyclical se with the ultimate goal of complet ISMS program or project will be and schedules. The OIS strateg Standards and Technology (NIS	ecurity mentin prioriti ic secu ST) and	affiliated public or private entity participating as a p planning effort, integrating security functionality fror g the Nevada Homeland Security Working Group F zed within the OIS strategic security roadmap base urity roadmap draws on cybersecurity standards set I key principles embedded within the NIST Cyberse oduced into the ISMS architecture shall be part of th	m interrelated cybersec Project Outcomes. Any ed on published grant re t by the National Institu ecurity Framework (CSF	curity domain grant-related equirements te of F). Ongoing
FIELD IS LIMITED T	All procurements will be executed project implemented shall be pa OIS State Information Security F continues to be the most effective enabling us to build in those new professional services to strength costs while maximizing available	ed thro rt of th Program ve meth v capa nen our e huma	for any operationalized cybersecurity project. ugh established state procurement methodologies. e OIS Governance and Management Framework, a m's performance measures. In keeping with previou hod for enhancing the current State ISMS infrastruct bilities. Combined in this approach of using security r security, the State is also served through the use an resources in a more collaborative model. The tar us Security Monitoring: and Security Operations.	and will be incorporated us strategies, a phased cture to address threats y software, hardware and of enterprise partnersh	d within the I approach s while nd ips to contro

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Enterprise Information Technology Services	State of Nevada	Shannon Rahming, State of Nevada
12(b)			
12(c)			

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

There is no ongoing support for these systems to be incurred; the projects and services may be scalable to available funding by the respective governmental agencies receiving the benefits. The roll out of prior state phased grant projects have been rolled into the pending Governor's Budget for FY18.19 as the past year expenditures proved successful to buy with state funding in future years. Phase III are identified new and enhanced products for cybersecurity protection.



14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

Date Submitted

A

4/4/17

PROJECT TITLE REFERENCE:

Cybersecurity Capabilities

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
none			
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
none			
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
The software, hardware and services necessary to leverage Phase III for the subsequent and accelerated construction of the State's Information Security Management System (ISMS) are estimated at \$270,000. This Phase III Continuous Monitoring and Incident Response function will compile log files for security analytics with richer and more in-depth correlation to the baseline support for the security operation center initiated in Phase and expanded by Phase II.		\$ 270,000.00	\$ 270,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
none			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
none			\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
none			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
1591 PROJECT TOTALS		\$ 270,000.00	\$ 270,000.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4

PROJECT TITLE REFERENCE:

Cybersecurity Capabilities

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 with Project Start	10/01/17	11/17/17	1
3	set in process applicable measurements of system deliverables	11/01/17	12/01/17	1
4	establish expected performance of grant products as selected	12/01/17	01/01/18	1
5	implement phased project deliverables for extension / enhancement of Information Security Management System (ISMS)	01/01/18	05/01/19	17
6	update SOPs and communicate model results	03/01/18	04/01/18	1
7	analyze performance using empirical and qualitative feedback	04/01/18	04/01/19	12
8	evaluate and document the next steps	05/01/19	06/01/19	1
9	report measurable results to stakeholders, ongoing	05/01/18	05/01/19	12
10	document next steps	06/01/19	07/01/19	1
11	close out the grant project	07/01/19	08/01/19	1
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 Cybersecurity Capabilities project has a nexus to terrorism. The highly damaging computer 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.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Yes, the Cybersecurity Capabilities project has directly aligned with the Nevada Commission on Homeland Security FY17 Priorities . The Nevada Commission on Homeland Security FY17 Priorities identified Cybersecurity as the number one priority.

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

This project funding request may be reduced by a minor amount and its planned phase is scalable. The potential reduction amount to scale back the phased project is \$30,000.

4/4/17

	Nevada Homeland	l Security Grant Program (HSGP)	PROJECT ID:	Α
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17
PROJ	IECT TITLE REFERENCE:	Cybersecurity Capabilities		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
Fields "d" and "e" are limitied to visible text box size	integrating new security capabili	iprocal evolutionary cyber strategies that augment and har ties that create a significant advance in the State's cyberse ed in the base budget; however, origins of subsequent cybe dget.	curity posture. Phase	e I FFY15
nitied	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explain bel	ow.	
Fields "d" and "e" are li	Yes, measurable advantages to state and local participants.	State and SilverNet users are of state-wide benefit. Users,	state-wide, include al	l public safety
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2016 T	HIRA Survey. <u>CHOO</u>	SE ONE:
	• YES - Agency has particip	ated in the 2016 Threats and Hazards Identification Risk A	Assessment (THIRA) S	urvey
	NO - Agency has not part	icipated in the 2016 Threats and Hazards Identification Ri	sk Assessment (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY Field is limited to the visible test	/ - Please indicate any additional project commentary yo xt box	u feel may be impor	tant.
	This focus is meant to provide a areas, the State will lose ground by the next generation of technor Further reference includes	n agile means of response to identified gaps in the current on the capabilities put in place and leave the door open to logies. OIS Governance and Management Framework, and link wi	exploit new vulnerab	

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

				LI	NE ITEM D	ETAIL BUI	DGET								
	Agency Name		Name & Contact #	Shannon Rah (775)684-589 srahming@a	99,	Manager Name & Contact #	Alisanne Maffe	ei, EITS, (775)68-	4-5855, awmaffe	i@admin.nv.gov					A
	IJ TITLE:	Cybersecurity Capabilities													
		One Budget Per Funding Stream													
		SHSP													
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1	none							\$-					\$-		
2								\$ - \$ -					\$ - \$ -		
4								э - \$ -					s -		
	Personnel							¢						\$-	
PERSON	Sub-Total IEL COST NARRA	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAIN	E IN DETAIL	THE POSITIO	NS AND DELIV	ERABLES. NAR	SATIVE WILL BE	USED TO ENSU	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE	ъ -	φ -	
None															
Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above						-							
5 6	none							\$ - \$ -					\$0.00 \$0.00		
7								\$ - \$ -					\$0.00 \$0.00		
8	Fringe Sub-						-	ъ -							
FRINGE	Total OST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERAE	LES. NARRATI	\$ - VE WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED I	N THE GRANI	\$0.00	\$0.00	
None															
Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
9	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				-						80.00		
10	none								-				\$0.00 \$0.00		
11 12									-				\$0.00 \$0.00		
13									-				\$0.00		
14 15									-				\$0.00 \$0.00		
16													\$0.00		
	Travel Sub- Total								_				\$0.00	\$0.00	
		REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX													

No FFY17 grant funds for travel expenses to state planned CIO cyber coordination meetings. The coordination and liaison responsibilities are to be funded out of the requested and pending FY18.19 State CIO budget funds.

ne #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	I												
17	none							-					\$0.00		
18								-					\$0.00		
19 20								-					\$0.00 \$0.00		
21								-					\$0.00		
	Planning Sub-														
	Total	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE						\$ -					\$0.00	\$0.00	
	G COST NARRAT	TIVE REQUIRED FOR EACH LINE THEM ABOVE - PLEASE	EXPLAINE		HE POSITION	S AND DELIVER	(ABLES. NARK)	ATIVE WILL BE U	SED TO ENSURE	ETTEMS LISTED V		DINTHE			
e												-			
e #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22	none							\$ -					\$ -		
23								\$ -					\$ -		
24 25								\$ - \$ -					\$ - \$ -		
25								э - \$ -					э - \$ -		
27								\$ -					\$ -		
	Organization														
GANIZ	Sub-Total	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	ASE EXPL			TIONS AND DE		\$ -	RE LISED TO EN				\$ -	-	
ne															
1e #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL	1												
		Phase III cybersecurity counter threat endpoint technology	Enhance	State	18 mos	1.00	270,000.00	\$ 270,000.00	Cybersecurity		05NP-00-IDPS	SHSP	\$ 270,000.00		
28								\$ -					\$ -		
29								\$-					\$ -		
29 30						1		\$- \$-					\$ - \$ -		
29 30 31						1						ļ	φ -		
29 30 31 32								\$ -					s -		
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29 30 31 32 33 34 35 36 37								\$ - \$ - \$ - \$ - \$ -					\$ - \$ - \$ -		
31 32 33 34 35 36 37 38								\$ - \$ - \$ -					\$ - \$ -		
29 30 31 32 33 34 35 36 37	EQUIPMENT							\$ - \$ - \$ - \$ - \$ - \$ \$ - \$ \$ \$ - \$ \$ \$ \$					\$ - \$ - \$ -		

Software, hardware and services necessary to leverage Phase III for the continued and accelerated construction of the State's Information Security Management System (ISMS). Equipment estimate includes employing advanced threat protection, continuous monitoring and analysis and security center operations with counter threat endpoint technology, These threat detection services provide a platform to protect against adversarial advances, identifying threats at commencement. Evaluating threats on the state monitoring and analysis and security center operations with counter threat endpoint technology, inset inset interat detection services provide a platform to protect against adversarial advances, identifying threats of comenceents. Evaluating threats on the state platform, the services heighten the known security situational awareness by warning when endpoints may have been compromised and, by accessing extensive intelligence on threat actor radecarts in content response efforts by pinpointing which systems are compromised, how compromised, and how to repair them. Threat feed services are used to monitor endpoints for signs of advanced threat actor activity, compiling log files for security analytics with richer and more in-depth correlation. The participants include the Enterprise IT Services on behalf of the state with statewide collaboration as well as public safety participants and other opportunities for participation. All purchases will be from approved GSA listing The grant project links to the National Preparedness Goal Core Capability for Cybersecurity and the project follows the NIST Cyber Security Framework. The purpose of Office of Information Security. It is an Audit / Controls entity whose purpose is to help the State of Nevada reduce the impact or likelihood of cyber and physical risks from occurring. In order to accomplish that goal, OIS has adopted a Governance and Management Framework based on NIST, NASCIO and ISO. From that framework, we wish to accomplish the execution of phase III with counter threat endpoint technology, subsequent to the prior phases successful testing and

implementation.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	A
	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					-	-								
40	none										\$ -		\$ -			
41											<u>\$</u> -		\$ -			
42											<u>\$</u> - \$-		\$ - \$ -			
44											ş -		\$ -			
45											\$ -		\$ -			
46											\$ -		\$ -			
47											\$ -		\$ -			
48											<u>s</u> -		\$ -			
49	Training Sub-										\$ -		\$ -			
	Total										s -		s -	_		
TRAININ	G COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E	EXPLAINE I	N DETAIL TI	HE POSITIONS	AND DELIVER	ABLES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETE	D IN THE	Ŧ			
none																
Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	Evereiee	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)												-		
50	none										\$-		\$ -			
51											<u>\$</u> -		\$ -			
52 53											<u>s</u> -		\$ - \$ -			
54											s -		ş -			
55											\$ -		\$ -			
56											\$-		\$-			
57											\$-		\$ -			
	Exercise Sub-										•		•			
EXERCI	Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE		IN DETAIL T	HE POSITIONS	AND DELIVER			SED TO ENSURE	ITEMS LISTED W		D IN THE	ф -			
			/=													
none													Total Original Budget	Line Item Reductions Total		
													\$ 270,000,00	s -		

All budgets require an email approval from the financial and/or grant manager

	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	В			
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	3/30/17			
1)	PROJECT TITLE:	Washoe County Sheriff's	Office - Cybersecurity					
2)	Proposing/Lead Agency:	Washoe County Sheriff's	Vashoe County Sheriff's Office					
3)	1° Project Manager Name/Title:	Sgt. Dennis Carry						
	1º Project Manager Contact Info:	Phone: (775) 328-3048	Email: dcarry@washoecounty.us	5				
4)	2 [°] Project Manager Name/Title:							
	2 ^o Project Manager Contact Info:	Phone:	Email:					
5)	Finance/Grant Contact Name/Title:	Laura Daniels						
	Finance/Grant Contact Info:	Phone: (775) 328-3013	Email: Idaniels@washoecounty.	us				
6)	CLASSIFICATION - Check the p	primary intention of the P	roposed Project:	Cł	noose one:			

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Washoe County Sheriff's Office wants to continue enhancement of Cyber threat/incident investigative response in Nevada. 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 FY 15/16 to enhanced 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 enhancing and sustaining current specialized equipment 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.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
Secondary Core Capability:	
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project continues to build existing capabilities and further allows an immediate law enforcement response to Cyber Security related incidents on critical infrastructure. The responses will require the collection of volatile data to identify the attackers, assist with immediate mitigation and preservation of additional critical data and subsequent data recovery efforts and finally coordinate with federal law enforcement and prosecution team members for further action. Attacks on critical infrastructure Cyber Systems can be the result of foreign or domestic actors.

Nevada Homeland	Security Grant Program	(HSGP)	PROJECT ID:	В
Project Proposal for	FFY17 HSGP Funding De	scription	Date Submitted	3/30/17
ECT TITLE REFERENCE:	Washoe County Sheriff's Office - C	ybersecurity		
PRIORITIES - Identify applicab Objective to be addressed	nd Security (NCHS) Pric	prity and Urban Area	Strategy	
NCHS FFY17 Priority	#1 - CYBERSECURITY			
Urban Area Strategy Priority				
Project will be implemented by f Cyber Center." Personnel will pr for immediate responses to critic WCSO continues to assign full t including supervisory and non si Cyber related matters. WCSO w skill sets available. During prior award periods, the V	Ill time members of the Washoe Co ocure necessary equipment and sol al incidents involving cyber threats. me personnel to Cyber related matt pervisory personnel. WCSO has pa Il continue attempts to expand regio	unty Sheriff's Office Cyl tware. The grant funded ers including investigati Intnered with regional sto onalization efforts to inco large increase in requir	bernetic Unit, "Northe d equipment and soft on and computer fore tate and federal law e lude more entities, dr red responses and ra	ern Nevada ware will allow ensics, enforcement to rawing upon
	Project Proposal for JECT TITLE REFERENCE: PRIORITIES - Identify applicable Objective to be addressed NCHS FFY17 Priority Urban Area Strategy Priority PROJECT IMPLEMENTATION Describe in rough order the process by w Project will be implemented by fu Cyber Center." Personnel will pro for immediate responses to critica WCSO continues to assign full tir including supervisory and non su Cyber related matters. WCSO wi skill sets available. During prior award periods, the V	Project Proposal for FFY17 HSGP Funding De JECT TITLE REFERENCE: Washoe County Sheriff's Office - C PRIORITIES - Identify applicable Nevada Commission on Homelar Objective to be addressed NCHS FFY17 Priority #1 - CYBERSECURITY Urban Area Strategy Priority #1 - CYBERSECURITY PROJECT IMPLEMENTATION - Describe how, and by whom, the Describe in rough order the process by which the project will be accomplished, ident Project will be implemented by full time members of the Washoe Could cyber Center." Personnel will procure necessary equipment and soft for immediate responses to critical incidents involving cyber threats. WCSO continues to assign full time personnel to Cyber related matter including supervisory and non supervisory personnel. WCSO has particulate responses to critical incidents involving cyber threats. WCSO related matters. WCSO will continue attempts to expand region skill sets available. During prior award periods, the WCSO Cyber personnel has seen a	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Price Objective to be addressed NCHS FFY17 Priority #1 - CYBERSECURITY Urban Area Strategy Priority #2000 PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contrad Project will be implemented by full time members of the Washoe County Sheriff's Office Cyll Cyber Center." Personnel will procure necessary equipment and software. The grant funder for immediate responses to critical incidents involving cyber threats. WCSO continues to assign full time personnel to Cyber related matters including investigati including supervisory and non supervisory personnel. WCSO has partnered with regional st Cyber related matters. WCSO will continue attempts to expand regionalization efforts to inc skill sets available. During prior award periods, the WCSO Cyber personnel has seen a large increase in require	Project Proposal for FFY17 HSGP Funding Description Date Submitted JECT TITLE REFERENCE: Washoe County Sheriff's Office - Cybersecurity PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Objective to be addressed NCHS FFY17 Priority #1 - CYBERSECURITY Urban Area Strategy Priority #1 - CYBERSECURITY 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 who Project will be implemented by full time members of the Washoe County Sheriff's Office Cybernetic Unit, "Norther Cyber Center." Personnel will procure necessary equipment and software. The grant funded equipment and soft for immediate responses to critical incidents involving cyber threats. WCSO continues to assign full time personnel to Cyber related matters including investigation and computer fore including supervisory and non supervisory personnel. WCSO has partnered with regional state and federal law of Cyber related matters. WCSO will continue attempts to expand regionalization efforts to include more entities, dot

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	none	none	none
12(b)			
12(c)			

13) 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 funding ceases. WCSO will commit personnel, additional equipment and/or software, and office space for the project.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	В
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/30/17

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office - Cybersecurity

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
			\$ 0.0
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
Purchase necessary equipment and software to conduct incident response and data recovery of government attacked systems and compromised networks. Sustain current licensed software with some reductions and software integrations. Upgrade existing investigative network security/storage infrastructure and computer forensic/response equipment.	\$ 0.00	\$ 80,405.00	\$ 80,40
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTo
Purchase necessary equipment and software to conduct incident response and data recovery of government attacked systems and compromised networks. Sustain current licensed software with some reductions and software integrations. Upgrade existing investigative network security/storage infrastructure and computer forensic/response equipment.	\$ 0.00	\$ 22,595.00	\$ 22,59
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTo
			\$ 0.0
	LV-UASI	State-wide	SubTo
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			
15f) Personnel [<i>staff (not contractors) directly implementing project and programmatic capability</i>] Overtime for attacks an incident responses.	\$ 0.00	\$ 6,000.00	\$ 6,000
	\$ 0.00	\$ 6,000.00 State-wide	\$ 6,000 TOTA

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	В
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/30/17

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office - Cybersecurity

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

	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	10/01/17	11/01/17	1
3	Purchase 50% of software	10/01/17	04/01/18	4
4	Purchase equipment	10/01/17	09/01/18	12
5	Purchase remaining software	10/01/17	09/01/18	12
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.

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 Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

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.

		Security Grant Program (HSGP)	PROJECT ID:	В			
	Project Proposal for	r FFY17 HSGP Funding Description	Date Submitted	3/30/17			
NOT	ECT TITLE REFERENCE:	Washoe County Sheriff's Office - Cybersecurity					
I	d. Can this project continue w	ithout funding? YES 💽 NO 🔵 Explain below.					
 With substantial risks. The project can continue without funding, but the elimination of funding would critically damage the capabil incidents, requiring other support entities to assist. The Washoe County Sheriff's Office is the only entity in capable of responding to these types of incidents immediately to mitigate the incident. If the program ender equipment failed, or new personnel does not become trained within this funding window, it would require s funding to rebuild the capabilities. e. Does this project provide a measurable "state-wide" benefit? YES NO Explain below. Northern Nevada is responsible for a large amount of state Cyber infrastructure. This project allows for sta and assistance with local, state, and federal partners. The Washoe County Sheriff's Office and partners hamultiple incidents throughout Northern Nevada and conducted investigations involving statewide infrastructure have no boundries and can impact any location requiring specialized personnel and equipment. 							
nitiec	e. Does this project provide a	measurable "state-wide" benefit? YES 🔵 NO 🔵 Expla	ain below.				
Fields "d" and "e" are li	and assistance with local, state, multiple incidents throughout No	for a large amount of state Cyber infrastructure. This and federal partners. The Washoe County Sheriff's O rthern Nevada and conducted investigations involving act any location requiring specialized personnel and e	ffice and partners have res statewide infrastructure. C	ponded to			
.8)	THIRA COMPLETION - Please	indicate the participation level in completing the 2	016 THIRA Survey. <u>CHOO</u> S	<u>SE ONE</u> :			
	• YES - Agency has particip	pated in the 2016 Threats and Hazards Identification	Risk Assessment (THIRA) S	urvey			
	NO - Agency has not part	ticipated in the 2016 Threats and Hazards Identificat	ion Risk Assessment (THIR)	A) Survey			
19)	ADDITIONAL COMMENTAR	(- Please indicate any additional project commenta xt box	ary you feel may be import	tant.			
	properly respond to Cyber incide	governments cannot solely rely on federal law enforce ents. These types of incidents may require an immedia tinually increases and the attackers can be foreign or	ate response and preserva	tion of data.			
	related criminal activity. These t	ffice has committed full time law enforcement personr ypes of responses and investigations require extensiv ersonnel responding to these incidents must remain ca	e experience and highly ac	lvanced			
	1						

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original O Amended

03/30/17

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017 LINE ITEM DETAIL BUDGET

	Agency Name		Name & Contact #	Sergeant De (775) 328-30	nnis Carry	Grant Manager Name & Contact #		iels (775) 328-30	13						
	IJ TITLE:	Cybersecurity													
		One Budget Per Funding Stream													
	l	SHSP													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)		Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. An personnel must be put under this category, please note each line with planning, organization, training or exercise.	I												
1		Overtime	New		75	100%	80	\$ 6,000.00	Cybersecurity				\$ 6,000.00		Limit the amount of non regular hours to repond to incidents.
2								\$ -					\$ -		
								\$-					\$ -	_	
3							1	¢				1	¢		
4	Personnel							ə -					φ -		

Overtime for responses to Infrastructure realted Cyber Security incidents requiring mitigation, data recovery, or other investigative steps. This overtime is limited to personnel with the primary reponsability of incident response/forensics. The overtime would not be used for training or other expenses.

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)		Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe	Positions Require: Fringe to be separate from													
		Personnel Costs above													
5								\$ -					\$0.00		
6								\$ -					\$0.00		
7								\$ -					\$0.00		
8							-	\$ -					\$0.00		
	Fringe Sub-														
	Total							\$ -					\$0.00	\$0.00	
FRINGE C	OST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	S. NARRAT	IVE WILL BE US	ED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	IN THE			

Narrative HERE

ine #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type		Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wi affect your program
	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				-		-						
		VENDOR Training	New												Increase of investigation times, reduction in capability of
9	Training on CBRN				Training		4	2,405.00	9,620.00	Cybersecurity			\$9,620.00		investigator and their skill sets.
10	Ť Ť								-				\$0.00		-
11									-				\$0.00		
12									-				\$0.00		
13									-				\$0.00		
14									-				\$0.00		
15									-				\$0.00		
16									-				\$0.00		
	Travel Sub- Total								9,620.00				\$9,620.00	\$2,405.00	-

Narrative HERE

ine #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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											-		
17 18													\$0.00 \$0.00		
10													\$0.00		
20								-					\$0.00		
21	Dianning Cub							-					\$0.00		
	Planning Sub- Total							s -					\$0.00	\$0.00	
LANNING	G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAE	BLES. NAR	RATIVE WILL BE	USED TO ENSU	RE ITEMS LISTER	WILL BE COMPLET	ED IN THE			
arrative H	IERE														
ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.													
22 23								\$ - ¢ .					\$ -		
23								<u> </u>					» - Տ -		
25								\$-					\$ -		
26								\$ -					\$ -		
27	Organization							\$ -					\$ -		
	Sub-Total							•					¢ .	_	
	ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	EASE EXPL	AINE IN DET	AIL THE POSI	TIONS AND DELIV	ERABLES.	NARRATIVE WIL	L BE USED TO F	ENSURE ITEMS L	ISTED WILL BE CON	IPLETED IN	¥		
arrative H	ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE EQUIPMENT DETAIL DESCRIPTION	ASE EXPL Purchase Type	Previous Funding	AIL THE POSI	TIONS AND DELIV	UNIT COST	NARRATIVE WIL	L BE USED TO I Primary Core Capability	ENSURE ITEMS L Secondary Core Capability	ISTED WILL BE CON AEL Ref #	IPLETED IN Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
RGANIZ arrative H	ATION COST NA	EQUIPMENT DETAIL DESCRIPTION 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 an AEL	Purchase Type	Previous	AIL THE POSI		UNIT		Primary Core	Secondary Core		Funding	Total Budget		
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arrative H	IERE CATEGORY Equipment Software,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL FORENSIC SOftware to analize mailware and attack methods. (Guidance software, Blackbag, Accessdata,	Purchase Type Sustainm	Previous Funding	AIL THE POSI	QUANTITY	UNIT	TOTAL	Primary Core	Secondary Core		Funding	Total Budget \$ 44,905.00	Reductions	Descriptions on how it will affect your program
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ine # 28	IERE CATEGORY Equipment Software, Forenisc Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic Software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent	Previous Funding		QUANTITY 1.00	UNIT COST 44,000.00 18,000.00	TOTAL \$ 44,905.00 \$ 18,000.00	Primary Core Capability Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW	Funding	\$ 44,905.00 \$ 18,000.00	Reductions	Descriptions on how it will affect your program
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28 29 30 31 32	ATTION COST NA HERE CATEGORY Equipment Software, Forenisc Hardware, Computer, Integrated Tools, Network Vulerability Scanning Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent Sustainm ent	Previous Funding		QUANTITY 1.00 1.00 4.00	UNIT COST 44.000.00 18,000.00 2,375.00	TOTAL \$ 44,905.00 \$ 18,000.00 \$ 9,500.00	Primary Core Capability Cybersecurity Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW 05NP-00-SCAN	Funding	\$ 44,905.00 \$ 18,000.00 \$ 9,500.00	Reductions 10,000.00 9,000.00 3,000.00	Descriptions on how it will affect your program
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arrative F ine # 28 29 30 31 32 33 34	ATTION COST NA HERE CATEGORY Equipment Software, Forenisc Hardware, Computer, Integrated Tools, Network Vulerability Scanning Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent Sustainm ent	Previous Funding		QUANTITY 1.00 1.00 4.00	UNIT COST 44.000.00 18,000.00 2,375.00	TOTAL \$ 44,905.00 \$ 18,000.00 \$ 9,500.00	Primary Core Capability Cybersecurity Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW 05NP-00-SCAN	Funding	\$ 44,905.00 \$ 18,000.00 \$ 9,500.00	Reductions 10,000.00 9,000.00 3,000.00	Descriptions on how it will affect your program
arrative F	ATTION COST NA HERE CATEGORY Equipment Software, Forenisc Hardware, Computer, Integrated Tools, Network Vulerability Scanning Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent Sustainm ent	Previous Funding		QUANTITY 1.00 1.00 4.00	UNIT COST 44.000.00 18,000.00 2,375.00	TOTAL \$ 44,905.00 \$ 18,000.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00	Primary Core Capability Cybersecurity Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW 05NP-00-SCAN	Funding	\$ 44,905.00 \$ 18,000.00 \$ 9,500.00	Reductions 10,000.00 9,000.00 3,000.00	Descriptions on how it will affect your program
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arrative F 28 29 30 31 32 33 34 33 34 35 36 37 38	ATTION COST NA HERE CATEGORY Equipment Software, Forenisc Hardware, Computer, Integrated Tools, Network Vulerability Scanning Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent Sustainm ent	Previous Funding		QUANTITY 1.00 1.00 4.00	UNIT COST 44.000.00 18,000.00 2,375.00	TOTAL \$ 44,905.00 \$ 18,000.00 \$ 9,500.00 \$ 9,500.00 \$	Primary Core Capability Cybersecurity Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW 05NP-00-SCAN	Funding	\$ 44,905.00 \$ 18,000.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ - \$ - \$ - \$ - \$ - \$ -	Reductions 10,000.00 9,000.00 3,000.00	Descriptions on how it will affect your program
28 29 30 31 32 33 34 35 36 37	ATTION COST NA HERE CATEGORY Equipment Software, Forenisc Hardware, Computer, Integrated Tools, Network Vulerability Scanning Hardware, Computer,	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Forensic software to analize malware and attack methods. (Guidance software, Blackbag, Accessdata, Magnet forensics, Cellebrite, etc) Also includes encryption breacking software. (renewals and new purcahses) Computer/Server and component upgrades ti existing systems.	Purchase Type Sustainm ent Sustainm ent	Previous Funding		QUANTITY 1.00 1.00 4.00	UNIT COST 44.000.00 18,000.00 2,375.00	TOTAL \$ 44,905.00 \$ 18,000.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ 9,500.00 \$ - 5 \$ - 5 \$ - 5 \$ - 5 \$ - 5 \$ - 5	Primary Core Capability Cybersecurity Cybersecurity Cybersecurity	Secondary Core	AEL Ref # 05HS-00-FRNS 04HW-01-INHW 05NP-00-SCAN	Funding	\$ 44,905.00 \$ 18,000.00 \$ 9,500.00 \$ 9,500.00 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions 10,000.00 9,000.00 3,000.00	Increase of time necessary to analyze incidents and reduce assigned personnel's ability. Some equipment will be removed trom service rather than extend th life of service. Future replacemen will be more cosity. Equipment will be shared rather than assigned, increasing the response time and possibility of equipment not being available wh needed. Increased risk of lack of storage I incident responses and evidence archiving. Removal of encryted

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Autor HERSoftware includes various vendors providing computer forensi/malware/response or operating software platforms. Licensing may vary as to the number of licenses. This may include license renewal or purchase of new software to replace existing software if development has enhanced "better" versions. The software includes forensic analysis or other software neccessary to support those missions; Network and server storage equipment will need replacement and enhancement as end of life on products will occur during the performance period. The items inluced hard drives, memory, server infrastructure needs, and other related items. Network scanning devices allow for the scanning and ultimate interception and

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40	Training on CBRN	VENDOR Training forensic software	New		NO	NO	5.00	2 595 00	Cybersecurity		\$ 12,975.00		\$ 12.975.00	2 595 00	Limit the capability of use of purchased software and equipment due to changes in technology and lack of investigative skills.
40	Training on Obicit	TEND ON TRAINing for online bonnaro					0.00	2,000.00	cybolocoully		\$ -		\$ -	2,000.00	ideit er inteedigative eitine.
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	Training Sub- Total										\$ 12,975.00		\$ 12,975.00	2,595.00	

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Total \$12,975.00 \$2,29

ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Evereiee	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)												-	
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	Exercise Sub- Total										s -		\$ -	-	

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 109,000.00	\$ 30,000.00	
All bude	oets require an	email approval from the financial and/or grant r	nanager							



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

INDEM				Fe	deral Fisc	al Year :	2017 - H	omel	and So	ecurity	Grant T	ravel A	ddendur	n						B
		*	*Required Fields										**Required	l Fields						
		Funding	Purpose (Please note if	Departure	Destination	Travel Start	Travel End	No.	No.				Motor Pool			Public		Rental	Baggage	
Traveler's Name	Title	Source	travel is for training)	City	City	Date		Days	Nights	Airfare	Hotel	Per Diem	Car	Mileage	Reg Fees	Trans	Parking	Car	Fees	Total
Dennis Carry	Sergeant	HSGP	Vendor Training	Reno		TBD	TBD	6	5	\$ -	\$ 1,233.00			\$ -	\$ 2,595.00		\$ 200.00	s -	\$ -	\$ 4,380.00
Dennis Carry	Sergeant			Reno	Washington DC		TBD	7	6	\$ 750.00	\$ 1,626.24			\$ -	\$ 2,595.00		\$ 200.00	\$ 352.52	\$ 25.00	\$ 5,997.26
Greg Sawyer	Detective			Reno		TBD	TBD	6	5	\$ -	\$ 1,233.00			\$ -	\$ 2,595.00		\$ -	s -	\$ -	\$ 4,180.00
Greg Sawyer	Detective	HSGP	Vendor Training	Reno	Washington DC	TBD	TBD	7	6	\$ 750.00	\$ 1,624.24	\$ 448.50	\$ -	\$ -	\$ 2,595.00	\$ -	\$ -	\$ -	\$ 25.00	\$ 5,442.74
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Nevada Homeland Security Grant Program (HSGP) PROJECT ID: C Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/5/17 1) PROJECT TITLE: Nevada Cybersecurity Workforce Development 4/5/17 2) Proposing/Lead Agency: University of Nevada, Reno 5/17

3) 1º Project Manager Name/Title: Shamik Sengupta, Assistant Professor and Executive Director, Cyber Security Center 1º Project Manager Contact Info: Phone: (775) 784-6953 Email: ssengupta@unr.edu Mehmet Gunes, Associate Professor 4) 2[°] Project Manager Name/Title: 2° Project Manager Contact Info: (775) 784-4313 Phone: Email: mgunes@unr.edu 5) Finance/Grant Contact Name/Title: Craig Holloman, Grants & Projects Analyst Phone: (775) 784-6857 Email: stephenholloman@unr.edu Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

In the last several years the State of Nevada has recognized the urgency to diversify its economy by embracing newly emerging engineering technologies and industries. The need for a professionally trained cybersecurity workforce is crucial to the development of secure cyberspace, global competitiveness, and the economic vitality of the U.S. The goal of this project is to create and manage a secure infrastructure and to educate Nevada students and Nevada State employees with the critical knowledge and skills needed to administer and defend the dynamic cyberspace.

Unfortunately, a majority of professionals entering into the workforce are equipped primarily with theoretical knowledge of cybersecurity or no awareness at all – in part because creating such a cybersecurity-aware continuous education environment for hands-on training is a complex process. Thus, the primary outcomes of this project are twofold: (1) developing a cybersecurity-aware continuous education environment in a secure sandboxed environment at UNR and (2) provide a cybersecurity technical training and awareness program to students and State employees to develop the next generation Cybersecurity workforce in Nevada.

Specifically, the objectives are to develop a collaborative space, which is a (1) cybersecurity instructional platform that can be incorporated in a variety of classes, workshops, providing training to Government employees, First Responders such as City Police Departments and Sheriffs' Offices such as Northern Nevada Intelligence Center; (2) a peer-learning interactive experimental area inside a safe and secure environment; and (3) sustain long term research/education partnerships by bringing hands-on research to instruction.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
Secondary Core Capability:	Forensics and Attribution [Mission Area: PREVENTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

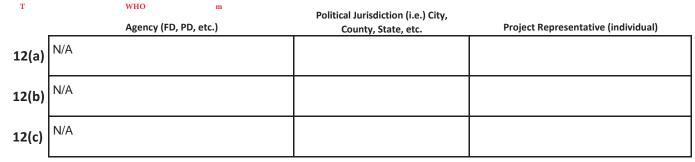
9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The growing dependency on a complex cyberspace means that new threats are continuously emerging that must be addressed in order to keep our infrastructure resilient. Securing the vast cyberspace from modern day attackers such as hackers, terrorists, skilled corporate raiders and vandals has become a critical issue for all cyber consumers. Cyber crime costs the global economy over US \$400 billion per year, according to estimates by the Center for Strategic and International Studies. As the scope of cyberspace is becoming ever increasingly multidimensional with the emergence of complex networks, smart grid, smart city, the Internet of Things, connected vehicles, biometric devices and other new technologies, the need and significance of cybersecurity education and awareness cannot be overstated. Cybersecurity in these areas will require well-trained proactive decision-making workforce, who are not only aware of cybersecurity in theory but are also expert in hands-on practices. The need for a professionally trained cybersecurity workforce is crucial to the development of secure cyberspace, global competitiveness, and the economic vitality of the U.S. The recognition of the importance of cyber-literacy is reflected in the efforts of the National Security Agency's initiative on the development of the National Centers of Academic Excellence (CAE) in Cyber Operations.

T TITLE REFERENCE: RIORITIES - Identify application of the second	r FFY17 HSGP Funding Descript Nevada Cybersecurity Workforce Developr ble Nevada Commission on Homeland Secur #1 - CYBERSECURITY NO URBAN AREA STRATEGY PRI	ment rity (NCHS) Priority and Urban Area Strateg
RIORITIES - Identify application opjective to be addressed CHS FFY17 Priority ban Area Strategy Priority ROJECT IMPLEMENTATION	#1 - CYBERSECURITY NO URBAN AREA STRATEGY PRI	rity (NCHS) Priority and Urban Area Strateg
ojective to be addressed CHS FFY17 Priority ban Area Strategy Priority ROJECT IMPLEMENTATION	#1 - CYBERSECURITY NO URBAN AREA STRATEGY PRI	
ban Area Strategy Priority	NO URBAN AREA STRATEGY PRI	IORITY
ROJECT IMPLEMENTATIO		IORITY
	N - Describe how, and by whom, the Propos	
the Agencies and/or employe Quarter 1: Complete Hardwar NR Cyber Security Center Quarter 2-4: Providing technic Id Lecturers Quarter 4: Year1-end evaluat ear 2 Quarter 1: Meeting with the S Ivanced customized needs of Quarter 2-4: Advance and imp Id Lecturers	the Agencies and/or employees - UNR Cybe prove customized hands-on training; cybersed	entation, Technical Assistants and Lecturer H security awareness training - Technical Assist r Security Center essment and Refined Planning; identifying fu er Security Center curity awareness training - Technical Assista
ear 2 Quart Ivanc Quart Id Lee	er 1: Meeting with the Si ed customized needs of er 2-4: Advance and imp cturers	er 1: Meeting with the State Agencies and State Employees; Re-Ass ed customized needs of the Agencies and/or employees - UNR Cybe er 2-4: Advance and improve customized hands-on training; cyberse

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.



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

The University of Nevada, Reno is committed to Cybersecurity research and education as it has established a Cyber Security Center this year. The center has established an undergraduate minor in cybersecurity and a graduate certificate program. This grant will allow us to extend existing cybersecurity instruction to the Nevada State Workforce. Once the equipment is deployed and instructional materials are prepared, it will be possible to update training content with minimal effort.

BOX
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14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland	PROJECT ID:	С	
Project Proposal for	Date Submitted	4/5/17	
PROJECT TITLE REFERENCE:	Nevada Cybersecurity Workforce Development		

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15)	BUDGET - Describe objectives, ac	quisitions, and quantities within ea	ch category. Be specific.	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
Setup of instructional hands-on lab - 20 Desktop Computers - 1 Server Cluster - SDN capable router & switches - Software Licenses - Security devices for providing hands-on training (e.g., firewall, key-logger, smart energy meters, intrusion detection systems, WiSpy for wireless security awareness etc.)		\$ 66,000.00	\$ 66,000.00
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	CubTatal
		State while	SubTotal
			\$ 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] Shamik Sengupta, Mehmet Gunes, Ming Li, Nancy LaTourrette - No salary request 1 Postdoc/technician to develop the program, secure sandbox platform - salary requested (\$60K/year); 2 Lecturers to develop instructional content and deliver them - salary requested (\$9K/year/person)			\$ 0.00
Shamik Sengupta, Mehmet Gunes, Ming Li, Nancy LaTourrette - No salary request 1 Postdoc/technician to develop the program, secure sandbox platform - salary requested (\$60K/year); 2 Lecturers to develop instructional content and deliver them - salary requested		State-wide	\$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	С
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Nevada Cybersecurity Workforce Development

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	Kick-off meeting for the project team (assuming the project is funded before June 1st)	06/01/17	06/01/17	0
3	Survey of state, county and local agencies as well as Nevada companies	06/01/17	06/30/17	1
4	Meeting with the State agencies and State employees; assessment and planning; identifying customized needs of the agencies and/or employees	06/26/17	08/31/17	2
5	Complete hardware/software acquisition and sandbox implementation, technical assistants and lecturer hiring	06/26/17	08/31/17	2
6	Providing technical and customized hands-on training; cybersecurity awareness training	09/01/17	05/31/18	9
7	Year1-end evaluation of the program and analysis	03/01/18	05/31/18	3
8	Meeting with the State agencies and State employees; re-assessment and refined planning; identifying advanced customized needs of the agencies	06/01/18	08/31/18	3
9	Advance and improve technical and customized hands-on training; cybersecurity awareness training	09/01/18	05/31/19	9
10	Identify best practices; analysis of the program; reporting; conduct meeting with the State cybersecurity practitioners; best practice recommendation	03/01/19	05/31/19	3
11	Submit a 3-5 year plan including collected data analysis	05/01/19	05/31/19	1
12	Submit the curriculum for statewide on-site deployment	05/01/19	05/31/19	1

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.

No. This project does not have a direct nexus to terrorism.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Establishing Nevada Cybersecurity Workforce Development through this project is highly aligned with Nevada State and Nevada Commission on Homeland Security as the strategic goal to promote cybersecurity education, research, and training is clearly reflected by establishing the UNR Cyber Security Center (CSC). Cybersecurity has been identified as a key area for economic development in Nevada. The Bureau of Labor Statistics has reported that employment of cyber security analysts is projected to grow 22 percent in the next 10 years, faster than the average for all occupations. Many of these jobs will be in Nevada in industry sectors such as banking, healthcare, data centers, and online gaming. This project is therefore very well aligned to support the State's priorities for cybersecurity and economic development.

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

Yes, the project is scalable. However, with reduced funding, acquiring the operational equipment will be limited thus limiting the scope of this project. Similarly, project can be for a 1-year term with reduced salary for postdoc and lecturers.

	Nevada Homeland				PROJECT ID:	С						
	Project Proposal fo	r FFY17 HSG	P Funding De	scription	Date Submitted	4/5/17						
PROJ	ECT TITLE REFERENCE:	Nevada Cyberse	ecurity Workforce D	evelopment								
	d. Can this project continue w	ithout funding?	YES 🔵 NO 💽 Exp	lain below.								
to visible text box size	Without the funding, acquiring the operational equipments, postdoc/technicians/lecturers for workforce development wi difficult to achieve.											
nitied	e. Does this project provide a	measurable "state	-wide" benefit? YES	💿 NO 🔵 Explain be	low.							
Fields "d" and "e" are limitied to visible text box size	The outcome of this project will priorities. The effectiveness of p and qualitative assessments.											
18) 19)	THIRA COMPLETION - Please YES - Agency has particip NO - Agency has not par ADDITIONAL COMMENTARY	pated in the 2016 ticipated in the 20	Threats and Hazard	ds Identification Risk /	Assessment (THIRA) Su isk Assessment (THIRA	urvey A) Survey						
	Field is limited to the visible te	xt box	-									
	In a short period of time, we are department at UNR as can be s 2015 Spring: 90; 2015 Fall: 139; 2016 Spring: 179; 2016 Fall: 250; Our students are next generation	een from the data	ı below.									
	benefit the current State employ help us develop the workforce of	vees and agencies	s by providing them									
	This grant will allow us to deplo Developing the cybersecurity ar faculty have been hired by our of faculty member in Cybersecurity related to cybersecurity. The cy Science Foundation and Depart synergistic faculty. The faculty a with hands-on experience as pa highly demanded by the Nevada	ea is in the Depar department, many / is also being hire bersecurity resear ment of Justice grant are also actively count of their cyberse	tment and Universit of them working or ed. We anticipate th rch faculty in the CS rants, showing the i ollaborating with loc ecurity training. Thus	ty strategic plan as we cybersecurity related is growth in faculty will SE Department have b mportance of this rese al industry partners in	II. In the last few years research. This year, a l enhance the course of een awarded many Na earch area and the cap terested in hiring UNR	s, several in additional offerings ational ability of students						

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original
Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

						ETAIL BUDG	rĽ I								
	Agency Name	University of Nevada, Reno	Name & Contact #	Shamik Sen Cyber Secur ssengupta@ 775-784-69	unr.edu	Grant Manager Name & Contact #		loman@unr.edu	Projects Analyst						
	IJ TITLE:	Nevada Cybersecurity Workforce Develo	opment												
		One Budget Per Funding Stream													
		SHSP													
e #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1	Postdoc	Develop the program, and deploy sandbox	New		5000	100%	24						\$ 120,000.00		
2	Lecturer	Develop instructional material and deliver	New		6000	25%	12						\$ 18,000.00		
3	Lecturer	Develop instructional material and deliver	New		6000	25%	12	• • • • • • • • •					\$ 18,000.00		
4	Personnel							\$-					\$-		
	Sub-Total							\$ 156,000.00						\$ -	
SON	NEL COST NARR	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAII	NE IN DETAIL	L THE POSITIO	NS AND DELIVER	ABLES. NA	RRATIVE WILL E	BE USED TO ENS	SURE ITEMS LIST	ED WILL BE COMPL	ETED IN THE			•
*	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wi affect your program
5	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above			1250	100%	24	¢ 00.400.00					¢20,400,00		
					1350 1620	100% 25%	24						\$32,400.00 \$4,860.00		
6 7	Benefits Postdoc) 12) 12	\$ 4,860.00 \$ 4,860.00					\$4,860.00 \$4,860.00		
	Benefits Postdoc Lecturer Lecturer				1620	25%	12	\$ 4,860.00 \$ 4,860.00					\$4,860.00		
6 7 8	Benefits Postdoc Lecturer Lecturer Fringe Sub- Total		PLAINE IN	DETAIL THE	1620 1620	25% 25%	- 12 - 12 -	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00	ED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	IN THE	\$4,860.00 \$4,860.00	\$0.00	
6 7 8 INGE (Benefits Postdoc Lecturer Lecturer Fringe Sub- Total COST NARRATIVE orates have a 11.7	Personnel Costs above		Previous Funding	1620 1620	25% 25% ND DELIVERABLE Travel Reference # from	= 12 - 12 -	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	IN THE Funding Source	\$4,860.00 \$4,860.00 \$0.00	\$0.00	Line Item Reductions Descriptions on how it wil
6 7 8 NGE (turers	Benefits Postdoc Lecturer Lecturer Total COST NARRATIVE orates have a 11.7' (LOA) have a 3.15'	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX % Per Gross Salary Fringe and 699.25 monthly insurance. PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous	1620 1620 POSITIONS A Category of	25% 25% ND DELIVERABLI Travel Reference	= 12 12 	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00 TIVE WILL BE US		Primary Core	Secondary Core	Funding	\$4,860.00 \$4,860.00 \$0.00 \$42,120.00	Line Item	
6 7 8 t Doct t Doct 2 #	Benefits Postdoc Lecturer Lecturer Fringe Sub- Total Cost MARRATIVE orates have a 11.7 (LOA) have a 3.15 CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVED PLEASE EX % Per Gross Salary Fringe and 699.25 monthly insurance. 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	Purchase Type Select	Previous Funding	1620 1620 POSITIONS A Category of	25% 25% ND DELIVERABLE Travel Reference # from	= 12 12 	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00 TIVE WILL BE US	Total Cost	Primary Core	Secondary Core	Funding	\$4,860.00 \$4,860.00 \$40.00 \$42,120.00 Total Budget \$0.00	Line Item	Descriptions on how it wi
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6 7 8 * Doct tuurers 9 10 11	Benefits Postdoc Lecturer Lecturer Fringe Sub- Total COST NARRATIVE Orates have a 11.7 (LOA) have a 3.15 CATEGORY Travel Planning Training Exercise Equipment Organization	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVED PLEASE EX % Per Gross Salary Fringe and 699.25 monthly insurance. 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	Purchase Type Select	Previous Funding	1620 1620 POSITIONS A Category of	25% 25% ND DELIVERABLE Travel Reference # from	= 12 12 	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00 TIVE WILL BE US	Total Cost	Primary Core	Secondary Core	Funding	\$4,860.00 \$4,860.00 \$42,120.00 \$42,120.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it wi
6 7 8 NGE (t Doct turrers 2 # 9 10 11 12 13 14 15	Benefits Postdoc Lecturer Lecturer Fringe Sub- Total Cost MARRATIVE orates have a 11.7 (LOA) have a 3.15 CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVED PLEASE EX % Per Gross Salary Fringe and 699.25 monthly insurance. 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	Purchase Type Select	Previous Funding	1620 1620 POSITIONS A Category of	25% 25% ND DELIVERABLE Travel Reference # from	= 12 12 	\$ 4,860.00 \$ 4,860.00 \$ - \$ 42,120.00 TIVE WILL BE US	Total Cost	Primary Core	Secondary Core	Funding	\$4,860.00 \$4,860.00 \$0.00 \$42,120.00 \$42,120.00 \$42,120.00 \$42,120.00 \$42,120.00 \$42,120.00 \$42,120.00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0,000 \$0	Line Item	Descriptions on how it v

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	C
	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														
17								-					\$0.00			
18								-					\$0.00			
19								-					\$0.00			
20								•					\$0.00			1
21								-					\$0.00			i i
	Planning Sub- Total							ş -					\$0.00	\$0.00		1
PLANNIN	G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL 1	THE POSITION	S AND DELIVERA	BLES. NAR	RATIVE WILL BE	USED TO ENSU	IRE ITEMS LISTEI	D WILL BE COMPLE	TED IN THE				
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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TI INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.	0												
22								\$-					\$-		
23								\$-					\$-		
24								\$-					\$-		
25								\$-					\$-		
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27								\$ -					\$ -		
	Organization Sub-Total							\$-					\$-	-	
ORGANIZ	ATION COST NAF	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	AIL THE POSI	TIONS AND DELIV	ERABLES.	NARRATIVE WIL	L BE USED TO I	ENSURE ITEMS LI	STED WILL BE COM	IPLETED IN			

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 an AEL	J											
28	Desktop	PC for sandbox	New		20.00	1,000.00	\$ 20,000.00					\$ 20,000.00		
29	Server	Server cluster to interact with networking and security	New		1.00	15,000.00						\$ 15,000.00		
30		SDN capable router for sandbox	New		1.00							\$ 10,000.00		
31		SDN capable switch for sandbox	New		2.00							\$ 11,000.00		
32	Licence	Software licenses for sandbox	New		20.00	500.00	\$ 10,000.00					\$ 10,000.00		
33							ş -					\$ -		
34							» -					ş -		
35							ş -					ş -		
36 37							\$ - \$		-			\$ - \$ -		
38							s -					э - \$ -		1
39							\$ -					ş -		
	EQUIPMENT						φ					Ψ		
							\$ 66,000.00					\$ 66,000.00		

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	C
	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	÷				-	-								
40											\$ -		\$-			
41											\$ -		\$			
42											\$ -		\$ -			
43											\$ -		\$ -			
44											\$ -		\$-			
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48											\$ -		\$-			
49											\$ -		\$ -			
	Training Sub∙ Total										\$ -		\$ -	-		
TRAINING	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I	EXPLAINE	N DETAIL T	HE POSITIONS	AND DELIVERAB	BLES. NARF	RATIVE WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE				

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.ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
E	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)												-	
50											\$-		\$-		
51											\$-		\$ -		
52											\$ -		\$ -		
53											\$ -		\$-		
54											\$ -		\$-		
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57											\$ -		\$ -		
т	Exercise Sub- Fotal										\$-		\$-	-	
XERCISE	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL 1	HE POSITIONS	AND DELIVERAE	BLES. NARF	RATIVE WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

	Total Original Line Item Budget Reductions Total	
All hudgets require an email approval from the financial and/or grant manager		<u>\$ 264,120.00</u> \$ -

All budgets require an email approval from the financial and/or grant manager

	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	D			
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/5/17			
1)	PROJECT TITLE:	Southern Nevada SCADA	A System Cybersecurity Assessm	nent				
2)	Proposing/Lead Agency:	Las Vegas Valley Water	S Vegas Valley Water District					
3)	1° Project Manager Name/Title:	Matthew Beatty, Informat	Aatthew Beatty, Information Security & Compliance Coordinator					
	1º Project Manager Contact Info:	Phone: (702) 822-8529	Email: matthew.beatty@lvvwd.co	om				
4)	2 [°] Project Manager Name/Title:	Kathy Flanagan, Manage	ment Analyst					
	2 ^o Project Manager Contact Info:	Phone: (702) 258-3173	Email: kathy.flanagan@lvvwd.co	om				
5)	Finance/Grant Contact Name/Title:	Shera Miyashiro, Account	Shera Miyashiro, Accountant					
	Finance/Grant Contact Info:	Phone: (702) 822-8460	Email: shera.miyashiro@lvvwd.c	com				
6)	CLASSIFICATION - Check the p	primary intention of the Pl	roposed Project:	(Choose one:			

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	\bigcirc
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

To establish a secure baseline of cybersecurity readiness of the SCADA infrastructure in order to detect and prevent terrorist attacks on the water systems serving Clark County for the health and safety of the residents and visitors of Southern Nevada.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
Secondary Core Capability:	Forensics and Attribution [Mission Area: PREVENTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX .

This security assessment will provide information needed to protect against cyber attacks meant to damage Southern Nevada's water systems through the unauthorized use and exploitation of the LVVWD's SCADA infrastructure.

	Nevada Homeland	PROJECT ID:	D					
	Project Proposal for	Date Submitted	4/5/17					
PRO	PROJECT TITLE REFERENCE: Southern Nevada SCADA System Cybersecurity Assessment							
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS) Prio	rity and Urban Area	a Strategy				
	NCHS FFY17 Priority	#1 - CYBERSECURITY	#1 - CYBERSECURITY					
	Urban Area Strategy Priority	#1 - CYBERSECURITY	#1 - CYBERSECURITY					

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 Las Vegas Valley Water District (LVVWD), on behalf of the Southern Nevada Water Authority, will contract with Mandiant Corporation (a FireEye company), to deploy the required technologies needed to assess security gaps with NIST standards. Mandiant will deliver to LVVWD detailed reports on readiness, gaps and prioritized mitigation tasks. Mitigation efforts will be performed by LVVWD staff.

SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. 12)

Т	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Southern Nevada Water Authority	Clark County	Kathy Flanagan
12(b)	Las Vegas Valley Water District	Special Government District	Kathy Flanagan
12(c)			

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

No financial obligation will be created by the project, although future LVVWD budgets may reflect line items necessary to incorporate security measures recommended in the security assessment.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

100	0	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		2
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:DProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/5/17

PROJECT TITLE REFERENCE:

Southern Nevada SCADA System Cybersecurity Assessment

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
Development of a Security Assessment plan	\$ 255,300.00	\$ 0.00	\$ 255,300.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 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]	\$ 0.00	State-wide \$ 0.00	SubTotal \$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS			

15)

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	D
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Southern Nevada SCADA System Cybersecurity Assessment

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

	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	ICS Sensor technology deployment	10/02/17	10/06/17	0
3	ICS architecture review and data gathering	10/09/17	10/13/17	0
4	Data analysis	10/16/17	10/20/17	0
5	Preparation of recommendations and report deliverables	10/23/17	10/27/17	0
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.

LVVWD is under constant attack from sources that are both domestic and international.

ICS/SCADA system attacks are increasing globally and the high-profile of LVVWD as a world class facility makes it a prime target.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with the Commission's goal of ensuring the safety of Nevada's residents and the critical infrastructures of the State by identifying the susceptibility of those infrastructures to terrorist acts.

Information obtained from this assessment could be used by the Commission in its annual briefing to the Governor on the State's preparedness, including response plans and vulnerability assessments of utilities, and public and private entities.

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

This project cannot be scaled, except to assess each system in a separate phase. Doing so would increase costs due to duplication of effort.

The amount requested will fully fund the project as proposed and allow the LVVWD to use its budgeted dollars to secure its perimeter networks.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	D
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
RO.	IECT TITLE REFERENCE:	Southern Nevada SCADA System Cybersecurity Asse	ssment	
box size	Funding for this work is included HSGP grant funding will allow th	thout funding? YES (•) NO () Explain below. in the LVVWD's FY 2017/2018 budget. e LVVWD to address additional cybersecurity concerns	that would otherwise be	subject to
"e" are limitied to visible text box	budgetary constraints.			
Fields "d" and "e" are limit	Securing the region's water system million annual visitors, it benefits Southern Nevada accounts for a	measurable "state-wide" benefit? YES NO Explain erms not only benefits the health and safety of Southern the entire State of Nevada. pproximately 71 percent of the State's economy. An atta e public health and safety of the region, it would negative	Nevada's 2 million resid	stribution

- **18)** THIRA COMPLETION Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:
 - **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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

A 2011 report titled "Potential Impacts of Water Resource Uncertainty in Southern Nevada," prepared by Applied Analysis states that any compromise to Southern Nevada's water supply would negatively impact the entire state, including economy, employment, business investment, public health, public safety and criminal justice programs.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

				LI	AF LIEW D	ETAIL BUDG	TET .								
	Agency Name		Name & Contact #	Matthew Be 702-822-85		Grant Manager Name & Contact #	Kathy Flana	ngan, 702-258-31	173						
		÷ .							1						
	IJ TITLE:	Southern Nevada SCADA System Cyber	securit	y Assess	ment										
		One Budget Per Funding Stream													
		SHSP													
	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
								\$-					\$ -		
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1	Personnel							\$ -					\$-		
	Sub-Total							\$-					\$-	\$-	
SON	NEL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAII	NE IN DETAI	THE POSITIO	NS AND DELIVER	ABLES. NAP	RRATIVE WILL B	E USED TO ENSU	IRE ITEMS LISTE	D WILL BE COMPLE	TED IN THE			
APPI	LICABLE			Previous											Line Item Reductions
#	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
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5	Fringe Sub	-					-	\$ -						* 0.00	
	Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN		POSITIONS A	ND DELIVERABLE	S. NARRAT	s -	ED TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED	IN THE GRAN	\$0.00	\$0.00	
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T APPI	Total COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX		Previous		Travel Reference		\$ - IVE WILL BE USE					\$0.00		
IGE C APPI #	Total COST NARRATIVE LICABLE 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 NON-COMPLIANCE) Expenses (Billed at cost not to exceed 15% of total	Purchase Type Select	Previous Funding Type	Category of Each Travel	Travel Reference # from		\$ IVE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00	Line Item	Descriptions on how it will
GE C APPI #	Total OST NARRATIVE LICABLE CATEGORY Travel Planning Training 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)	Purchase Type Select Type	Previous Funding	Category of	Travel Reference # from		\$ IVE WILL BE USE Cost for each		Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$28,800.00 \$0.00	Line Item	Descriptions on how it will
GE C APPI # 9 0 1	Total OST NARRATIVE LICABLE CATEGORY Travel Planning Training 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) Expenses (Billed at cost not to exceed 15% of total	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from		\$ IVE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$28,800.00 \$0.00	Line Item	Descriptions on how it will
GE C APPI #	Total OST NARRATIVE LICABLE CATEGORY Travel Planning Training 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) Expenses (Billed at cost not to exceed 15% of total	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from		\$ IVE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$28,800.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
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GE C APPI # 0 1 2 2 3 4 5	Total OST NARRATIVE LICABLE CATEGORY Travel Planning Training 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) Expenses (Billed at cost not to exceed 15% of total	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from		\$ IVE WILL BE USE Cost for each	Total Cost - 28,800.00 - - - - - - - - - - - - - - - - -	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$28,800.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
GE 0 APPI #	Total OST NARRATIVE LICABLE CATEGORY Travel Planning Training 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) Expenses (Billed at cost not to exceed 15% of total	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from		\$ IVE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$28,800.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will

UVWD shall reimburse Mandiant for the following expense categories that are directly attributable to work performed:
 Travel and living expenses.
 Mileage in company or personal vehicles at the rate approved by the U.S. General Services Administration as of the contract date.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	1											
17	Planning	ICS Architecture Review and data gathering (on-site): Kickoff meeting; Security architecture workshops with technical staff; Gather documentation; Obtain firewall configurations; Collect network packet captures. Data Analysis (off-site): Review documentation; Analyze firewall configurations; Analyze network packet capture data; Analyze log data. Preparation of recommendations and report deliverables.	New	Other	1.00	192,000.00	192,000.00					\$192,000.00		
18												\$0.00		
19							-					\$0.00		[
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$ 192,000.00					\$192,000.00	\$0.00	

Phase 1 - ICS Architecture Review

Mandiant will assess the defensibility of the ICS architecture at LVVWD. A defensible ICS architecture must be clearly documented, inventoried, and understood. The ICS architecture review methodology consists of the following combination of documented, inventoried, and understood. The ICS architecture review methodology consists of the following combination of documented, inventoried, and understood. The ICS architecture review methodology consists of the following combination of documented, inventoried, and understood. The ICS architecture review methodology consists of the following combination of documented, inventoried, and understood. The ICS architecture review methodology consists of the following combination of documented, inventoried, and understood.

» Step 1: Document Current Network Understanding – Mandiant will review any existing architecture diagrams, dataflow, and designs. They will inventory and evaluate industrial communications protocols that are in use. They will also review any existing security standards for hardware and software deployment and assess how they translate into vendor procurement requirements for new equipment entering the environment.

Step 2: Develop Threat Model – Mandiant will take the resulting architecture diagrams and create the basis for a threat model during an interactive workshop with the LVVWD IT and Operations/Engineering staff. Mandiant consultants will build a visual representation of the possible attacks on the control system, based on their extensive knowledge of real-world attacker tactics. This threat model will aid the prioritization of security control implementation for ICS, identifying the attack vectors most likely to be used. The completed threat model will be delivered with the final report.

> Step 3: Prioritize Controls – Mandiant will facilitate a discussion with the LVVWD's technical team to identify security controls that appropriately address the identified threats. They will provide recommendations based on their experience and will assist the team in developing value-based value-based prioritization of the potential controls – considering factors such as risk reduction, cost/effort, and speed of implementation. Where applicable, Mandiant consultants will reference relevant technical standards such as NIST 800-82 and IEC 62443 (formerly ISA9). The final list of controls and prioritization will be included in the final report.

Phase 2 - ICS Network Health Check

Mandiant will assess the LVVWD's site to determine how well isolated and protected its ICS network is in practice. This review will validate the as-built network protection of that ICS:

» Step 1: Network Isolation Review – Mandiant will analyze either a) LVVWD-supplied network packet capture file (pcap) from an agreed upon vantage point in the ICS network to determine proper network segmentation of the ICS or b) traffic captured by a FireEve PX device deployed to the LVVWD ICS network.

» Step 2: Security Device Configuration Review – The efficacy of the configuration/rules of network security devices, such as firewalls, will be reviewed. Mandiant will examine the rules for divergence from the National Institute of Standards and Technolog (NIST) SP800-82: Guide to Industrial Control Systems (ICS) Security, for example:

* Inbound traffic to the ICS network should always be routed through a DMZ

* Outbound traffic from the ICS network should be restricted to essential communications (port and services)

* All outbound traffic from the ICS to the corporate network should be source- and destination-restricted by service and port

* There should be a deny-all/permit-none rule as the default for every interface

* All permit/allow rules should be IP address (or range), service, and port specific, and maintain state, if appropriate

* Protocols allowed between ICS networks and the DMZ should generally not be allowed between the DMZ and corporate network

* ICS networks should not be allowed to directly access, and should never be directly connected, to the Internet

Deliverables

After completion of the SCADA vulnerability assessments, Mandiant will provide the following items:

• Executive Summary: The Executive Summary will provide managers a high-level overview of the engagement. It highlights the strategic areas for improvement and provides an overall analysis of the security posture of the environment.

* Technical Report: The Technical Report provides detailed information about the assessment, including the methodology and tools used by Mandiant consultants, as well as the assessment findings. Each finding includes an explanation of the systemic dause,

risk rating, and detailed remediation steps. All identified vulnerabilities will be prioritized, and an assessment of the potential cost and effort required to mitigate the vulnerabilities will be provided.

* Technical Presentation: Along with the written Technical Report, Mandiant consultants can present a formal out-brief of the findings to an appropriate technical audience identified by the LVVWD.

* Executive Presentation: Along with the written Executive Summary, Mandiant consultants will present a formal out-brief of the assessment results at an LVVWD corporate office to an appropriate audience determined by LVVWD.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.												
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23							\$ -					\$-		
24							\$ -					\$-		
25							\$ -					\$-		
26							\$ -					\$-		
27							\$-					\$-		
	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 TH

NOT APPLICABLE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 AN AEL												

28	Equipment	Technology Fees to support Assessment activity: FireEye 1GB PX Sensors; FireEye Threat Analytics Platform up to 5k EPS	New	Other	2.00	15,000.00	\$ 30,000.00			\$	30,000.00		ח[
29							\$ -			\$	-		
30							\$-			\$	-		
31							\$ -			\$	-		
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39							\$ -			\$	-		
	EQUIPMENT Sub-Total						\$ 30,000.00			\$	30,000.00	-	
Mandiant VVWD I Connec Connec Dual-ho ICS pro	will analyze either CS network. Mand trivity from the ICS trivity from the busi omed devices tocols traversing the	iness network to ICS network								3			

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40											\$-		\$-		
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42											\$ -		\$ -		
43											\$ -		\$ -		
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49			-	_							\$-		\$ -		
	Training Sub- Total	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E									\$ -		\$-	-	

D

NOT APPLICABLE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$ -		
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52											\$-		\$-		
53											\$-		\$-		
54											\$-		\$-		
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56											\$ -		\$-		
57											\$ -		\$-		
	Exercise Sub- Total										\$-		\$-	-	
EXERCISI	COST NARRATI	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE I	N DETAIL T	HE POSITIONS	AND DELIVERAB	LES. NARRA	ATIVE WILL BE U	ISED TO ENSURI	E ITEMS LISTED	VILL BE COMPLET	ED IN THE			
												1			

N	IOT APPL	ICABLE												Total Original Budget	Line Item Reductions Total	
														\$ 250,800.00	\$ -	
Α	All budgets require an email approval from the financial and/or grant manager															

	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	E									
	Project Proposal for	FFY17 HSGP Fund	ing Description	Date Submitted	4/4/17									
1)	PROJECT TITLE:	Mesquite Network Securi	ty	-										
2)	Proposing/Lead Agency:	City of Mesquite Nevada Fire Department												
3)	1° Project Manager Name/Title:	Spencer K. Lewis Firefighter/Paramedic												
	1° Project Manager Contact Info:	Phone: (702) 375-0426	Email: slewis@mesquitenv.gov											
4)	2 [°] Project Manager Name/Title:	Dirk Marshall IT Director												
	2 ^o Project Manager Contact Info:	Phone: (702) 346-5295	Email: dmarshall@mesquitenv.g	ov										
5)	Finance/Grant Contact Name/Title:	Dave Empey Finance Director												
	Finance/Grant Contact Info:	Phone: (702) 346-5295 Email: dempey@mesquitenv.gov												
6)	CLASSIEICATION - Chack the	rimary intention of the D	ranasad Brajast	C	noose one.									

O) Check the primary intention of the Proposed Project:

noose one.

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

This project will increase the city firewall security with emphasis on protecting the critical infrastructural that is controlled, monitored, and accessed by our network such as traffic lights and communications system. The increase of firewall protection will also increase the protection of personal information that is stored on our network from all departments including the court system, police records, business licensing, building plans, and public works projects and plans. By increasing our firewall we decrease the likelihood of access and improper control of infrastructure and decrease the possibility of identity theft with very secure storage of private personal information. With this project we will also have better tracking capabilities of those accessing the network allowing us to produce better reports as well as locate those that are attempting access without proper permission.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
Secondary Core Capability:	
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project fully aligns with the Cybersecurity mission and will protect electronic communications systems that are on the network and being used by Police, Fire/EMS, and public works. A stronger firewall will protect information stored on the network especially that from the court system, police, fire/EMS, licensing, and buildings department that has large amounts of personal information and information about the infrastructure that must remain confidential. By obtaining and using a system that will better track the access of the network will also allow us to better track and locate any threat that is detected.

Nevada Homeland Security Grant Pr				t Progra	m (HSGP)		PROJECT ID:	E
	Project Proposal for	FFY	17 HSGP F	unding I	Description		Date Submitted	4/4/17
PROJECT TITLE REFERENCE: Mes		Mesq	quite Network Security					
10)	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed							
	NCHS FFY17 Priority		#1 - CYBERSECURITY					
	Urban Area Strategy Priority		#1 - CYBERSECURITY					
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 This project will be implemented by the IT department of the City of Mesquite who will purchase all equipment and software							
FIELD IS LIMITED TO VISIBLE TEXT BOX	Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform what work This project will be implemented by the IT department of the City of Mesquite who will purchase all equipment and software and begin upgrades. The process of full purchasing and implementation will take approximately 4-6 months							

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	All government of City of Mesquite (PD, FD, Public Works, Buildings, City Council, Etc.)	City	Spencer K. Lewis
12(b)			
12(c)			

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

The City IT department will use already allocated funds to continue necessary subscriptions to ensue project is sustained for the usable life.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Secu	rity Grant Program (HSGP)	PRC	JECT ID:	E
Project Proposal for FFY1	7 HSGP Funding Description	Date	Submitted	4/4/17
JECT TITLE REFERENCE: Mesqu	ite Network Security			
BUDGET - Describe objectives, acquisition	ns, and quantities within each category. Be spec	cific. Identify (JASI 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 organiz	ation, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
				\$ 0.00
15c) Equipment [Procurement and installation		LV-UASI	State-wide	SubTotal
Network Firewalls and server controls (H	lardware and Software)			
		\$ 18,620.00		\$ 18,620.00
15d) Training [Development and delivery of tr	aining 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
		\$ 18,620.00	\$ 0.00	\$ 18,620.00

\$ 0.00

3

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	Е
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

PROJECT TITLE REFERENCE:

Mesquite Network Security

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	Purchase all hardware and software	06/01/17	08/01/17	2
3	Install all Hardware ans Software	07/01/17	09/01/17	2
4	System training and testing	08/01/17	10/01/17	2
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.

Terrorist often learn and gain access to critical infrastructure before and during any attack. A major target for them is communications especially that of public safety. This project will greatly decrease the ability for access to our public safety communications network and protect the encryption that keeps this crucial line of communication protected. This project will also detour terrorism as it protects private personal information that is stored on our network as well as the information about all city infrastructure and its accessibility.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Cybersecurity has been the #1 identified threat through the THIRA and this addresses those issues for the City of Mesquite and can become a best practices model for other cities with our similar demographics.

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

Unfortunately Firewalls are not items that can be partially built therefore this project needs 100% commitment and funding before it is started.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	E
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17
PROJ	ECT TITLE REFERENCE:	Mesquite Network Security		
	d. Can this project continue w	ithout funding? YES 🜔 NO 💽 Explain below.		
and "e" are limitied to visible text box size	However our budget has been d therefore if the project is not gran e. Does this project provide a	measurable "state-wide" benefit? YES 💿 NO 🔵 Explain be	and Software have b	been cut,
Fields "d" and "e" are	for all users as well as those that state as well as the federal gove	to all state entities however when cybersecurity is increas t they communicate with. As we communicate and work wi rnment we are benefiting their security and decreasing their <i>indicate the participation level in completing the 2016 1</i>	th many entities throu r vulnerability.	ughout the

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



	Nevada Homeland	Security Grant Pi	rogram (HSGP)	PROJECT ID:	F
	Project Proposal for	FFY17 HSGP Fund	ding Description	Date Submitted	4/5/17
1)	PROJECT TITLE:	Nye County Unmanned	Aircraft System & Support Vehicle	;	
2)	Proposing/Lead Agency:	Nye County			
3)	1° Project Manager Name/Title:	Vance Payne			
	1° Project Manager Contact Info:	Phone: (775) 751-4279	Email: vpayne@co.nye.nv.us		
4)	2 [°] Project Manager Name/Title:	Missy Molt	-		
	2 ^o Project Manager Contact Info:	Phone: (775) 751-4279	Email: mmolt@co.nye.nv.us		
5)	Finance/Grant Contact Name/Title:	Danielle Drevdahl			
	Finance/Grant Contact Info:	Phone: (775) 751-6394	Email: ddrevdahl@co.nye.nv.us		
- 1					

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Nye County, NV, is over 18,000 square miles in size. The main transportation routes in Nye County are Hwy 95, Highway 372 and Highway 6. These are the main transportation corridors for low level nuclear waste in Nye County. Our goal is to create a safer, coordinated and informed response community in Nye County, NV, by utilizing an unmanned aircraft system (UAS) for collection of information, surveillance, observation of suspicious activities, hazard identification, and coordination of response efforts. This capability would tie directly into combating terrorism. Information gathered with this UAS would greatly expand our ability to identify and assess activities or events that are extremely difficult to currently see due to our large, diverse geographical size. Information obtained with aerial surveillance would directly benefit damage assessment, threat potentials, public works attacks, lost persons locating, communications site assessments, and incident size for County personnel and departments such as Search and Rescue, Emergency Management, Public Works, Information Technology and the Assessors office. In addition, Nye County DEM works closely with the Nevada National Security Site (NNSS), which is the destination for much of the low level nuclear waste transported throughout the county. US Ecology, a closed state of Nevada low level radioactive waste site is also located in Nye County. In October of 2015, US Ecology was the site of an industrial fire incident that involved multiple agencies within Nye County, Clark County, Inyo County, military assets, and State of Nevada assets. Immediate access to a UAS would have greatly assisted in the evaluation and size determination of the event. Additionally, Nye County Information Technology develops, maintains, and monitors a large radio communications network that includes vulnerable mountaintop radio repeaters which provide mission essential radio operation. Public Works and the Assessor's Office would utilize the UAS to populate information into GIS that may be utilized for damage/threat assessment.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Intelligence and Information Sharing is currently difficult to share among entities. This request would feed intelligence and data directly to our GIS for global decision making by multiple departments in order to manage positive outcomes during any terrorist incident, perceived threat, or large scale emergency. Information and intelligence that can be communicated through GIS is more easily shared and analyzed between County departments, neighboring counties, the Nevada Threat Analysis Center and the Southern Nevada Counter Terrorism Center, which improves Operational Coordination. Additionally, infrastructure monitoring and evaluation can be accomplished for sites that are difficult to access or impossible to access after heavy snow or rain events. Thermal imaging with GIS overlay capability will allow accurate analysis of lost person location, hazardous materials release, public works conditions, secure site security breaches after dark, fire location/spread, and suspicious person tracking after dark.

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	F
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJECT TITLE REFERENCE:	Nye County Unmanned Aircraft System & Support Vehicle		

10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed

NCHS FFY17 Priority

Urban Area Strategy Priority

#2 - INTELLIGENCE AND INFORMATION SHARING

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

If approved, Nye County DEM will be responsible for ordering all equipment; receipt of equipment; payment of invoice(s); scheduling of training on all equipment; verification all users understand proper operation of the equipment; and use of the UAS and vehicle. Nye County DEM will obtain quotes for the UAS to get the best pricing and quality. The support vehicle will be resourced from the Nevada Fleet Purchasing Program, which gives member agencies the best pricing and value available.



FIELD IS LIMITED TO VISIBLE TEXT BOX

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Nye County DEM	Nye County, NV	Vance Payne
12(b)			
12(c)			

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

Nye County shall assume full responsibility for the continued education/training and maintenance of the UAS and equipment associated.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		1
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	F
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Nye County Unmanned Aircraft System & Support Vehicle

cific. Identify l	JASI and State	cost.
LV-UASI	State-wide	SubTota
		\$ 0.00
IV-UASI	State-wide	SubTota
		5451014
	\$ 0.00	\$ 0.00
	State-wide	SubTota
	\$ 186,000.00	\$ 186,000.
	State-wide	SubTota
	\$ 0.00	\$ 0.00
LV-UASI	\$ 0.00 State-wide	\$ 0.00 SubTota
LV-UASI		
LV-UASI	State-wide	SubTota \$ 0.00
	State-wide \$ 0.00	SubTota \$ 0.00
	State-wide \$ 0.00 State-wide	SubTota \$ 0.00 SubTota
	LV-UASI	LV-UASI State-wide \$ 0.00 LV-UASI State-wide LV-UASI State-wide \$ 186,000.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	F
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

16)

Nye County Unmanned Aircraft System & Support Vehicle

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	Obtain County District Attorney and Board of County Commissioner approval of award.	10/01/17	01/01/18	3
3	Order UAS, van, command center equipment	01/01/18	04/01/18	3
4	Receive equipment	04/01/18	11/01/18	6
5	Work with vendors on installation of equipment into the support vehicle	11/01/18	02/01/18	3
6	Pay all applicable invoices	02/01/18	05/01/18	3
7	Training on UAS & vehicle command center	05/01/18	08/01/18	3
8	Place the system into service after usage parameters and policies have been practiced on-site.	08/01/18	11/01/18	3
9	Provide a demonstration of UAS and vehicle to County Commissioners, County Manager, and any other applicable personnel.	11/01/18	02/01/19	3
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. Having immediate access to a UAS provides the information bridge for strategy and tactics in combating terrorism. Collected information and data obtained via UAS gives decision makers new tools to monitor, evaluate, and estimate threat levels.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

It addresses three capabilities-

* Intelligence and information sharing

* Operational Coordination

* Infrastructure Security

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

Funding is not scalable as this UAS will come equipped with the software needed by all Nye County departments, An assigned vehicle will safely store, support, and provide a safe operator environment.

Nevada Homelan	d Security Grant P	rogram (HSGP)	PROJECT ID:	F		
Project Proposal fo	r FFY17 HSGP Fun	ding Description	Date Submitted	4/5/17		
ECT TITLE REFERENCE:	Nye County Unmanned	Aircraft System & Support Vehi	cle			
d. Can this project continue w	rithout funding? YES 💽	NO 🔵 Explain below.				
After the initial Grant purchase, operation.	most of the recipient depa	artments have committed mainte	enance support for long	-term		
e. Does this project provide a	measurable "state-wide" b	enefit? YES 💽 NO 🔘 Explain l	below.			
e. Does this project provide a measurable "state-wide" benefit? YES NO Explain below. The information and surveillance data collected by this system has direct State-Wide benefit through easy digital sharing of terrorist activity, transportation incidents, fixed facility incidents, and suspicious activity with all of our non-Nye County partners with parallel missions and responsibilities. These include, but are not limited to Nevada Highway Patrol, Nevada Division of Emergency Management, Nevada Division of Environmental Protection, other law enforcement agencies, and the Nevada National Security Site.						
YES - Agency has particip NO - Agency has not par ADDITIONAL COMMENTAR Field is limited to the visible te Having a dedicated support ver	pated in the 2016 Threats ticipated in the 2016 Thre Y - Please indicate any a xt box nicle to store and operate t	and Hazards Identification Risl eats and Hazards Identification dditional project commentary the UAS from provides for safe a	k Assessment (THIRA) S Risk Assessment (THIRA you feel may be impor and secure housing of t	urvey A) Survey tant. he valuable		
protection. The Department of H fund a coordinated conduit for t provide fresh intelligence inform With Nye County's location on t County, Esmerelda County, Mir	Homeland Security has be his information. This Nye (nation to all our county dep he transportation corridor, neral County, and White P	come the lead agency in the Ur County project is intended to dir partments and our neighbors, St we will provide this tool to our r ine County. Additionally, suppor	nited States to coordinat ectly address local secu- tate agencies, and Fede- neighbors and partners t will be provided to our	e and help urity and eral partners. in Clark		
	Project Proposal fo ECT TITLE REFERENCE: d. Can this project continue w After the initial Grant purchase, operation. Project continue w After the initial Grant purchase, operation. Project provide a The information and surveillance terrorist activity, transportation in with parallel missions and respondent terrorist activity, transportation in with parallel missions and respondent terrorist activity Site. THIRA COMPLETION - Please Image: Provide for the state of	Project Proposal for FFY17 HSGP Funder ECT TITLE REFERENCE: Nye County Unmanned d. Can this project continue without funding? YES • After the initial Grant purchase, most of the recipient deparation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. e. Does this project provide a measurable "state-wide" both operation. the information and surveillance data collected by this system operation. the information and surveillance data collected by this system operation. the information and surveillance data collected by this system operation. the information and surveillance data collected by this system operation. the information and surveillance data collected by this system operation. with parallel missions and responsibilities. These include, Emergency Management, Nevada Division of Environmerer National Security Site. THIRA COMPLETION - Please indicate the participated in the 2016 Threats MO - Agency has not participated in the 2016 Threats MO - Agency	 d. Can this project continue without funding? YES (•) NO () Explain below. After the initial Grant purchase, most of the recipient departments have committed mainted operation. e. Does this project provide a measurable "state-wide" benefit? YES (•) NO () Explain 1 The information and surveillance data collected by this system has direct State-Wide benetrorist activity, transportation incidents, fixed facility incidents, and suspicious activity with parallel missions and responsibilities. These include, but are not limited to Nevada H Emergency Management, Nevada Division of Environmental Protection, other law enforce National Security Site. THIRA COMPLETION - Please indicate the participation level in completing the 2016 () YES - Agency has participated in the 2016 Threats and Hazards Identification Ristional Security Site. YES - Agency has not participated in the 2016 Threats and Hazards Identification Ristional Security is limited to the visible text box Having a dedicated support vehicle to store and operate the UAS from provides for safe a equipment. The mobile command center inside the vehicle will make operations easier at additional range. The collection, dissemination, and sharing of different kinds of information is the base of protection. The Department of Homeland Security has become the lead agency in the UF fund a coordinated conduit for this information. This Nye County project is intended to dir provide fresh intelligence information to all our county departments and our neighbors, SY With Nye County's location on the transportation corridor, we will provide this its ool to our r County, Esmerelda County. Mineral County, and White Pine County. Additionally, support 	Project Proposal for FFY17 HSGP Funding Description Date Submitted ECT TITLE REFERENCE: Nye County Unmanned Aircraft System & Support Vehicle d. Can this project continue without funding? YES (•) NO() Explain below. After the initial Grant purchase, most of the recipient departments have committed maintenance support for long-operation. e. Does this project provide a measurable "state-wide" benefit? YES (•) NO() Explain below. The information and surveillance data collected by this system has direct State-Wide benefit through easy digital terrorist activity, transportation incidents, fixed facility incidents, and suspicious activity with all of our non-Nye CC with parallel missions and responsibilities. These include, but are not limited to Nevada Highway Patrol, Nevada Emergency Management, Nevada Division of Environmental Protection, other law enforcement agencies, and the National Security Site. THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOO. WES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) S NO - Agency has not participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) S NO - Agency has not participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) S NO - Agency has not participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) S NO - Agency has not participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) S NO		

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original
Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	Agency Name		Name & Contact #	Vance Payn 775/751-42	e	Grant Manager Name & Contact #		vdahl 775/751-63	394						
	IJ TITLE:	Nye County Unmanned Aircraft System	and Su	pport Vel	nicle										
		One Budget Per Funding Stream													
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$-		
2			<u> </u>					\$-					\$-		
3			L	ļ				\$-					\$-		
4	Dereennel							\$-					\$-		
	Personnel Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$ -					\$-	\$-	
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase	Previous Funding	Salary Hourly	% of Effort	Calculation	Personnel Cost		Secondary Core	AEL Ref #	Funding	Total Budget	Line Item	Line Item Reductions Descriptions on how it will
	Fringe	Positions Require: Fringe to be separate from	Туре	Туре			(hours)	Amount	Capability	Capability		Source		Reductions	affect your program
5	Benefits	Personnel Costs above	──					s -					\$0.00		
6								\$ -					\$0.00		
7			<u> </u>					\$ - \$ -					\$0.00 \$0.00		
8	Fringe Sub-						-	ə -					\$0.00		
	Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX						\$-					\$0.00	\$0.00	
														Line Item	Line Item Reductions
	CATEGODY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous	Category of	Travel Reference	Total Taina	Cost for each	Tetel Cost	Primary Core	Secondary Core	Funding	Total Devices	Ente Rem	
ine #	CATEGORY	DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Reductions	Descriptions on how it will affect your program
ine #	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 ADDE TUNDED BASED ON NON-COMPLIANCE)		Funding		# from	Total Trips		Total Cost						
ne # 9 10	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips		Total Cost				Total Budget		
9 10 11	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips		-				\$0.00 \$0.00 \$0.00		
9 10 11 12	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips						\$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
9 10 11	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips						\$0.00 \$0.00 \$0.00		
9 10 11 12 13 14 15	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips						\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
9 10 11 12 13 14	Travel Planning Training Exercise Equipment	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	Type Select	Funding		# from	Total Trips						\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		

1e #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wi affect your program
	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													
17 18								-					\$0.00 \$0.00		
18								-					\$0.00		
20								-					\$0.00		
21	Dianning Cub							-					\$0.00		
	Planning Sub- Total							\$ -					\$0.00	\$0.00	
ANNIN		IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I	EXPLAINE		HE POSITIONS	AND DELIVERAL	SLES. NARRAI	IVE WILL BE US	SED TO ENSURE						
e #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.													
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25 26 27 GANIZ e #	Sub-Total ATION COST NA CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL	Purchase Type New New	Previous Funding	AIL THE POSIT	QUANTITY	UNIT COST	\$ - \$ - \$ - RRATIVE WILL I TOTAL \$ 120,700.00	Primary Core Capability Intelligence & Info sharing	Secondary Core Capability Operational Coordination Operational Coordination	AEL Ref #	Funding Source	\$ - \$ - \$ - \$ -		Descriptions on how it
25 26 27 GANIZ e # 28 29 30	Sub-Total ATION COST NA CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Savant Fixed Wing SUAS	Purchase Type New	Previous Funding	AIL THE POSIT	QUANTITY 1.00	UNIT COST	\$ - \$ - \$ - RRATIVE WILL I TOTAL \$ 120,700.00 \$ 29,300.00	Primary Core Capability	Secondary Core Capability Operational Coordination Operational	AEL Ref # 030E-07-SUAS	Funding Source	\$ - \$ - \$ - \$ - Total Budget \$ 120,700.00		Descriptions on how it
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25 26 27 GANIZ e # 28 29 30 31 32	Sub-Total ATION COST NA CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Savant Fixed Wing SUAS Transportation vehicle	Purchase Type New New	Previous Funding		QUANTITY 1.00 1.00	ERABLES. NA UNIT COST 120,700.00 28,000.00 35,000.00	\$ - \$ - \$ - RRATIVE WILL I TOTAL \$ 120,700.00 \$ 29,300.00	Primary Core Capability Intelligence & Info sharing Intelligence & Info sharing Intelligence &	Secondary Core Capability Operational Coordination Operational	AEL Ref # 030E-07-SUAS 12VE-00-SPEC	Funding Source SHSP SHSP	\$ - \$ - \$ - \$ - Total Budget \$ 120,700.00 \$ 29,300.00		Line Item Reductions Descriptions on how it affect your program
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25 26 27 GANIZ e # 28 29 30 31 32 33 34 35	Sub-Total ATION COST NA CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Savant Fixed Wing SUAS Transportation vehicle	Purchase Type New New	Previous Funding		QUANTITY 1.00 1.00	ERABLES. NA	\$ - \$ - \$ - RRATIVE WILL I TOTAL \$ 120,700.00 \$ 29,300.00 \$ 36,000.00 \$ - \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Intelligence & Info sharing Intelligence & Info sharing Intelligence &	Secondary Core Capability Operational Coordination Operational	AEL Ref # 030E-07-SUAS 12VE-00-SPEC	Funding Source SHSP SHSP	\$		Descriptions on how it
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25 26 27 GANIZ e # 28 29 30 31 32 33 33 34 35	Sub-Total ATION COST NA CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Savant Fixed Wing SUAS Transportation vehicle	Purchase Type New New	Previous Funding		QUANTITY 1.00 1.00	ERABLES. NA	\$ - \$ - \$ - RRATIVE WILL I TOTAL \$ 120,700.00 \$ 29,300.00 \$ 29,300.00 \$ 36,000.00 \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Intelligence & Info sharing Intelligence & Info sharing Intelligence &	Secondary Core Capability Operational Coordination Operational	AEL Ref # 030E-07-SUAS 12VE-00-SPEC	Funding Source SHSP SHSP	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Descriptions on how it
25 26 27 GANIZ e # 28 29 30 31 32 33 34 35 36 37	Sub-Total ATION COST NA CATEGORY Equipment	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Savant Fixed Wing SUAS Transportation vehicle	Purchase Type New New	Previous Funding		QUANTITY 1.00 1.00	ERABLES. NA UNIT COST 120,700.00 28,000.00 35,000.00	\$ - \$ - \$ - RRATIVE WILL TOTAL \$ 120,700.00 \$ 29,300.00 \$ 29,300.00 \$ 36,000.00 \$ 36,000.00 \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Intelligence & Info sharing Intelligence & Info sharing Intelligence &	Secondary Core Capability Operational Coordination Operational	AEL Ref # 030E-07-SUAS 12VE-00-SPEC	Funding Source SHSP SHSP	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Descriptions on how it
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sealed VTOL rotor mode sets (GCS command software with bough book, but gots are software leading and profits, high fluming with large interchangeaule paytoda bay, one Peritaria take-ont & landing (vTOL) upgrade with wing hard points, high fluming with large interchangeaule paytoda bay, one Peritaria take-ont & landing (vTOL) upgrade with wing hard points, high fluming with large interchangeaule paytoda bay, one Peritaria take-ont & landing (vTOL) upgrade with wing hard points, high fluming with large interchangeaule paytoda bay, one Peritaria take-ont & landing (vTOL) upgrade with wing hard points, high fluming with large interchangeaule paytoda bay, one manual safety 2.4 Gbz RC controller; LED/NAV/IR Safety lighting; Mapping sensor; One year technical support; One week of training for up to 6 people; and shipping/transportation costs of UAS.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40											\$ -		\$		
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	Training Sub-														
	Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE B									\$ -		\$ -	-	
TRAINING	COSTNARRAI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E			HE POSITIONS	AND DELIVERAB	LES. NARRAI	IVE WILL BE US	ED TO ENSURE	ITEMS LISTED W		INTHE			
				Previous	Coordinated	In This Downson									Line Item Reductions
Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Funding Type	with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION 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)	Туре		Exercise		QUANTITY	UNIT COST			TOTAL	AEL Ref #	Total Budget		Descriptions on how it will
50		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			\$ -	AEL Ref #	\$ -	Reductions	Descriptions on how it will
<u>50</u> 51		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			\$ - \$ -	AEL Ref #	\$ - \$ -	Reductions	Descriptions on how it will
50 51 52		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			\$ -	AEL Ref #	\$ -	Reductions	Descriptions on how it will
50 51 52 53 54		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			\$ - \$ - \$ -	AEL Ref #	\$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -	AEL Ref #	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Туре		Exercise		QUANTITY	UNIT COST			\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	AEL Ref #	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55	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	Туре		Exercise		QUANTITY	UNIT COST			<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -	AEL Ref #	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56 57	Exercise Exercise Sub- Total	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)	Type	Type	Exercise Officer?	on the TEPW?			Capability	Capability	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56 57	Exercise Exercise Sub- Total	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS	Type	Type	Exercise Officer?	on the TEPW?			Capability	Capability	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56 57	Exercise Exercise Sub- Total	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)	Type	Type	Exercise Officer?	on the TEPW?			Capability	Capability	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56 57	Exercise Exercise Sub- Total	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)	Type	Type	Exercise Officer?	on the TEPW?			Capability	Capability	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will
50 51 52 53 54 55 56 57	Exercise Exercise Sub- Total	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)	Type	Type	Exercise Officer?	on the TEPW?			Capability	Capability	<u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> - <u>\$</u> -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Reductions	Descriptions on how it will

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All budgets require an email approval from the financial and/or grant manager

	Nevada Homeland	l Secu	rity Grant Pr	ogram (HSGP)	PROJECT ID:	G	
	Project Proposal for	Date Submitted	4/5/17				
1)	PROJECT TITLE:	Southe	ern Nevada Counte	er Terrorism Center	· · · ·		
2)	Proposing/Lead Agency:	Las Ve	egas Metropolitan I	Police Department			
3)	1º Project Manager Name/Title:	Christo	opher Darcy / Capt	ain			
	1º Project Manager Contact Info:	Phone:	(702) 828-2281	Email: C4225D@LVMPD.COM			
4)	2 [°] Project Manager Name/Title:	Rache	I Skidmore / Emerg	gency Manager			
	2° Project Manager Contact Info:	Phone:	(702) 828-2257				
5)	Finance/Grant Contact Name/Title:	: Joni Prucnal, Director of Finance					
	Finance/Grant Contact Info:	Phone:	(702) 828-8267	Email: J13700P@LVMPD.COM			
- 1							

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The National Network of Fusion Centers is the cornerstone of the Department of Homeland Security's vision for protecting the Homeland. This network provides the conduit for the U.S. Intelligence Community to our partners by providing ground information to complement the intelligence streams. This ultimately supports the goal of exchanging information, intelligence, and collaborating with State, Local and Federal partners in an effort to deter, detect, prevent and/or mitigate terrorism, hazards, and other criminal activity for the protection of the citizens, visitors and critical infrastructure of the State of Nevada and the United States. As a result of funding, the SNCTC will be able to sustain current operations to meet the Fusion Center Baseline Capabilities / CoC's / EC's. The SNCTC is committed to intelligence and information sharing within the state, regionally, and nationally, to include FEMA region IX. This project proposal further sustains our efforts to maintain necessary information streams throughout our state, and continue to operate as the DHS Primary fusion center for the State of Nevada.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	Cybersecurity [Mission Area: PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX .

The fusion center directly aligns with the Intelligence and Information Sharing core capability as we implement the National Suspicious Activity Reporting initiative. The primary purpose of the fusion center is intelligence and information sharing at the local, state, and federal level. Our secondary capability this year is Cybersecurity and Operational Coordination. We are seeking to hire a full time cyber analyst and build out this vital component for our center with additional training, and software solutions.

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The project will be administered by the Las Vegas Metropolitan Police Department (LVMPD), the host agency for the Southern Nevada Counter Terrorism Center. In addition to the staff that are provided by LVMPD there are 21 partner agencies represented to include: The Federal Aviation Administration, Henderson Police Department, Department of Homeland Security - CFATS, Department of Homeland Security - ICE, Transportation Security Administration, Nevada National Guard, Department of Homeland Security - Federal Security, Department of Homeland - PSA, Nevada Highway Patrol, Clark County Fire Department, Boulder City Police Department, North Las Vegas Police Department, Department of Homeland Security - Office of Intelligence and Analysis, Federal Bureau of Investigation, RRG Privacy Officer, Las Vegas City Marshals, Hoover Dam Police Department, Moapa Tribal Police Department, Southern Nevada Health District, US State Department, and the Clark County School District Police Department. It is through these partnerships with the various agencies that information is collected, analyzed, and distributed to our consumers. The crime and intelligence analysts, along with supporting research staff leverage technology and the diverse data sets owned by the participating agencies with the objective of producing insightful and actionable intelligence products for the stakeholders and other customers of the SNCTC

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Las Vegas Metropolitan Police Department	Clark County	Christopher Darcy
12(b)			
12(c)			

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

We are currently looking to sustain the existing projects, programs, and procedures that are already in place within the Southern Nevada Counter Terrorism Center through HSGP funds, and well as host and partner agency support.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

	State-wide %	TOTAL %
LV-UASI %	State-wide %	IUIAL %

LV OASI /	State what /		
47	53	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		-
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:GProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/5/17

PROJECT TITLE REFERENCE:

Southern Nevada Counter Terrorism 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
Membership in professional organizations, cable, Internet, SAR reporting hot-line, plotter supplies, information service subscription renewals operating materials, AV system maintenance, and travel for planning meetings & conferences.	\$ 18,200.00	\$ 137,700.00	\$ 155,900.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Downlink professional services contract, Omega professional services contract, cybersecurity contract employee, and Privacy Officer contract.	\$ 0.00	\$ 465,500.00	\$ 465,500.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
i2 Analyst notebook renewal, Coplink software annual maintenance, Omega renewals, ESRI GIS mapping annual maintenance, website domain renewal, Cybersecurity software, Orator Plus annual maintenance, milestone annual maintenance, Strip Camera Project maintenance, Strip Camera Phase IV deployment.	\$ 539,027.00	\$ 107,850.00	\$ 646,877.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Analyst trainings to include IALEIA, LEIU, and FIAT. Additional trainings also include the security liaison officer training which is required by DHS. Trainings utilized in this category directly align with the mission of the Southern Nevada			
Counter Terrorism Center.	\$ 63,000.00	\$ 0.00	\$ 63,000.00
Counter Terrorism Center.	\$ 63,000.00	\$ 0.00 State-wide	\$ 63,000.00 SubTotal
Counter Terrorism Center.	LV-UASI	State-wide	
Counter Terrorism Center. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI \$ 0.00	State-wide \$ 0.00	SubTotal \$ 0.00
Counter Terrorism Center. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI \$ 0.00	State-wide \$ 0.00 State-wide	SubTotal \$ 0.00 SubTotal

3

			l Security Grant Program (HSGP) r FFY17 HSGP Funding Description		OJECT ID: e Submitted	G 4/5/17
PROJ		REFERENCE:	Southern Nevada Counter Terrorism Center			
L 6)		CHEDULE - Identify	the necessary tasks/steps, and time needed. IZE Task Description	From (MM/DD/Y)	To) (MM/DD/YY)	Duration (# months)
	1	Receive Funding		N/A	N/A	N/A
	2	Execute necessary c	ontracts	01/01/18	12/31/18	12
	3	Receive information,	process, analyze, and disseminate	01/01/18	12/31/18	12
	4	Sustain and continue	to evolve community outreach programs	01/01/18	12/31/18	12
	5	Maintain the Strip Ca	mera Project	01/01/18	12/31/18	12
	6	Continue to maintain	data information sharing with partner agencies	01/01/18	12/31/18	12
	7	Maintain outreach for	See Something Say Something	01/01/18	12/31/18	12
	8	Maintain mapping an	d information sharing	01/01/18	12/31/18	12
	9	Maintain Coplink Info	rmation Systems	01/01/18	12/31/18	12
	10	Maintain SNCTC We	bsite and ability to submit SARs	01/01/18	12/31/18	12
	11	Maintain the Critical	nfrastructure Protection Program	01/01/18	12/31/18	12
	12	Maintain necessary s cybersecurity program	oftware solutions currently in place, and enhance the n	01/01/18	12/31/18	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 Souther Nevada Counter Terrorism Center's primary purpose is to implement the National SAR inititive which is to combat terrorism within the United States.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.

Fusion Centers are intelligence and information sharing at the core, and we are currently seeking to build out the cybersecurity components within our center. These primary core capabilities directly align with priorities as #1, and #2 for the Nevada Commission on Homeland Security.

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

This funding request is just maintaining existing capabilities and programs. The cybersecurity build-out is the only additional item that has not historically existed, and we are very much in need of this enhancement.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	G
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	Southern Nevada Counter Terrorism Center		
	d. Can this project continue w	thout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	Homeland Security Grant Fundir specifically called out in grant gu e. Does this project provide a	already carries the majority share of the costs associated to ng stream is the only opportunity for fusion centers to receiv idance that at least one investment justification from both S measurable "state-wide" benefit? YES (•) NO () Explain below	e funding for operati HSP and UASI be fo ow.	ons. It is or our center.
Fields "d" and "e" are l	The Southern Nevada Counter T information to partners at the loc	errorism Center is the state designated fusion center for the al, state, and federal level.	e state of Nevada, ar	nd provides

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE:</u>

- (•) YES Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - NO Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	Agency Name		Manager Name & Contact #	Christopher 702 828 228		Grant Manager Name & Contact #		02 828 8267 & S	halene Flynn 70	2 828 8210					
		Las Vegas Metropolitan Police Department							,						
	IJ TITLE:	Southern Nevada Counter Terrorism Ce	nter												
		One Budget Per Funding Stream													
		SHSP													
ŧ	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
	Personnel							•					¢	\$ -	
ONN	Sub-Total EL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAINE I	N DETAIL TH	E POSITIONS	AND DELIVERAB	LES. NARRATI	> /E WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED	IN THE GRANT	р -	φ -	
				Previous											Line Item Reductions
	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type		Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
	Fringe Sub- Total							s -					\$0.00	\$0.00	
SE C		REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN DE	TAIL THE PO	SITIONS AND	DELIVERABLES.	NARRATIVE W	LL BE USED TO	ENSURE ITEMS	LISTED WILL BE	COMPLETED IN TH	IE GRANT			
		PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous	Cotogory of	Travel Reference		Cost for each		Primary Core	Secondary Core	Funding		Line Item	Line Item Reductions
	CATEGORY	DAYS, PER DIEM BREAKDOWN	Туре	Funding Type	Category of Each Travel	# from Addendum	Total Trips	Trip	Total Cost	Capability	Capability	Funding Source	Total Budget	Reductions	Descriptions on how it will affect your program
	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													
	Exercise Equipment Organization	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)													
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Sustainment	Other Federal	Planning	6	1	\$ 3,500.00	\$ 3,500.00	Sharing	Operational coordination	SHSP	\$3,500.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	oustainment	Federal	Planning Planning	6	1			Information Sharing Intelligence and Information Sharing		SHSP	\$3,500.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference	oustainment	Federal Other Federal	Ŭ		1 6 4	\$ 2,000.00		Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing	coordination Operational				
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference	Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal	Planning	7		\$ 2,000.00 \$ 2,000.00	\$ 12,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and	Coordination Operational Coordination Operational	SHSP	\$12,000.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference	Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal	Planning Planning	7		\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing	coordination Operational coordination Operational coordination Operational coordination Operational coordination	SHSP	\$12,000.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference	Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal	Planning Planning Planning	7		\$ 2,000.00 \$ 2,000.00 \$ 8,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing	Coordination Operational Coordination Operational Coordination Operational Coordination Operational Coordination Operational Coperational Operational Coperational Coperationa	SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$8,000.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force	Sustainment Sustainment Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning	7 8 9 10		\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00	Information Sharing Intelligence and Information Sharing Infelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Sharing Sharing	coordination Operational coordination Operational coordination Operational coordination Operational coordination Operational coordination Operational	SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$8,000.00 \$4,000.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning	7 8 9 10	4	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 1,250.00 \$ 4,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing	coordination Operational coordination	SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$8,000.00 \$4,000.00 \$4,000.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force	Sustainment Sustainment Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning	7 8 9 10 11 11	4	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 4,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Sharing Intelligence and Sharing	coordination Operational Coordination Coordination Operational Coordination Co	SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$2,500.00		
	Equipment	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning Planning	7 8 9 10 11 11 12 13	4	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 1,666.67	\$ 12,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00 \$ 5,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing	coordination Operational coordination Intelligence and	SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$2,500.00 \$4,000.00		
	Equipment Organization	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference 2018 Cyber Conferences	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment New	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning Planning Planning	7 8 9 10 11 12 12 13 13 14	4	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 1,666.67	\$ 12,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00 \$ 5,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Cyber Security Infelligence and Information Sharing Cyber Security Infelligence and Information	coordination Operational coordination	SHSP SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$2,500.00 \$4,000.00 \$5,000.00	\$0.00	
	Equipment Organization	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference 2018 Cyber Conferences	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment New Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning Planning Planning	7 8 9 10 11 11 12 13 14 15	4 1 1 1 2 1 1 3 1	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 1,666.67 \$ 6,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00 \$ 5,000.00 \$ 5,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Cyber Security Intelligence and Information Sharing	coordination Operational coordination	SHSP SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$2,500.00 \$5,000.00	\$0.00	
	Equipment Organization	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference 2018 Cyber Conferences National Homeland Security Conference	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment New Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning Planning Planning	7 8 9 10 11 12 13 14 14 0 ELIVERABLES	4 1 1 1 2 1 1 3 1	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 1,666.67 \$ 6,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00 \$ 5,000.00 \$ 5,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Cyber Security Intelligence and Information Sharing	coordination Operational coordination	SHSP SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$2,500.00 \$4,000.00 \$5,000.00	\$0.00	
	Equipment Organization	CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) ESRI Geospatial Analysis Annual Conference 2018 Announced Conference DHS Analytic Seminar Series National Fusion Center Conference Fusion Center West Conference HVE Practioners Conference California Gangs Task Force ISS World America Conference 2018 Cyber Conference 2018 Cyber Conferences National Homeland Security Conference	Sustainment Sustainment Sustainment Sustainment Sustainment Sustainment New Sustainment	Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal	Planning Planning Planning Planning Planning Planning Planning Planning	7 8 9 10 11 12 13 14 14 0 ELIVERABLES	4 1 1 1 2 1 1 3 1	\$ 2,000.00 \$ 2,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 1,250.00 \$ 1,666.67 \$ 6,000.00	\$ 12,000.00 \$ 8,000.00 \$ 8,000.00 \$ 4,000.00 \$ 4,000.00 \$ 2,500.00 \$ 4,000.00 \$ 5,000.00 \$ 5,000.00	Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Intelligence and Information Sharing Cyber Security Intelligence and Information Sharing	coordination Operational coordination	SHSP SHSP SHSP SHSP SHSP SHSP SHSP SHSP	\$12,000.00 \$8,000.00 \$4,000.00 \$4,000.00 \$2,500.00 \$4,000.00 \$5,000.00	\$0.00	Line Item Reductions

	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											
11		Utilities	Sustainment	Other Federal	1.00	\$ 13,200.00		Operational coordination	n/a	SHSP	\$13,200.00		
12		Printed and Printing Materials	Sustainment	Other Federal	1.00	\$ 2,500.00		Operational coordination	n/a	SHSP	\$2,500.00		
13		Membership in Professional Organizations (LEIU/IALEIA)	Sustainment	Other Federal	1.00	\$ 2,500.00		Operational coordination	n/a	SHSP	\$2,500.00		
14		Information Services Subscription Renewals (Targus /Spypedia /James Town/MSA/Flashpoint Global Partners)	Sustainment	Other Federal	1.00	\$ 57,000.00		Operational coordination	n/a	SHSP	\$57,000.00		
15		AV System Service and repair	Sustainment	Other Federal	1.00	\$ 5,500.00		Operational coordination	n/a	SHSP	\$5,500.00		
	Planning Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE					\$ 80,700.00				\$80,700.00	\$0.00	

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The above items listed cover our Utilities, printing, and memberships in professional organizations such as LEIU/IALEIA. This category also includes our information subscription services as well such as Targus /Spypedia /James Town/MSA/Flashpoint Global Partners. Lastly we maintain an AV system service and repair line item to maintain our capabilities here at the fusion center.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
16		Avisight	Sustainment	Other Federal	1.00	\$ 10,000.00	\$ 10,000.00	Intelligence and Information Sharing	Operational coordination	n/a	SHSP	\$ 10,000.00		
17		Omega Professional Services	Sustainment	Other Federal	1.00	\$ 80,500.00	\$ 80,500.00		Operational coordination	n/a	SHSP	\$ 80,500.00		
18		Contract Cyber Analyst 2 year	New		1.00	\$ 300,000.00	\$ 300,000.00		Intelligence and Information Sharing	n/a	SHSP	\$ 300,000.00		
19		Contract Privacy Officer	Sustainment	Other Federal	1.00	\$ 75,000.00	\$ 75,000.00	Intelligence and Information Sharing	Operational coordination	n/a	SHSP	\$ 75,000.00		
	Organization Sub-Total	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE					\$ 465,500.00					\$ 465,500.00	-	

Avisight is an existing contract for downlink streaming capabilities. Omega is a professional services contract that is maintained for our database management. The contract privacy officer is required for all Fusion centers to maintain. The contract cyber position is a new request this year, and will support the statewide cyber efforts.

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 AN AEL													
20		Cyber Security Software	New			1.00	\$ 25,000.00	\$ 25,000.00	Cyber Security	Intelligence and Information Sharing	04SW-04-NETW	SHSP	\$ 25,000.00		
21		Cellebrite	Sustainment	Other Federal		1.00	\$ 15,000.00	\$ 15,000.00			04SW-04-NETW	SHSP	\$ 15,000.00		
22		Computer Hardware (PC and Monitor Replacements)	Sustainment	Other Federal		1.00	\$ 4,350.00	\$ 4,350.00	Intelligence and Information Sharing	Operational coordination	04HW-01-INHW	SHSP	\$ 4,350.00		
23		HP Server Renewal (6 month buffer)	Sustainment	Other Federal		1.00	\$ 5,000.00	\$ 5,000.00	Sharing	Operational	04SW-04-NETW	SHSP	\$ 5,000.00		
24		I2 Analyst Notebook Software License Renewals	Sustainment	Other Federal		1.00	\$ 31,000.00	\$ 31,000.00		Operational coordination	04SW-04-NETW	SHSP	\$ 31,000.00		
25		Plotter Printer	Sustainment	Other Federal		1.00	\$ 25,000.00	\$ 25,000.00			04HW-01-INHW	SHSP	\$ 25,000.00		
26		Website Renewals	Sustainment	Other Federal		1.00	\$ 800.00	\$ 800.00	Sharing	Operational	04SW-04-NETW	SHSP	\$ 800.00		
27		Website Maintenance (SNCTC)	Sustainment	Other Federal		1.00	\$ 1,700.00	\$ 1,700.00	Intelligence and Information Sharing	Operational coordination	04SW-04-NETW	SHSP	\$ 1,700.00		
	EQUIPMENT Sub-Total							\$ 107,850.00					\$ 107,850.00	-	
QUIPME	INT COST NARRA	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABL	ES. NARRATI	/E WILL BE USE	D TO ENSURE IT	EMS LISTED WILL	BE COMPLETED I	N THE GRANT			

e #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
	Training Sub- Total														
										-					
ne #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding	Coordinated with the State Exercise	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will
ne #		All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS)	Туре		with the State	Is This Request	QUANTITY	UNIT COST			TOTAL	AEL Ref #	Total Budget		
ne #	Exercise Exercise Sub-	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must	Туре	Funding	with the State Exercise	Is This Request	QUANTITY	UNIT COST			TOTAL	AEL Ref #	Total Budget		Descriptions on how it will
	Exercise Exercise Sub- Total	All Exercises must be HSEEP compliant and coordinated with the State/UASI Exercise Officer, Must Support the SPR, THIRA, Strategy (NO TRAVEL IN THIS)	Туре	Funding Type	with the State Exercise Officer?	Is This Request on the TEPW?			Capability	Capability	TOTAL		Total Budget		Descriptions on how it will
	Exercise Exercise Sub- Total	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)	Туре	Funding Type	with the State Exercise Officer?	Is This Request on the TEPW?			Capability	Capability	TOTAL		Total Budget		Descriptions on how it will
ine # XERCIS	Exercise Exercise Sub- Total	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)	Туре	Funding Type	with the State Exercise Officer?	Is This Request on the TEPW?			Capability	Capability	TOTAL		Total Budget		Descriptions on how it will

All budgets require an email approval from the financial and/or grant manager

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	_		Monoger			ETAIL BUDG Grant Manager									
	Agency Name	Las Vegas Metropolitan Police Department	Manager Name & Contact #	Christopher 702 828 228		Grant Manager Name & Contact #		02 828 8267 & S	halene Flynn 70	2 828 8210					
	IJ TITLE:	Southern Nevada Counter Terrorism Ce	enter												
		One Budget Per Funding Stream													
		UASI													
	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reduction Descriptions on how i affect your program
F	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.													
	Personnel Sub-Total							¢					e	\$-	
		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAINE IN	DETAIL TH	E POSITIONS A	AND DELIVERABL	ES. NARRATIV	E WILL BE USED	TO ENSURE ITE	MS LISTED WILL	BE COMPLETED IN	THE GRANT	ə -	Ψ-	
	CATEGORY	FRINGE DETAIL DESCRIPTION	Туре	Funding Type	Salary Hourly	% of Effort	(hours)	Amount	Capability	Capability	AEL Ref #	Source	Total Budget	Reductions	Descriptions on how affect your progra
F	Fringe	Positions Require: Fringe to be separate from													
E	Fringe Benefits	Personnel Costs above													
F 1	Benefits Fringe Sub- Total	Personnel Costs above	PLAINE IN DET	AIL THE PO	SITIONS AND D	DELIVERABLES. 1	VARRATIVE WI	\$- L BE USED TO E	NSURE ITEMS LI	STED WILL BE C	OMPLETED IN THE	GRANT	\$0.00	\$0.00	
F	Benefits Fringe Sub- Total	Personnel Costs above		Previous Funding	SITIONS AND D Category of Each Travel	DELIVERABLES. / Travel Reference # from Addendum		S LL BE USED TO E Cost for each Trip	NSURE ITEMS LI Total Cost	STED WILL BE C Primary Core Capability	OMPLETED IN THE Secondary Core Capability	GRANT Funding Source	\$0.00 Total Budget	\$0.00 Line Item Reductions	Line Item Reduction Descriptions on how i affect your program
E F I I I I I I I I I I I I I I I I I I	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXI PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous	Category of	Travel Reference # from		Cost for each		Primary Core Capability	Secondary Core	Funding		Line Item	Descriptions on how i
E F 1 E C C C	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core Capability	Secondary Core	Funding		Line Item	
E F I I I I I I I I I I I I I I I I I I	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability Intelligence Information and Sharing Intelligence Information and Sharing	Secondary Core Capability Operational	Funding Source	Total Budget	Line Item	Descriptions on how i
E F 1 E C C C	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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) Announced Trainings in 2018	Purchase Type Sustainment	Previous Funding Type Other Federal Other	Category of Each Travel	Travel Reference # from Addendum	Total Trips - 4	Cost for each Trip \$ 12,000.00	Total Cost - \$ 12,000.00 \$ 2,000.00	Primary Core Capability	Secondary Core Capability Operational Coordination Operational	Funding Source	Total Budget \$12,000.00	Line Item	Descriptions on how i
E F 1 E C C C	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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) Announced Trainings in 2018 Security Liaison Training	Purchase Type Sustainment Sustainment	Previous Funding Type Other Federal Other Federal Other	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip \$ 12,000.00 \$ 2,000.00	Total Cost \$ 12,000.00 \$ 2,000.00 \$ <td>Primary Core Capability Intelligence Information and Sharing Intelligence Information and Sharing Intelligence Information and Sharing Sharing Intelligence Information and Sharing</td> <td>Secondary Core Capability Operational Coordination Operational Operational Operational</td> <td>Funding Source</td> <td>Total Budget \$12,000.00 \$2,000.00</td> <td>Line Item</td> <td>Descriptions on how i</td>	Primary Core Capability Intelligence Information and Sharing Intelligence Information and Sharing Intelligence Information and Sharing Sharing Intelligence Information and Sharing	Secondary Core Capability Operational Coordination Operational Operational Operational	Funding Source	Total Budget \$12,000.00 \$2,000.00	Line Item	Descriptions on how i
	Benefits Fringe Sub- Total SST NARRATIVE CATEGORY Travel Planning Fraining Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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-COMPLLANCE) Announced Trainings in 2018 Security Liaison Training FIAT Training Conference	Purchase Type Sustainment Sustainment	Previous Funding Type Other Federal Other Federal Other Federal	Category of Each Travel Planning Planning Planning	Travel Reference # from Addendum 1 2 3	Total Trips	Cost for each Trip \$ 12,000.00 \$ 2,000.00 \$ 5,000.00	Total Cost - \$ 12,000.00 \$ 5,000.00 \$ 12,000.00	Primary Core Capability	Secondary Core Capability Operational Coordination Operational Coordination Operational Operational Operational	Funding Source	Total Budget \$12,000.00 \$2,000.00 \$5,000.00	Line Item	Descriptions on how i

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The above travel is all listed analyst travel, as well as required travel by DHS for our security officer. The final category is for training that is announced during the fiscal year 2018 that aligns with the fusion center mission.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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													
6		Plotter Supplies	Sustainment	Other Federal		1.00	\$ 1,200.00	\$ 1,200.00	Sharing	Operational Coordination	n/a	UASI	\$1,200.00		
7		Consumable operating materials		Other Federal		1.00	\$ 3,500.00	\$ 3,500.00	Sharing		n/a	UASI	\$3,500.00		
8		Copier Leases	Sustainment	Other Federal		1.00	\$ 12,500.00	\$ 12,500.00	Sharing	Operational Coordination	n/a	UASI	\$12,500.00		
9		Training Books and Periodicals		Other Federal		1.00	\$ 1,000.00	\$ 1,000.00	Intelligence Information and Sharing	Operational Coordination	n/a	UASI	\$1,000.00		
	Planning Sub- Total	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I			DOSITIONS AND			\$ 18,200.00					\$18,200.00	\$0.00	

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Plotter supplies support the only rearning plotter at the fusion center, consumable operation materials are for all office expenses, copier lease, and training books/periodicals are for additional analyst training.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETALLED 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.													
	Organization Sub-Total							#REF!						-	
ORGANIZ	ATION COST NAI	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	ASE EXPLAIN	IN DETAIL	THE POSITION	S AND DELIVERA	BLES. NARRAT	IVE WILL BE US	ED TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED	IN THE			

ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 an AEL												
10		Strip Camera Program Maintenance	Sustainment	Other Federal	1.00	\$ 6,839.15	\$ 6,839.15	Intelligence Information and Sharing	Operational Coordination	04SW-04-NETW		\$ 6,839.15		
11		Orator Maintenance	Sustainment	Other Federal	1.00	\$ 4,800.00	\$ 4,800.00	Intelligence Information and Sharing	Operational Coordination	04SW-04-NETW		\$ 4,800.00		
12		Omega ARM Renewal	Sustainment	Other Federal	1.00	\$ 8,500.00	\$ 8,500.00		Operational Coordination	04SW-04-NETW		\$ 8,500.00		
13		IT Hardware	Sustainment	Other Federal	1.00	\$ 14,000.00	\$ 14,000.00		Operational Coordination	04HW-01-INHW		\$ 14,000.00		
14		Strip Camera Project Hardware	Sustainment	Other Federal	1.00	\$ 6,500.00	\$ 6,500.00		Operational Coordination	04MD-01-VCAM		\$ 6,500.00		
15		Computer Software	Sustainment	Other Federal	1.00	\$ 18,000.00	\$ 18,000.00		Operational Coordination	04SW-04-NETW		\$ 18,000.00		
16		Camera Analytics for RTCC (Software)	Sustainment	Other Federal	1.00	\$ 75,000.00	\$ 75,000.00		Operational Coordination	13-IT-00-DFSN		\$ 75,000.00		
17		Strip Camera Phase IV	Sustainment	Other Federal	1.00	\$ 150,000.00	\$ 150,000.00	Intelligence Information and Sharing	Operational Coordination	04MD-01-VCAM		\$ 150,000.00		
18		Coplink	Sustainment	Other Federal	1.00	\$ 255,387.85	\$ 255,387.85	Intelligence Information and Sharing	Operational Coordination			\$ 255,387.85		
	EQUIPMENT Sub-Total						\$ 539,027.00					\$ 539,027.00	-	

Strip Camera Program maintenance is for the existing program software renewals that are required.

Liı	ne #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	G
		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					-	-								
	40		FLO Hosted Trainings	Sustainment	Other Federal			4.00	5,000.00	Intelligence Information and Sharing	Operational Coordination	\$ 20,000.00		\$ 20,000.00			
		Training Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E									\$ 20,000.00		\$ 20,000.00	-		

This is for four Fusion Liaison Officer Hosted trainings that are conducted quarterly throughout the year.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)											-	
	Exercise Sub- Total											s -	-	

				Total Original Budget	Line Item Reductions Total	
				\$ 620,227.00	\$ -	

	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	Н						
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/3/17						
1)	PROJECT TITLE:	Nevada Threat Analysis	evada Threat Analysis Center								
2)	Proposing/Lead Agency:	Nevada Department of P	ublic safety, Investigation Division	า							
3)	1º Project Manager Name/Title:	Lt. Randy Jackson	.t. Randy Jackson								
	1º Project Manager Contact Info:	Phone: (775) 687-0450	Email: rjackson@dps.state.nv.us	6							
4)	2 [°] Project Manager Name/Title:	Dr. Selby Marks									
	2° Project Manager Contact Info:	Phone: (775) 687-0313	Email: smarks@dps.state.nv.us								
5)	Finance/Grant Contact Name/Title:	Vicki Nowling									
	Finance/Grant Contact Info:	Phone: (775) 684-4519	Email: vnowling@dps.state.nv.u	S							

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	$\overline{\bullet}$

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) FFY17 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 LIMIITED 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 accord with the fusion center baseline capabilities and critical operating capabilities.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	Screening, Search, and Detection [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. 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.

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Н
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/3/17
	Novada Threat Analysia Cantar		

PROJECT TITLE REFERENCE:

Nevada Threat Analysis Center

10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed

NCHS FFY17 Priority

Urban Area Strategy Priority

#2 - INTELLIGENCE AND INFORMATION SHARING

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 Nevada Threat Analysis Center is managed by the Nevada Department of Public Safety (DPS), Investigation Division. The Nevada Threat Analysis Center's goal is to collect and share terrorism and criminal information through successful collaboration with state and local government, tribal government, federal partners, and the private secor. The direction, planning, analysis, production, dissemination and feedback is accomplished by 13 full time employees (10 state funded employees and three contractors). The employees include: 4 Sworn DPS Officers (including 1 Lieutenant, 1 Detective assigned to the FBI JTTF in Reno, 1 State Trooper assigned as the NTAC Privacy Officer, and 1 Officer assigned to SNCTC); 1 Deputy Director; 3 DPS Intelligence Analysts, 1 DPS Senior Intelligence Analyst, 1 DPS Administrative Assistant, 1 Intelligence Analyst (contractor); 1 Fusion Liaison Officer Coordinator (contractor), and 1 Critical Infrastructure/Key Resource Coordinator (contractor). The funding requested is vital to the Nevada Threat Analysis Center's ability to sustain fusion center Baseline and Core Operating Capabilities, which are significant and necessary components to successful Intelligence production and Information sharing in the State of Nevada.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Nevada Threat Analysis Center (NTAC)	State (Department of Public Safety)	Lt. Randy Jackson
12(b)			
12(c)			

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

Although the majority of the Nevada Threat Analysis Center's staff are state employees and funded out of the state general fund, current funding streams cannot support all of the Nevada Threat Analysis Center's operational and staffing needs, which are vital to the Nevada Threat Analysis Center's ability to sustain/meet its Baseline Capabilities and/or goals. These operational and staffing needs are ongoing and will likely be dependent upon the continued receipt of HSGP funding into the foreseeable future.



FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60 LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		2
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

PROJECT ID:

Date Submitted 4/3/17

Н

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; Suspicious Activity Reporting Phone Line/Call Charges; Public Information & Awareness Campaign program materials/services.		\$ 176,496.13	\$ 176,496.13
15b) Organization (Setablishment of acceptantian structure logdership and appretion)	LV-UASI	State-wide	SubTotal
15b) Organization [Establishment of organization, structure, leadership, and operation] Fusion Liaison Officer (FLO) Coordinator-\$104,850; Critical Infrastructure and Key	LV-OASI	State-wide	50510181
Resources (CIKR) Coordinator-\$104,850; Intelligence Analyst-\$105,000.		\$ 314,700.26	\$ 314,700.20
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-upgrades; ISS Intelligence analytics software/server - programming maintenance/renewal/upgrade; COMPUTERS & PERIPHERALS-routers, switches, keyboards, cabling, printers, etc.; EITS server maintenance/upgrade.		\$ 91,730.00	\$ 91,730.00
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			
		\$ 57,123.10	\$ 57,123.10
Attended)/CIKR Training Materials.	LV-UASI	\$ 57,123.10 State-wide	\$ 57,123.10 SubTotal
Conferences/Workshops; Privacy/Security Training; CIKR Training (Conducted and Attended)/CIKR Training Materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] National/Regional/State Exercises.	LV-UASI		
Attended)/CIKR Training Materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] National/Regional/State Exercises.	LV-UASI	State-wide	
Attended)/CIKR Training Materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]		State-wide \$ 3,575.50	SubTotal \$ 3,575.50
Attended)/CIKR Training Materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] National/Regional/State Exercises.		State-wide \$ 3,575.50	SubTotal \$ 3,575.50 SubTotal

Nevada Homeland	Nevada Homeland Security Grant Program (HSGP)											
Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/3/17												
PROJECT TITLE REFERENCE: Nevada Threat Analysis Center												
16) TASKS & SCHEDLILE Identify the recording tasks (store and time readed												

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	12/01/17	04/01/18	3
3	Sustain Criminal Intelligence Analyst	04/01/18	04/01/19	12
4	Sustain FLO Coordinator and CIKR Coordinator	04/01/18	04/01/19	12
5	Conduct Planning Activities	04/01/18	04/01/19	12
6	Purchase Equipment	04/01/18	04/01/19	12
7	Conduct/Attend training/Conferences/Workshops	04/01/18	04/01/19	12
8	Purchase training materials	04/01/18	04/01/19	12
9	Host and/or attend regional/state exercises	04/01/18	04/01/19	12
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 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.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.

This project aligns specifically with the Nevada Commission on Homeland Security Priority 2, 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.

	Nevada Homeland	PROJECT ID:	Н										
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/3/17									
PROJ	ECT TITLE REFERENCE:	Nevada Threat Analysis Center											
	d. Can this project continue wi	thout funding? YES 🔵 NO 💽 Explain below.											
are limitied to visible text box size	The NTAC would not be able to continue with this project without funding. Substantial operational capabilities are funded though the grant, which include the tools, resources, and technology required for information gathering and the analysis of the information. The Fusion Liaison Officer program and the Silver Shield Critical Infrastructure programs are supported entirely by grant funding. The SHSGP funding is critical to the NTAC's ability to maintain fusion center baseline capabilities and to effectively support the National Network of Fusion Centers to combat terrorism and criminal activity.												
imitie	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explain bel	ow.										
Fields "d" and "e" are li	reporting terrorism and criminal r (excluding Clark), to all state age collaboration with federal partner	TAC provides an effective, unique, and efficient mechanism elated suspicions activity to local government partner agen encies including the Office of the Governor, and all tribal gov 's (the FBI and DHS) the NTAC manages this critical inform formation and feedback to our statewide partners.	cies from 16 of 17 co vernments statewide.	unties Through									

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE:</u>

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

LINE ITEM DETAIL BUDGET

				LINI		LIAIL BUDGE	1								
	Agency Name	Nevada Dept. of Public Safety, Investigation Division	Manager Name & Contact #	Lt. Randy Ja (775) 687-03	ckson	Grant Manager Name & Contact #	Lt. Randy Jack	son (775) 684-0	309; Vicki Nowl	ing (775) 684-45	19				
	IJ TITLE:	Nevada Threat Analysis Center													
		One Budget Per Funding Stream													
		SHSP													
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	reisonnei	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 Fusion Liaison Officer Coordinator - 12 months - \$104,850 - (Planning, / Organizations / Training / Exercise)	Sustainment		50.4086	100%	2080	\$ 104,849.89	Information and Sharing	Operational Coordination		SHSP	\$ 104,849.89		
2		1 Critical Infrastructure and Key Resouces (CIKR) Coordinator - 12 months \$104,850 - (Planning / Organization / Training / Exercise)	Sustainment		50.4086	100%	2080	\$ 104,849.89	Information and Sharing	Operational Coordination		SHSP	\$ 104,849.89		
3		1 Intelligence Analyst - 12 months - \$105,000 - (Planning / Organization / Training)	Sustainment		50.481	100%	2080	\$ 105,000.48	Information and Sharing	Operational Coordination		SHSP	\$ 105,000.48		
	-							\$-					\$-		
	Personnel Sub-Total							\$ 314,700.26					\$ 314,700.26	\$-	
PERSONN	ISUB-ICIAI FRONNEL COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT														

Fusion Laison 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 focuses on developing and maintaining relationships with federal, state, local, tribal and private sector partners via outreach, training and exercises to ensure that threat information is recognized, collected, eported, analyzed, and disseminated to those with a right and need to know the information. Furthermore, these relationships provide the NTAC with Subject Matter Experts (SME's) that can be used to support analytical efforts. Deliverables include, but are not limited to: outreach, training, exercises, Suspicious Activity Reports, Tips / Leads, situational awareness, local context to federal threat streams, information i 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. The CIKR Program supports the NTAC's collection, analysis, and dissemination efforts (Critical Operating Capabilities). The goal of the CIKR Program is to identify, catalogue, prioritize, and protect CIKR within the NTAC's Area of Responsibility. Deliverables include, but are not limited to: the AOR data call, outreach, Site Vulnerability Assessments, Special Events Assessments, and training. The Intelligence Analyst (IA) – 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 plannin

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		Positions Require: Fringe to be separate from Personnel Costs above													
								\$-					\$0.00		
5		Any fringe is included in the personnel cost estimates						\$-					\$0.00		
	Fringe Sub- Total							\$-					\$0.00	\$0.00	
FRINGE CO	DST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXP	LAINE IN DETAIL	THE POSIT	IONS AND DELI	IVERABLES. NAP	RATIVE WILL E	E USED TO ENSU	JRE ITEMS LIST	ED WILL BE COM	PLETED IN THE GR/	ANT CYCLE -			

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	1														
Line #		PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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				-		-						
6		Fusion Liaison Officer Planning / Outreach - in state travel	Sustainment	State	Planning	1	14.00	365.54			Operational Coordination	SHSP	\$5,117.60		
7		Fusion Liaison Officer Planning / Outreach - out of state travel	Sustainment	State	Planning	2	2.00	873.00		Intelligence Information and Sharing	Operational Coordination	SHSP	\$1,746.00		

Η

		General Planning / Prevention Activities - in state	Sustainment							Intelligence Information and	Operational				H
8		travel	Sustainment	State	Planning	3	12.00	539.68	6,476.10	Sharing	Coordination	SHSP	\$6,476.10		
		General Planning / Prevention Activities - out of state	Custain my st							Intelligence Information and	Operational				
9		travel	Sustainment	State	Planning	4	7.00	1,216.00	8,512.00		Coordination	SHSP	\$8,512.00		
		Conduct Site Instrastructure / Vulnerability / Threat								Intelligence Information and	Operational				
10		Assessments - in state travel	Sustainment	State	Planning	5	10.00	564.75	5,647.50	Sharing	Operational Coordination	SHSP	\$5,647.50		
		Critical Infrastructure and Key Resources (CIKR)	-							Intelligence Information and	On and in a l				
11		Planning / Outreach - in state travel	Sustainment	State	Planning	6	4.00	524.75	2,099.00	Sharing	Operational Coordination	SHSP	\$2,099.00		
		Critical Infrastructure and Key Resources (CIKR)								Intelligence Information and	Operational				
12		Planning / Outreach - out of state travel	Sustainment	State	Planning	7	1.00	1,189.00	1,189.00	Sharing	Coordination	SHSP	\$1,189.00		
		Fusion Liaison Officer Training (Conducted /								Intelligence	Onerstienel				
13		Attended) I in state travel	Sustainment	State	Training	8	12.00	529.18	6,350.10	Information and Sharing	Operational Coordination	SHSP	\$6,350.10		
		Fusion Liaison Officer Training (Conducted /			<u> </u>					Intelligence	Queenting				
14		Attended) out of state travel	Sustainment	State	Training	9	2.00	1,226.00	2,452.00	Information and Sharing	Operational Coordination	SHSP	\$2,452.00		
									,	Intelligence			<i> </i>		
15		Intelligence / Crime Analysis Training - in state travel	Sustainment	State	Training	10	8.00	808.50	6,468.00	Information and Sharing	Operational Coordination	SHSP	\$6,468.00		
									.,	Intelligence			£1,111.00		
16		Intelligence / Crime Analysis Training - out of state travel	Sustainment	State	Training	11	6.00	2,080.50	12,483.00	Information and Sharing	Operational Coordination	SHSP	\$12,483.00		
							2.00	_,	,	Intelligence			¢.2, 100.00		
17		Professional Conferences / Workshops - in state travel	Sustainment	State	Training	12	4.00	1,050.50	4,202.00	Information and Sharing	Operational Coordination	SHSP	\$4,202.00		
								,,	,	Intelligence			÷ .,00		
18		Professional Conferences / Workshops - out of state travel	Sustainment	State	Training	13	7.00	1,729.29	12,105.00	Information and Sharing	Operational Coordination	SHSP	\$12,105.00		
		2						.,5.20	,	Intelligence			¢.2,100.00		
19		Privacy / Security Training	Sustainment	State	Training	14	2.00	1,226.00	2,452.00	Information and Sharing	Operational Coordination	SHSP	\$2,452.00		
		· · · ·						.,	_,	Intelligence			<i>42,102.00</i>		
20		Critical Infrastructure and Key Resources (CIKR) Training (Conducted / Attended) - in state travel	Sustainment	State	Training	15	6.00	808.50	4,851.00	Information and Sharing	Operational Coordination	SHSP	\$4,851.00		
20		Critical Infrastructre and Key Resources (CIKR)							,				\$ 1,001.00		
		Training (Conducted and Attended) - out of state	Sustainment							Intelligence Information and	Operational				
21		travel		State	Training	16	1.00	1,935.00	1,935.00	Sharing	Coordination	SHSP	\$1,935.00		
			Sustainment							Intelligence Information and	Operational				
22		Exercises - in state travel	Sustainment	State	Exercise	17	3.00	858.50	2,575.50	Sharing	Coordination	SHSP	\$2,575.50		
	T												\$0.00		
	Travel Sub- Total								86,660.80				\$86,660.80	\$0.00	-
		REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXP	LAINE IN DETAI	L EACH LINE	E ITEM AND DEL	IVERABLES. NA	RRATIVE WILL	BE USED TO ENS	URE ITEMS LIS	TED WILL BE CO	MPLETED IN THE	E GRANT CYCLE			

Fusion Liaison Officer (FLO) Program Planning / Outreach - h 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 / intelligence used to create various fusion center products, and SME's. Currently, this funding is estimated to support the travel of 2 people for 7 trips with an average duration of 2 days per trip.

Fusion Liaison 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 gathering / sharing activities, Standing Information Needs (SIN's) development, operational activities, comprehensive Fusion Center best practices development, statewide fusion center strategic planning / collaboration; attendance 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 7 trips with an average 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 Travel – 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, Stecial Events Assessment planning meetings, CIKR per 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 indentified 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 requires that Intelligence Analysts, which details the minimum categories of training for intelligence analysts. Additionally, the Critical Operating Capabilities requires that Intelligence Analysts, which analysts. Which training may include, but is not limited to: DHS Basic Intelligence and Threat Analysis Course; DHS Critical Thinking and Analytical Methods, DHS Principles of Intelligence Writing and Briefing; Foundations in Intelligence Analysts Training; Intermediate Fusion Center Analysts Training – Analysis and Terrorism Prevention; Intermediate Fusion Center Analysts and Terrorism Prevention; Intermediate Fusion Center Analysts; and other travel of a analysts for 2 trips with an average duration of 2 days.

Intelligence / Crime Analysis Training – Out of 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 indentified 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 require funding to support travel for training may intelligence analysts. Such training may include, but is not limited to: DHS Basic Intelligence and Threat Analysis Course; DHS Critical Thinking and Analytical Methods, DHS Principles of Intelligence Writing and Briefing; Foundations in Intelligence Analysis Training; Intermediate Fusion Center Analysis Course; DHS Critical Thinking and Analytical Methods, DHS Principles of Intelligence Writing and Briefing; Foundations in Intelligence Analysis Training; Intermediate Fusion Center Analysis and Terrorism Prevention; Intermediate Fusion Center Analysis and Oral Briefings; Law Enforcement Analysis Program; ODNI Analysis; and other courses. Deliverables include, but are not limited to: Professional Development of the Intelligence Analysis, which support the travel of 3 analysts for 2 trips with an average duration of 5 days.

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 gentificate, while training certificate, while training cerit certificate, and training ce

Although most involve a training aspect, conferences and workshops do not result in a training catflicate, while training classes do result in a training catflicate. 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 for 7 trips with an average length of 4 days (Director, Deputy Director, Senior Intelligence Analyst). **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/or related staff. Deliverables included, but are not limited to: training and professional development to support NTAC privacy / security functions and/or related staff. Deliverables included, but are not limited to: training and professional development to support NTAC privacy / security functions and/or related staff. Deliverables included, but are not limited to: training and professional development to support NTAC privacy / security functions and/or related staff. Deliverables included, but are not limited to: training and professional development to support NTAC privacy / security functions and/or related staff. Deliverables included in the 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	Purchase Type	Previous Funding	QUANTITY	UNIT COST	TOTAL		Secondary Core	AEL Ref #	Funding	Total Budget	Line Item	Line Item Reductions Descriptions on how it will
				Туре				Capability	Capability		Source		Reductions	affect your program
	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												
23		General Planning / Prevention Materials	Sustainment	State	6	577.00	3,462.00		Operational Coordination		SHSP	\$3,462.00		
24		Materials to Conduct Site Vulnerability Assessments / Special Events Threat Assessments	Sustainment	State	4.00	636.00	2,544.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$2,544.00		
25		Consumables / Supplies	Sustainment	State	13	942.00	12,246.00		Operational Coordination		SHSP	\$12,246.00		
26		Webhosting Services	Sustainment	State	1	2,500.00	2,500.00		Operational Coordination		SHSP	\$2,500.00		
27		VPN and Connection Services	Sustainment	State	12	63.00	756.00		Operational Coordination		SHSP	\$756.00		
28		Telecommunications Services	Sustainment	State	12	535.00	6,420.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$6,420.00		
29		Information / Public Records Subscriptions	Sustainment	State	7	2,361.42	16,529.94		Operational Coordination		SHSP	\$16,529.94		
30		Memberships in Professional Organizations	Sustainment	State	2	825.00	1,650.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$1,650.00		
31		Suspicious Activity Reporting - Phone Line	Sustainment	State	1	202.00	202.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$202.00		
32		Suspicious Activity Reporting - Call Charge	Sustainment	State	1	799.00	799.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$799.00		
33		Public Information & Awareness Campaign	Sustainment	State	1	98,600.00	98,600.00	Intelligence Information and Sharing	Operational Coordination		SHSP	\$98,600.00		
	Planning Sub- Total						\$ 145,708.94					\$145,708.94	\$0.00	

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 outcach / 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.

Material to Conduct Site Vulnerability Assessments / Special Events Threat Assessments - this funding supports the purchase of materials needed to conduct site vulnerability assessments and/or Special Events 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.

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.

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.

Intormation / rubic records Subscriptions – this funding supports subscriptions to various information gamering services and media outlets to support ongoing information needs related to NLAC operations / Critical Operations, which support NTAC operations and/or provide related technical assistance / resources related NTAC operations / Critical Operationg Critical Operationg Critical Operations (Critical Operations) / Critical Operations (Critical Operations) / Critical Operations (Critical Operations) / Critical Operations) / Critical Operations (Critical Operations) / Critical Operations) / Critical Operations / Critical Operations / Critical Operations) / Critical Operations / Critical Operations) / Critical Operations / Critical Operations / Critical Operations) / Critical Operations / Critical Operations) / Critical Operations / Critical Operations / Critical Operations) / Critical Operations / Critical Operations / Critical Operations / Critical Operations / Critical Operations) / Critical Operations / Critical O

Suspicious Activity Reporting - Phone Line - this funding supports the costs associated the suspicious activity reporting phone line charge (12 months @ \$15.00/mo).

Suspicious Activity Reporting - Call Charge - this funding supports the costs associated with calls to the suspicious activity reporting phone line. (Est. 30/min per day @ \$.06/min x 365).

Public Information & Awareness Campaign - this funding supports the continuation of the suspicious activity reporting & public information campaign; provides funding for printed material, billboard signage, and over air media PSAs, and related advertising areas.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
								\$-					\$-		
								\$-					\$		
								\$-					\$		
								\$-					\$-		
								\$-					\$-		
								\$ -					\$-		
	Organization Sub-Total							\$-					\$-	-	
ORGANIZ	ATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT														

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	ΤΟΤΑΙ		rimary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Tot	al Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL															
34		Computer Software - Orator - renewal / upgrade	Sustainment	State		1	1,260.00	\$ 1,2	Info 60.00 Sha	aring	Operational Coordination	13IT-00-DEXC	SHSP	\$	1,260.00		
35		Computer Software - ESRI GIS Support - renewal / upgrade	Sustainment	State		1	7,500.00	\$ 7,5	Info 00.00 Sha	aring		13IT-00-DACQ	SHSP	\$	7,500.00		
36		Computer Software - 12 - renewal/upgrade	Sustainment	State		1	9,100.00	\$ 9,1	Info 00.00 Sha	aring	Operational	13IT-00-DACQ; 13IT- 00-DFSN; 13IT-00- SGNT	SHSP	\$	9,100.00		
37		Computer Software - Fusion 360 - maintenance / upgrades	Sustainment	State		1	4,400.00	\$ 4,4	Info 00.00 Sha	aring		13IT-00-DFSN; 13IT- 00-INTL	SHSP	\$	4,400.00		
38		Computers & Peripherals - routers, switches, keyboards, cabling, printers, etc.	Sustainment	State		10	852.00	\$ 8,5	Info 20.00 Sha	aring	Operational Coordination	04HW-01-INHW	SHSP	\$	8,520.00		
39		ISS Intelligence Analytics software / server - for programming, maintenance/ renewal/upgrade	Sustainment	State		1	53,600.00	\$ 53,6	Info 00.00 Sha	aring	Operational Coordination	13IT-00-DFSN; 13IT-00-INTL	SHSP	\$	53,600.00		
40		EITS Technology Maintenance	Sustainment	State		1	7,350.00	\$ 7,3			Operational Coordination	13IT-00-INTL	SHSP	\$	7,350.00		
								\$	-					\$	-		
	EQUIPMENT Sub-Total								30.00					\$	91,730.00	-	
EQUIPMEN	IT COST NARRAT	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE IN DE	TAIL THE PC	DSITIONS AND	DELIVERABLES.	NARRATIVE W	LL BE USE	ED TO ENS	SURE ITEMS L	ISTED WILL BE (COMPLETED IN THE	GRANT				

Computer Software – Orator –renewal / upgrade – this funding supports yearly licensing of Orator Software, which allows all multimedia associated with Site Vulnerability / Special Events Assessments to be combined into one package for presentation to and/or access by NTAC partners.

Computer Software - 12 - renewal/upgrade - This purchase supports annual licensing and maintenance upgrades for i2 software. The i2 software provides link analysis capabilities and facilitates operational analysis, improving situational awareness and a platform providing faster, more informed decision making.

Computer Software - Fusion 360 - maintenance / upgrades - this funding supports annual maintenance / upgrades to Fusion 360, the NTAC's Information Management System for one year.

Computers & Peripherals - computers, routers, switches, keyboard, cabling, printers, etc. - this funding supports the purchase, replacement and/or upgrade of peripheral computer equipment that is not covered by the State Budget.

ISS Intelligence Analytics software and server - renewal/upgrade/programming – This funding provides for annual licensing and maintenance of the ISS software including system upgrades for one year, which supports the NTAC's data collection and analytical capabilities to interface with federal, state, and local databases. The ISS application improves critical data access and analysis that is efficient, fast, and allows for creative analytics supporting the NTAC counterterrorism, all-threats, and all-hazards mission.

EITS technology maintenance - This funding covers one year of the annual cost for the State of Nevada Enterprise Information Technology Services (EITS) maintenance to support the ISS Intelligence Analytics software and server connectivity to state network syst

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							Η
41		Fusion Liaison Officer Training Materials	Sustainment	State	NO	NO	4	637.25	Intelligence Information and Sharing	Operational Coordination	\$ 2,549.00		\$ 2,549.00		
42		CIKR Training Materials	Sustainment	State	NO	NO	2.00	638.00	Intelligence Information and Sharing	Operational Coordination	\$ 1,276.00		\$ 1,276.00		
											\$- \$-		\$ - \$ -		
											\$- \$-		\$- \$-		
											\$- \$-		\$- \$-		
											\$- \$-		\$- \$-		
	Training Sub- Total										\$ 3,825.00		\$ 3,825.00	-	
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														

Fusion Liaison Officer Training Materials – this funding supports the purchase of training materials for the FLO Program. Purchases include, but are not limited to: CD's, flash drives, handouts, booklets, binders, pens, certificates, etc. Deliverables include, but are not limited to: FLO / related training.

CIKR Training Materials – this funding supports the purchase of training material for the CIKR Program. Purchases include, but are not limited to: CD's, flash drives, handouts, booklets, binders, pens, certificates, etc. Deliverables include, but are not limited to: CIKR Program / related training.

-		-													
Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
43		Fusion Center Coordination Exercise	Sustainment		NO	NO	1.00	1,000.00		Operational Coordination	\$ 1,000.00		\$ 1,000.00		
											\$		\$-		
											\$		\$-		
											\$-		\$-		
											\$		\$-		
											\$-		\$-		
	Exercise Sub-														
	Total										\$ 1,000.00		\$ 1,000.00	-	
EXERCISE	COST NARRATIV	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E	XPLAINE IN DET	AIL THE POS	SITIONS AND D	ELIVERABLES. N	ARRATIVE WIL	L BE USED TO E	NSURE ITEMS LI	STED WILL BE CO	OMPLETED IN THE G	RANT			

Fusion Center Coordination Exercise - This funding suppors the purchase of materials to conduct an information sharing fusion center exercise.

								Total Original	Line Item	
								\$ 643,624.99	\$-	
All budgets require an email approval from the financial and/or grant manager										



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

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		*	*Required Fields		-	a 1							**Require	ed Fields						
Line item on Master Budget	Title	Funding Source	Purpose (Please note if travel is for training)	Departure City	Destination City	Travel Start Date	Travel End Date	No. Days	No. Nights	Airfare	Hotel	Per Diem	Motor Pool Car	Mileage	Reg Fees	Public Trans	Parking	Rental Car	Baggage Fees	Total
1		SHSP	Fusion Liaison Officer Planning / Outreach	Carson	Las Vegas			8	4	\$ 935.00	\$ 572.00		\$ 200.00				\$ 80.00			\$ 2,299.00
		SHSP	Fusion Liaison Officer Planning / Outreach	Carson	Rural			24	12		\$ 1,188.00	\$ 1,224.00		\$ 406.60						\$ 2,818.60
2			Fusion Liaison Officer Planning / Outreach	Carson	Out of state			4	2	\$ 800.00	\$ 320.00	\$ 256.00				\$ 220.00	\$ 40.00		\$ 110.00	\$ 1,746.00
3			General Planning / Prevention Activities	Carson	Las Vegas			12	6	\$ 2,805.00	\$ 858.00	\$ 768.00	\$ 300.00				\$ 186.00			\$ 4,917.00
3			General Planning / Prevention Activities	Carson	Rural			12	6		\$ 594.00	\$ 612.00		\$ 353.10						\$ 1,559.10
4			General Planning / Prevention Activities	Carson	Out of state			14	7	\$ 4.620.00	\$ 1,771.00					\$ 770.00	\$ 70.00		\$ 385.00	\$ 8,512.00
_			Conduct Site Infrastructure / Vulnerability / Threat Assessments	Carson	Las Vegas			6	4			\$ 384.00	\$ 300.00			÷ 770.00	\$ 60.00		÷ 565.66	\$ 2,251.00
5			Conduct Site Infrastructure / Vulnerability / Threat Assessments	Carson	Rural			24	16		\$ 1,584.00	\$ 1,224.00		\$ 588.50						\$ 3,396.50
6			Critical Infrastructure and Key Resources (CIKR) Planning / Outreach	Carson	Las Vegas			4	2	\$ 935.00	\$ 286.00	\$ 256.00	\$ 200.00				\$ 20.00			\$ 1,697.00
0			Critical Infrastructure and Key Resources (CIKR) Planning / Outreach	Carson	Rural			4	2		\$ 198.00	\$ 204.00								\$ 402.00
7			and Key Resources (CIKR) Planning / Outreach	Carson	Out of state			2	1	\$ 660.00	\$ 253.00	\$ 256.00					\$ 20.00			\$ 1,189.00
8			Fusion Liaison Officer Training (Conducted / Attended) Fusion Liaison Officer	Carson	Las Vegas			12	6	\$ 2,805.00	\$ 858.00	\$ 768.00	\$ 300.00				\$ 60.00			\$ 4,791.00
			Training (Conducted / Attended)	Carson	Rural			12	6		\$ 594.00	\$ 612.00		\$ 353.10						\$ 1,559.10
9			Fusion Liaison Officer Training (Conducted / Attended)	Carson	Out of state			4	2	\$ 1,320.00	\$ 506.00	\$ 256.00				\$ 220.00	\$ 40.00		\$ 110.00	\$ 2,452.00
10			Intelligence / Crime Analysis Training	Carson	Las Vegas			16	8			\$ 1,024.00	\$ 400.00				\$ 160.00			\$ 6,468.00
11			Intelligence / Crime Analysis Training	Carson	Out of state			30	21		\$ 5,313.00					\$ 660.00			\$ 330.00	\$ 12,483.00
12			Professional Conferences / Workshops	Carson	Las Vegas			12	8			\$ 768.00	\$ 300.00				\$ 120.00			\$ 4,202.00
13			Professional Conferences / Workshops		Out of state			24	18			\$ 1,536.00				\$ 770.00	\$ 240.00		\$ 385.00	\$ 12,105.00
14			Privacy / Security Training	Carson	Out of state			4	2			\$ 256.00					\$ 40.00			\$ 2,452.00
15			Critical Infrastructure and Key Resources (CIKR) Training (Conducted / Attended)		In state			12	6			\$ 768.00					\$ 120.00			\$ 4,851.00
16			Critical Infrastructre and Key Resources (CIKR) Training (Conducted and Attended)		Out of state			4	3			\$ 256.00				\$ 110.00			\$ 110.00	\$ 1,935.00
17			Exercises	Carson	In state			6	3	\$ 1,402.50						÷ 110.00	\$ 60.00		φ 110.00	\$ 2,575.50
										\$ 36,192.50	\$ 24,861.00	\$ 15,140.00	\$ 2,600.00	\$ 1,701.30	\$ -	\$ 2,970.00	\$ 1,656.00	\$ -	\$ 1,540.00	\$ - \$ 86,660.80

**You must complete the required fields, the other fields are optional

	Nevada Homeland	PROJECT ID:						
	Project Proposal for	Date Submitted	4/5/17					
1)	PROJECT TITLE:	Henderson Integrated Int	Henderson Integrated Intelligence Program (HIIP)					
2)	Proposing/Lead Agency:	Henderson Police Depar	Henderson Police Department					
3)	1° Project Manager Name/Title:	Captain David Burns	Captain David Burns					
	1º Project Manager Contact Info:	Phone: (702) 267-4519	Email: david.burns@cityofhende	rson.com				
4)	2° Project Manager Name/Title:	Adam Kellner						
	2 ^o Project Manager Contact Info:	Phone: (702) 267-4528	Email: adam.kellner@cityofhenc	lerson.com				
5)	Finance/Grant Contact Name/Title:	Tina Emrich, Sr. Police B	Tina Emrich, Sr. Police Business Analyst					
	Finance/Grant Contact Info:	Phone: (702) 267-4527	Phone: (702) 267-4527 Email: tina.emrich@cityofhenderson.com					
\sim				0				

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\bullet}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Henderson Police Department has been successful in identifying stolen vehicles and wanted individuals since the implementation of the ALPR technology; however, this technology has evolved since our 2011 original implementation. The cases in 2016 and 2017 were a result of having access to an outside ALPR system that incorporates both ALPR and facial recognition technologies. Due to the effectiveness of this coordinated capabilities, the Henderson Police Department is looking to develop a technology solution as a force multiplier to increase our capabilities and capacity to aid us with combating drug, burglary, vandalism, and conducting targeted enforcement activities (identify sex offenders in close proximity to schools, parks, etc.) as well as combat criminal activities including but not limited to terrorism, wanted individuals, missing persons, etc. in order to meet service needs and demands.

Our project proposes to replace the current ALPR equipment installed in nine (9) police vehicles and add four mobile trailers outfitted with 4 cameras and two (2) ALPRs in order to capture data and coordinate the data captured from both platforms into a single software system. The proposed project will develop an intelligence led policing platform that will coordinate and share information with local, state and federal agencies to utilize ALPRs and facial recognition to enhance enforcement and investigative abilities. The proposed project will include, but not limited to the increase in: investigative leads; identification of criminals; recovery of stolen vehicles; aid in the apprehension of suspects involved in terrorist activities, drug trafficking, human trafficking, and kidnappings; amber alerts; silver alerts; robberies; etc.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed*. 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

Primary Core Capability:	ntelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]					
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]					
DEM Recommended Core Capability:	Interdiction and Disruption [Mission Area(s): PREVENTION/PROTECTION]					

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Henderson Police Department proposes to develop and implement an intelligence led information sharing system that will use the latest ALPR technology and facial recognition software. HPD will solicit vendors to present their solutions to develop the most effective investigative tool that will allow HPD as well as other local, state and federal agencies to provide HPD with their agencies license plate, criminal images, etc. with the goal of generating investigative leads and increasing case closures. Once leads have been identified – HPD Crime and Intelligence Unit will forward the information to partnering agency. Upon request, trailers purchased under this funding opportunity will be made available to partnering agencies to help them with special events, targeted enforcement activities, etc. Through our partnership in the Southern Nevada Fusion Center, HPDs Crime Analysts assigned there will be of assistance to the other local, state and federal agencies should they have specific questions and/or need additional information.

Nevada Homeland	PROJECT ID:					
Project Proposal for	Project Proposal for FFY17 HSGP Funding Description					
PROJECT TITLE REFERENCE:	Henderson Integrated Intelligence Program (HIIP)					
10) PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS) Prio	rity and Urban Arec	a Strategy			

NCHS FFY17 Priority	#2 - INTELLIGENCE AND INFORMATION SHARING
Urban Area Strategy Priority	#2 - INTELLIGENCE AND INFORMATION SHARING

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 Henderson Police Department proposes to develop and implement an intelligence led information sharing system that will use the latest ALPR technology and facial recognition software. HPD will solution vendors to present their vendor solutions in an effect to develop the most effective investigative tool that will allow HPD as well as other local, state and federal agencies to provide HPD with their agencies license plate, criminal images, etc. with the goal of generating investigative leads. Once leaders have been identify – HPD Crime and Intelligence Unit will forward the information to the partnering agency. Upon request the trailers purchased under this funding opportunity will be made available to partnering agency to help them with special events, targeted enforcement activities, etc. Through our partnership in the Southern Nevada Fusion Center, HPDs Crime Analysts assigned their will be of assistance to the other local, state and federal agencies should they have specific questions and/or need additional information.

This project will involve a coordinated work effort between the vendor, the Technical Services Division of the Police Department and the Department of Information Technology for the City to ensure all requirements are identified and goals are

The Henderson Police Department will seek requests for proposal from vendors for our proposed program to ensure the program design, equipment and software meet our desired program deliverables.

The process of implementing our objectives is to develop a calendar of activities. Technical Services Division of the Henderson Police Department will be responsible for maintaining the calendar. Technical Services will be responsible for an initial agreement with the local jurisdiction if one does not currently exist.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Henderson Police Department	City	Capt. David Burns
12(b)			
12(c)			

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

Sustainment of the project will be the responsibility of the Henderson Police Department once fully implemented.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %
LV-UAJI /0	Juane-Wide /0	IUIAL /0

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada	Homeland	Security Grant Program (HSGP)	PRO	JECT ID:	
Project Pr	oposal for	• FFY17 HSGP Funding Description	Date	Submitted	4/5/17
JECT TITLE REFE	RENCE:	Henderson Integrated Intelligence Program (HIIP)			
	ha abiactivas au	quisitions, and quantities within each category. Be spec	rific Idontify I	IASI and State	cost
	-	cies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15b) Organizatio	n [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
		8 ALPRs for Trailers, 4 trailers with four cameras apture and search data captures from ALPRs and	\$ 635,000.00	\$ 0.00	\$ 635,000.00
15d) Training [De	velopment and de	livery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15e) Exercise [De	velopment and exe	ecution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15f) Personnel [S	Staff (not contractor	rs) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15g) PROJECT T			LV-UASI	State-wide	TOTAL
			\$ 635,000.00	\$ 0.00	\$ 635,000.00

Project Proposal for FEV17 HSGP Funding Description Date Submitted 4/5/17	Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	
	Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

16)

Henderson Integrated Intelligence Program (HIIP)

	CHEDULE - 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	Work with Technical Services Division, IT Project Manager and Purchasing to develop RFP	10/01/17	11/15/17	2
3	RFP and final vendor selection	11/15/17	01/31/18	3
4	Contract/PO with selected vendor	02/01/18	02/28/18	1
5	Purchase equipment	03/01/18	03/31/18	1
6	Installation of equipment	04/01/18	04/30/18	1
7	Log equipment on inventory log	04/30/18	04/30/18	1
8	Install and configure software. Begin coordinating with other local agencies.	04/01/18	04/30/18	1
9	Interface equipment and software	04/01/18	04/30/18	1
10	System testing. Finalize agreements with local agencies.	05/01/18	05/31/18	1
11	Final acceptance	06/01/18	06/30/18	1
12	Implementation of program	07/01/18	07/01/18	1

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 - this project has the ability to create watch lists to help in the identification and apprehension of known or suspected terrorists. The goal of the proposed solution is to have a system that will allow for images of suspects can be inputted into the facial recognition software and cross references against the media collected from the trailer cameras. Additionally, vehicle data can be inputted into the system and cross referenced against the data already collected and should a notification be identified the system will send an alert.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below. This project supports interagency intelligence and information sharing.

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

Yes - this project can be broken down into three phases:

Projected Cost \$160,000.00 Phase I

2 – Trailers with cameras

Phase II Project Cost \$315,000.00

9 ALPRs Vehicle replacement of existing camera equipment, 8 ALPRs for trailers (2 per trailer), and software.

Phase III Projected Cost \$160,000.00

2 - Trailers with cameras

Δ

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
ROJ	ECT TITLE REFERENCE:	Henderson Integrated Intelligence Program (HIIP)		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
"e" are limitied to visible text box size	federal agencies to develop an in plate reader (ALPR) and facial re criminals, etc.	to capture and category data into useful information that ca htegrated intelligence led policing program that will incorpor- ecognition technology to search for stolen vehicle, violent of measurable "state-wide" benefit? YES (•) NO () Explain below	ate the latest automa fenders, runaways, a	ated license
e limi		measurable "state-wide" benefit? YES (•) NO () Explain beli ies and apprehension of suspects whereby increasing the s		
Fields "d" and "e" ar				

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

The Las Vegas Valley Region has experienced an increase in property crimes, robberies and aggravated assaults (see Table 1). We have further realized case clearance rates are fluctuating due to a contain changing in priorities to respond to calls for service, take more crime reports, and investigate crimes.

ts 2014 - 2016	6 Part I	
2016	2015	2014
299.279	291,432	284,968
Not Available	282,554	274,121
10	4	3
94	98	89
234	180	165
278	194	195
1,234	1,356	1,397
3,618	3,463	3,531
630	530	495
21	20	29
	-	452
	,	5,452
6,119	5,845	5,904
	2016 299.279 Not Available 10 94 234 278 1,234 3,618 630	299.279 291,432 Not Available 282,554 10 4 94 98 234 180 278 194 1,234 1,356 3,618 3,463 630 530 21 20 616 476 e 5,503 5,369

Our agency's ability as well as the abilities of other local, state and federal agencies to efficiently and effectively address drug, burglar, vandalism, high speed, and target enforcement activities (identify sex offenders in close proximity to schools, parks, etc.) has been impacted by the continuous shifting of personnel to address the increase in serious/violent crimes. In recognition of this problem, the HPD Command Team gave direction to find a solution in mitigating the continuous fluctuation in priorities in crimes. According to the National Insurance Crime Bureau 2015 statistics, out of 380 rankings the Las Vegas Valley area ranked 24th in comparison to the greater Los Angeles area which ranked 23rd as a hot spot for auto thefts in the United States. The greater Los Angeles areas daily average population is 9.9 million in comparison to the Las Vegas Valley area which has a static daily population of 2 million; however, due to tourism has an upward daily population of 5.5 million. By all appearances the influx of non-residential individuals to the Las Vegas Valley area appears to have an impact on the criminal activities plaguing our community.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

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

				LIN	E ITEM DI	ETAIL BUDG	HC I'								
	Agency Name		Name & Contact #		vid Burns 702-	Grant Manager Name & Contact #		h 702-267-4527							
	IJ TITLE:	Integrated Intelligence Program (HIIP)													
		One Budget Per Funding Stream													
		UASI													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$-		
2								\$-					\$-		
3								\$ -					\$-		
4	Personnel							\$-					\$-		
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$-					\$-	\$-	
	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort					AEL Ref #		Total Budget		Descriptions on how it v
ne #				Funding	Salary Hourly	% of Effort					AEL Ref #		\$0.00		Descriptions on how it w
6	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort		Amount			AEL Ref #		\$0.00 \$0.00		Descriptions on how it w
ne #	Fringe Benefits	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort		Amount \$ - \$ -			AEL Ref #		\$0.00		Descriptions on how it w
ne # 5 6 7	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort		Amount \$ - \$ - \$ - \$ - \$ \$ \$			AEL Ref #		\$0.00 \$0.00 \$0.00		Descriptions on how it w
ne # 5 6 7 8	Fringe Benefits Fringe Sub- Total OST NARRATIVE	Positions Require: Fringe to be separate from	Туре	Funding Type			n (hours)	Amount \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it w
ne # 5 6 7 8 8	Fringe Benefits Fringe Sub- Total OST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Type	Funding Type			n (hours)	Amount \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it w affect your program
5 6 7 8 8 11NGE C 11NGE C	Fringe Benefits Fringe Sub- Total OST NARRATIVE IERE	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	Type	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it v
5 6 7 8 NINGE C Intrative b ne #	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget	Reductions	Line Item Reductions Descriptions on how it w
5 6 7 8 IINGE C rrative F ne #	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it v
5 6 7 8 IINGE C IINGE C IINGE C 9 10 11 11	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it v
5 6 7 8 IINGE C rrative F ne #	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it v
9 9 10 11 11 13 14 15	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it w
9 9 10 11 12 13	Fringe Benefits Fringe Sub- Total OST NARRATIVE GOST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS AI	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it w

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$-					\$0.00	\$0.00	

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$					\$		
23								\$ -					\$ -		
24								\$-					\$-		
25								\$-					\$-		
26								\$-					\$-		
27								\$-					\$-		
	Organization Sub-Total							\$-					\$ -	-	
OPCANIZ	ATION COST NAE	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	ALL THE DOOL	TIONS AND DELIV	EDADIES	NADDATIVE WII	I BELISED TO E	INCLIDE ITEMS I	STED WILL BE CON	DI ETED IN			

Narrative HERE

#	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase	Previous Funding	QUANTITY	UNIT	TOTAL	Primary Core	Secondary Core	AEL Ref #	Funding	Total Budget	Line Item	Line Item Reductions
*			Туре	Туре	QUANTIT	COST	TOTAL	Capability	Capability	ALL Kei #	Source	Total Buuget	Reductions	Descriptions on how it wi affect your program
	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 AN AEL												
								Intelligence and Information	Operational					
28		Automated License Plate Readers for Vehicles	New		36.00	7,045.46	\$ 253.636.50			13LE-00-SURV	UASI	\$ 253.636.50		
							,	Intelligence and						
29		Automated License Plate Readers for Trailers	New		8.00	7 045 46	\$ 56,363.50	Information	Operational Coordination	13LE-00-SURV	UASI	\$ 56,363.50		
2.9					0.00	7,040.40		Intelligence and		13LL-00-30KV	UNDI	\$ 30,303.30		
			New						Operational					
30		Trailers with Cameras			4.00	65,000.00	\$ 260,000.00			13LE-00-SURV	UASI	\$ 260,000.00		
			New					Intelligence and Information	Operational					
31		Software for ALPR System and Facail Recognition	INEW		1.00	65,000.00				13LE-00-SURV	UASI	\$ 65,000.00		
32							\$ -					\$ -		
33							\$ -					\$-		
34							\$ -					\$ -		
35							<u>s</u> -					\$ -		
36 37							\$ - ¢					\$ - \$		
37 38			├ -				ə - s -		1			ъ •		
39							\$ -					\$ -		
	EQUIPMENT						¢ 625.000.00					¢ 635.000.00		
	Sub-Total							\$ 635,000.00					\$ 635,000.00	

Our project proposes to replace the current ALPR equipment installed in nine (9) police vehicles and add four mobile trailers outfitted with 4 cameras and two (2) ALPRs in order to capture data and coordinate the data captured from both platforms into a single software system. The proposed project will develop an intelligence led policing platform that will coordinate and share information with local, state and federal agencies to utilize ALPRs and facial recognition to enhance enforcement and investigative abilities. The proposed project will include, but not limited to the increase in: investigative leads; identification of criminals; recovery of stolen vehicles; aid in the apprehension of suspects involved in terrorist activities, drug trafficking, human trafficking, and

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	÷				-	-							
40											\$-		\$ -		
41											\$ -		\$ -		
42											\$-		\$-		
43											\$-		\$-		
44											\$-		\$-		
45											\$-		\$-		
46											\$-		\$ -		
47											\$-		\$-		
48											\$-		\$-		
49											\$-		\$-		
	Training Sub- Total	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I									\$-		\$-	-	

Ι

_ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$ -		\$-		
52											\$-		\$-		
53											\$-		\$ -		
54											\$-		\$ -		
55											\$-		\$ -		
56											\$-		\$ -		
57											\$-		\$ -		
	Exercise Sub- Total										\$-		\$ -	-	
VEDCISI	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE		THE POSITIONS		IES NADE	ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED	WILL BE COMPLET				

Narrative HERE						Total Original Budget	Line Item Reductions Total	
						\$ 635,000.00	s -	
All budgets require an email approval from	the financial and/or grant manager							

	Nevada Homeland Security Grant Program (HSGP)			PROJECT ID:	J	
	Project Proposal for FFY17 HSGP Funding Description			Date Submitted	4/5/17	
1)	PROJECT TITLE:	Public Health Analytical S	SNCTC FTE			
2)	Proposing/Lead Agency:	Southern Nevada Health	District			
3)	1° Project Manager Name/Title:	Steven Kramer/Supervise	Steven Kramer/Supervisor			
	1º Project Manager Contact Info:	Phone: (702) 759-1658	Email: kramer@snhdmail.org			
4)	2 [°] Project Manager Name/Title:	Jeff Quinn/Manager	Jeff Quinn/Manager			
	2° Project Manager Contact Info:	Phone: (702) 759-0945	Email: quinn@snhdmail.org			
5)	Finance/Grant Contact Name/Title:	ynda Zielinski/Accountant II				
	Finance/Grant Contact Info:	Phone: (702) 759-1245	Email: zielinski@snhdmail.org			
6)	CLASSIEICATION - Chack the r	rimary intention of the D	ranased Project:	Ch	oose one.	

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\bullet}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The SNHD is seeking funding through the DHS UASI grant to hire 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 area. 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.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]		
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]		
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION		

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

SNHD would like to ensure that public health has an individual assigned to the SNDTC 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 mannrr. Information that will be gathered will be related to local, national, and international trends for outbreaks, emerging diseases, and Bio-Events.

	Nevada Homeland	l Sec	Security Grant Program (HSGP)		PROJECT ID:	J		
	Project Proposal for	FFY	17 HSGP	P Funding	g Descrip	otion	Date Submitted	4/5/17
PRO.	IECT TITLE REFERENCE:	Public	c Health Ana	alytical SNC	TC FTE			
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nev	ada Commi	ission on Ho	meland Sec	urity (NCHS) Prio	rity and Urban Area	Strategy
	NCHS FFY17 Priority		#2 - INTEL	LIGENCE A	AND INFORM	MATION SHARIN	IG	
	Urban Area Strategy Priority		#4 - OPER	RATIONAL C	COORDINAT	ION		
11)				,	· ·	•	•	at work
FIELD IS LIMITED TO VISIBLE TEXT BOX	Describe in 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 begin process of hiring a new FTE as a Surveillance Biostatistician/Analyst. This individual will need to go through the clearance process with LVMPD to have access to the SNCTC. This FTE will enhance the current staff that currently work within the					clearance ithin the rough current		

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Southern Nevada Health District	County-Special District	Steven Kramer
12(b)			
12(c)			

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

This project will be contingent upon receiving funding through the UASI grant process. If funding is not available, SNHD will not be able to provide the enhancement to Public Health representation to the SNCTC.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

	Nevada Homeland Security Grant Program (HSGP) PROJECT I				J
	Project Proposal fo	r FFY17 HSGP Funding Description	Date	Submitted	4/5/17
PRO.	JECT TITLE REFERENCE:	Public Health Analytical SNCTC FTE			
15)	-	acquisitions, and quantities within each category. Be special licies, plans, procedures, mutual aid agreements, strategies]	ccific. Identify LV-UASI	UASI and State State-wide	<i>cost.</i> SubTotal
					\$ 0.00
	15h) Organization (Establishmen	t of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
box size					\$ 0.00
ext	15c) Equipment [Procurement and	d installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
are limitied to visible text box size					\$ 0.00
lin	15d) Training [Development and c	elivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Fields are					\$ 0.00
	15e) Exercise [Development and e	xecution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
					\$ 0.00
		ors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
	The hiring of a new FTE with S Salary and Fringe benefits.	NHD in the classification of Bioistatistician/Analyst,	\$ 85,780.00		\$ 85,780.00
			LV-UASI	State-wide	TOTAL
	15g) PROJECT TOTALS		\$ 85,780.00	\$ 0.00	\$ 85,780.00

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:JProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/5/17

PROJECT TITLE REFERENCE:

Public Health Analytical SNCTC FTE

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	Post for new FTE position	10/15/17	11/17/17	1
3	Provide orientation to new FTE within the District procedures and SNCTC procedures and go through security process	11/17/17	12/17/17	1
4	Work within SNCTC and gather analytical data	12/17/17	09/30/18	10
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.

The newly hired FTE will 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 Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

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.

This FTE is not a budgeted position within SNHD.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	J
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PRO.	ECT TITLE REFERENCE:	Public Health Analytical SNCTC FTE		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	Currently not a budgeted positio			
imiti	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explain	below.	
Fields "d" and "e" are l		en the agencies provides the ability for local, state, and fe vards a potential or actual threat.	ederal partners to be pr	epared for any

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

Currently SNHD provides 2 staff to the SNCTC on a part-time basis of 1 day each per week. The current individuals are involved with planning and development of programming for community needs. The new FTE would be directly related to the gathering and sharing of information, along with the statistical data coordination. The new 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.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project

	Nevada Homeland	Security Grant Pr	Security Grant Program (HSGP)		K	
	Project Proposal for FFY17 HSGP Funding Description			Date Submitted	3/21/17	
1)	PROJECT TITLE:	Public Warning and Public	ic Information			
2)	Proposing/Lead Agency:	Washoe County Emerger	ncy Management and Homeland	Security		
3)	1° Project Manager Name/Title:	Aaron R. Kenneston	Aaron R. Kenneston			
	1º Project Manager Contact Info:	Phone: (775) 337-5898	Email: akenneston@washoecou	nty.us		
4)	2 [°] Project Manager Name/Title:	N/A				
	2 ^o Project Manager Contact Info:	Phone:	hone: Email:			
5)	Finance/Grant Contact Name/Title:	Larry Davis				
	Finance/Grant Contact Info:	Phone: (775) 337-5859	Email: Ldavis@washoecounty.u	S		
6)	CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:					

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\bigcirc

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

"To sustain Public Information and Warning for Nevada Public Safety Officials and Citizens Statewide."

The Nevada Statewide Public Warning and Public Information project is in direct response to a DHS core capability-Public Warning and Information.

The project builds upon an existing base to implement the PPD-8 campaign to build and sustain preparedness through proactive public outreach and community-based and private sector programs for a unified approach. The project also builds upon Nevada Public Safety Officials' ability to quickly send alerts and warnings using Common Access Protocol (CAP) through digital means.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Public Information and Warning [Mission Area: ALL]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project seeks to strengthen Public Warning by completing the implementation of Collaborative Operating Groups (COGs) throughout the State, and seeks to strengthen Public Information by partnering with Nevada Broadcasters to promote terrorism awareness.

	Nevada Homeland	Security Grant Program	n (HSGP)	PROJECT ID:	K
	Project Proposal for	FFY17 HSGP Funding [escription	Date Submitted	3/21/17
PRO.	IECT TITLE REFERENCE:	Public Warning and Public Inform	nation		
10)	PRIORITIES - Identify applicab Objective to be addressed	e Nevada Commission on Home	and Security (NCHS) Prie	ority and Urban Area	Strategy
	NCHS FFY17 Priority	#3 - PUBLIC INFORMATI	ON AND WARNING		
	Urban Area Strategy Priority				
FIELD IS LIMITED TO VISIBLE TEXT BOX	Describe in rough order the process by with the Si community- state, local, tribal, ni governance, and a project mana The components are: • A collaborative stakeholder growing responders to warn and information campaign with a government warns/informs (and say something")	atewide Task Force to guide the n-profit, and private sector. The ger will conduct day-to-day coord up to guide the investment shing and sustaining the COGs a m- and to interact with the local of levada Broadcasters to align with	oroject composed of repr Washoe County Emerge ination. and leading workshops to community to ensure mes the National Ready mes	esentatives from the w ncy Manager will guid teach public safety of ssage channels are ap ssage, teach the public	whole e fficials and propriate and c how
FIE					

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Emergency Mgmt & Homeland Security	Washoe County	Aaron R. Kenneston
12(b)			
12(c)			

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

The Nevada Statewide Citizen Information and Warning project outcome is the sustainment of a whole community approach to homeland security.

A transition component will ensure smooth hand-over to local government for sustainment.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

PROJECT ID: 3/21/17

K

Date Submitted

PROJECT TITLE REFERENCE:

Public Warning and Public Information

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
Two years of Public Messaging through the Nevada Broadcasters.			
		\$ 200,000.00	\$ 200,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
N/A			
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
N/A			
			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Three training workshops (North, South, & East), with venue rental, logistics support, and limited travel.			
		\$ 50,000.00	\$ 50,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
N/A			
			\$ 0.00
			,
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
N/A	11 0 001		
			A A - -
			\$ 0.00
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL
	\$ 0.00	\$ 250,000.00	\$ 250,000.00

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	K
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/21/17
PROJECT TITLE REFERENCE:	Public Warning and Public Information		

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	Accept funds to Board of County Commissioners	10/31/17	11/30/17	1
3	Establish vendor contracts	12/01/17	01/30/18	2
4	Conduct public information	02/01/18	12/30/19	22
5	Conduct Training Workshops	05/01/18	10/31/18	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.

It strengthens government ability to quickly send Emergency Alert System (EAS) messages during a terrorism event, and teaches citizens how to be prepared for such events.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.

Yes this is one of the "Top Five" priorities.

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

Yes, although reducing funding reduces the reach to educate and inform citizens. This investment pays an almost 25:1 return over money spent advertising.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	K
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/21/17
PROJ	ECT TITLE REFERENCE:	Public Warning and Public Information		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
Fields "d" and "e" are limitied to visible text box size	The project cannot exist withou	training and broadcaster contracts.		
nitie	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔘 Explain bel	ow.	
Fields "d" and "e" are lii		rom broadcasters is tracked monthly, and the progress on th ficials to launch warming messages.	ne 10 COGs is meas	ured in ability
18)	THIRA COMPLETION - Please	indicate the participation level in completing the 2016 T	HIRA Survey. <u>CHOO</u>	<u>SE ONE</u> :

- (•) YES Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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 is a great project to protect our state through citizen information and warnings. The project helps our citizens to become better informed and act as terrorism spotters rather than passive victims.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original
Amended

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP)

				LI		Y 2017 DETAIL BUD	GET								
	Agency Name	Washoe County Emergency Management and Homelar	Name & Contact #	ABONR. Kent	eston	Grant Manager Name & Contact #	Larry Davis I	davis@washoecc	ounty.us (775) 3	37-5859					
	IJ TITLE:	Public Information and Warning					_								
		One Budget Per Funding Stream													
		SHSP													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$ -		
2					+		<u> </u>	\$ - \$ -					\$ - \$ -		
4								ş -					\$ -		
	Personnel							¢					¢	\$-	
ERSONN	Sub-Total IEL COST NARRA	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAII	NE IN DETAIL	L THE POSITIC	NS AND DELIVER	ABLES. NAR	ATIVE WILL BE	JSED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE	ф -	ψ -	
arrative H	IERE														
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
5								\$ -	-				\$0.00		
6 7								\$ - \$ -					\$0.00 \$0.00		
8	Fringe Oak						-	\$-					\$0.00		
	Fringe Sub- Total														
	OST NARRATIVE							\$-					\$0.00	\$0.00	
		REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXP	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	ES. NARRATIV	\$- 'E WILL BE USED	TO ENSURE IT	EMS LISTED WILI	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
arrative H	IERE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXI	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	ES. NARRATIV	\$- 'E WILL BE USED	TO ENSURE IT	EMS LISTED WILI	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
	ERE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		Previous Funding Type	Category of Each Travel	ND DELIVERABLE Travel Reference # from Addendum		\$ E WILL BE USED Cost for each Trip	TO ENSURE IT	EMS LISTED WILL Primary Core Capability	BE COMPLETED IN Secondary Core Capability	THE GRANT Funding Source	\$0.00 Total Budget	\$0.00 Line Item Reductions	
		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)	Purchase	Previous Funding	Category of	Travel Reference # from		Cost for each		Primary Core	Secondary Core	Funding	Total Budget	Line Item	Line Item Reductions Descriptions on how it w affect your program
ne # 9	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 NON-COMPLIANCE) Planning Meeting -2	Purchase Type Select Type Sustainm	Previous Funding Type	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability Public Info &	Secondary Core Capability	Funding	Total Budget	Line Item	Descriptions on how it w
ne #	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 NON-COMPLIANCE)	Purchase Type Select Type	Previous Funding Type	Category of	Travel Reference # from		Cost for each Trip	Total Cost 	Primary Core Capability Public Info & Warn Public Info &	Secondary Core Capability	Funding	Total Budget	Line Item	Descriptions on how it w
ne # 9	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea)	Purchase Type Select Type Sustainm ent Sustainm ent	Previous Funding Type Other Federal Other Federal	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability Public Info & Warn Public Info & Warn	Secondary Core Capability	Funding	Total Budget	Line Item	Descriptions on how it w
ne # 9 10	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea) Meal expense for LV (3 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day Hotel in LV (1-night for workshop 3 attendees)	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent	Previous Funding Type Other Federal Other Federal Other Federal	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost 	Primary Core Capability Public Info & Warn Public Info & Warn Public Info & Warn	Secondary Core Capability	Funding	Total Budget \$0.00 \$1,200.00	Line Item	Descriptions on how it w
9 10 11 12	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea) Meal expense for LV (3 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day Hotel in LV (1-night for workshop 3 attendees) Airport Parking in RNO for 3 attendees, 2 days	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm	Previous Funding Type Other Federal Other Federal Other	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost 	Primary Core Capability Public Info & Warn Public Info & Warn Public Info & Warn Public Info &	Secondary Core Capability Operational Coord Operational Coord Operational Coord	Funding	Total Budget \$0.00 \$1,200.00 \$117.00 \$288.00	Line Item	Descriptions on how it w
ne # 9 10 11 12 13	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea) Meal expense for LV (3 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day Hotel in LV (1-night for workshop 3 attendees) Airport Parking in RNO for 3 attendees, 2 days \$14/day x2 x3	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other Federal Other Federal	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost - 1,200.00 117.00 288.00 84.00	Primary Core Capability Public Info & Warn Public Info & Warn Public Info & Warn Public Info & Warn Public Info &	Secondary Core Capability Operational Coord Operational Coord Operational Coord	Funding	Total Budget \$0.00 \$1,200.00 \$117.00 \$288.00 \$84.00	Line Item	Descriptions on how it w
9 10 11 12	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea) Meal expense for LV (3 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day Hotel in LV (1-night for workshop 3 attendees) Airport Parking in RNO for 3 attendees, 2 days	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent	Previous Funding Type Other Federal Other Federal Other Federal Other Federal	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost 	Primary Core Capability Public Info & Warn Public Info & Warn Public Info & Warn Public Info & Warn Public Info &	Secondary Core Capability Operational Coord Operational Coord Operational Coord	Funding	Total Budget \$0.00 \$1,200.00 \$117.00 \$288.00	Line Item	Descriptions on how it w
9 9 10 11 12 13 14	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 NON-COMPLIANCE) Planning Meeting -2 Airline expense (3 airline tickets @ \$400 ea) Meal expense for LV (3 attendees) 1-day lunch excluded/provided & calculated at 75% for travel day Hotel in LV (1-night for workshop 3 attendees) Airport Parking in RNO for 3 attendees, 2 days \$14/day x2 x3	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other Federal Other Federal	Category of Each Travel	Travel Reference # from	Total Trips	Cost for each Trip	Total Cost - 1,200.00 117.00 288.00 84.00	Primary Core Capability Public Info & Warn Public Info & Warn Public Info & Warn Public Info & Warn Public Info &	Secondary Core Capability Operational Coord Operational Coord Operational Coord	Funding	Total Budget \$0.00 \$1,200.00 \$117.00 \$288.00 \$84.00 \$300.00	Line Item	Descriptions on how it w

The project will host two Planning meetings in Southern Nevada with a cumulative total of three Northern Nevada attendees.

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	K
	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														
		Contractor- Nevada Broadcasters Public Information	Sustainm	Other					Public Info &	Operational						1
17		and Warning broadcasts	ent	Federal		1.00	200,000.00	200,000.00	Warn	Coord			\$200,000.00			ł
18				Other												i
19				Other												1
20				Other												1
21								-								1
	Planning Sub-															1
	Total							\$ 200,000.00					\$200,000.00	\$0.00		1
PLANNIN	IG COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERA	BLES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	D IN THE				

This funds a public information and public warning campaign though the Nevada Broadcasters which will ensure television and radio spots for citizens.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.												
22							\$ -					\$ -		
23							\$ -					\$ -		
24							\$ -					\$ -		
25							\$ -					\$ -		
26							\$ -					\$ -		
27							\$ -					\$ -		
	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

_ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 AN AEL													
28								\$-					\$-		
29								\$ -					\$-		
30								\$ -					\$-		
31								\$ -					\$ -		
32								\$ -					\$ -		
33								\$ -					\$-		
34								\$ -					\$-		
35								\$ -					\$ -		
36								\$ -					\$ -		
37								\$ -					\$-		
38								\$ -					\$ -		
39								\$ -					\$ -		
	EQUIPMENT Sub-Total							\$-					\$-	-	
EQUIPME Narrative		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAINI	E IN DETAIL	THE POSITION	NS AND DELIVER	ABLES. NARR	ATIVE WILL BE U	JSED TO ENSUR	E ITEMS LISTED	WILL BE COMPLETI	ED IN 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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	K
	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	9				-	-								
40		Training Contractor to travel through the State and provide for three, IPAWS one-day training workshops (to address Public Warning tool use and IS-247a Integrated Public Alert and Warning System)	Sustainm ent	Other Federal	YES	YES	1.00	39,971.00	Public Alert and Warning	Operational Coord	\$ 39,971.00		\$ 39,971.00			
41		Lunch for 1 training workshop in LV (40 attendees x \$1 GSA Rate)	ent	Federal			40.00		Public Alert and Warning	Operational Coord	\$ 760.00		\$ 760.00			
42		Lunch of 1 training workshop in RNO (40 attendees x \$13 GSA Rate)		Federal			40.00	13.00	Public Alert and Warning	Coord	\$ 520.00		\$ 520.00			
43		Lunch for 1 training workshop in Elko (40 attendees x \$19 GSA Rate)	Sustainm ent	Federal			40.00	19.00	Public Alert and Warning	Coord	\$ 760.00		\$ 760.00			
44		Training Logistics Vendor	Sustainm ent	Federal			1.00	5,000.00		Coord	\$ 5,000.00		\$ 5,000.00			
45		Venue Rental for training	Sustainm ent	Other Federal			1.00	1,000.00	Public Alert and Warning	Operational Coord	\$ 1,000.00		\$ 1,000.00			
46											\$ -		\$ -			1
47											\$ -		\$ -			1
49											\$ -		\$-			1
	Training Sub- Total	VE REQUIRED FOR FACH LINE ITEM ABOVE - PLEASE									\$ 48,011.00		\$ 48,011.00	-		

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 GRAN

The project supports training for Statwide participants to learn and sustain continuity knowledge, both training sessions will include a working lunch so that participants do not need to leave the venue.

.ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												_	
50											\$ -		\$-		
51											\$ -		\$-		
52											\$ -		\$ -		
53											\$-		\$ -		
54											\$ -		\$ -		
55											\$ -		\$ -		
56											\$ -		\$ -		
57											\$ -		\$-		
	Exercise Sub- Total										s -		\$ -	-	

Narrative H	IERE							Total Original Budget	Line Item Reductions Total	
								\$ 250,000.00	\$ -	
All budg	ets require an	email approval from the financial and/or grant	manager							

	Nevada Homeland Security Grant Program (HSGP) PROJECT I								
	Project Proposal for FFY17 HSGP Funding Description Date Submitt								
1)	PROJECT TITLE:	Nevada 2-1-1	vada 2-1-1						
2)	Proposing/Lead Agency:	Financial Guidance Ce	nancial Guidance Center						
3)	1º Project Manager Name/Title:	Michele Johnson, CEO	lichele Johnson, CEO/President						
	1º Project Manager Contact Info:	Phone: (702) 364-0344 Email: Michele@FinancialGuidanceCenter.org							
4)	2 [°] Project Manager Name/Title:	Christie O'Melia							
	2 [°] Project Manager Contact Info:	Phone: (702) 364-0344	Email: Christie@FinancialGuida	inceCenter.org					
5)	Finance/Grant Contact Name/Title:	Michele Johnson	Michele Johnson						
	Finance/Grant Contact Info:	Phone: (702) 364-0344 Email: Michele@FinancialGuidanceCenter.org							
6)	CLASSIEICATION - Chack the r	rimary intention of the	Branasad Brajact:		Choose one:				

CLASSIFICATION - Check the primary intention of the Proposed Project: U)

noose one.

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\bullet}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

This proposal is submitted for the purpose of improving Public Information and Warning capabilities of the state and individual county Emergency Operation Centers (EOC) statewide during disaster activation. Nevada 2-1-1 serves as the non-emergency Call Center for people searching for a variety of non-emergency health and human services, relieving 9-1-1 operators and EOC staff from answering such questions, while providing 24/7 availability to those in need. People living or visiting Nevada during the time of an emergency/disaster would benefit greatly from the ability to have guestions and concerns answered 24/7 by trained staff armed with correct information supplied directly by EOC communication staff, thus ensuring people in need are able to access the non-emergency services and information they need to assist them through a disaster. When an EOC is activated due to an emergency, the EOC Manager contacts Nevada 2-1-1 for assistance. A 2-1-1 on-site Liaison is assigned, and the Call Center's disaster protocol is activated. The Liaison serves as the EOC on-site representative of Nevada 2-1-1, working side-by-side with the EOC manager and the designated PIO to ensure a smooth process in providing accurate and up-to-date information with 2-1-1 Call Center staff. The Liaison remains on-site at the EOC at all times throughout an emergency, until the EOC manager releases that person. A new 2-1-1 database is being purchased, which will ensure Nevada 2-1-1 is able to use software equipment that is made specifically to serve 2-1-1 Call Centers to perform this important communication task during emergencies and disasters. The addition of two backup servers in the Reno office for the purpose of redundancy and Continuity of Operations Planning is also requested,

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Public Information and Warning [Mission Area: ALL]
Secondary Core Capability:	NONE
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The fundamental purpose of the Public Information and Warning core capability is to alert and inform the public during times of emergency. Nevada 2-1-1 serves a vital purpose in providing members of the public with non-emergency information and referrals 24/7, alleviating the necessity of 9-1-1 answering such calls, allowing them to respond to emergency calls as the 9-1-1 system is designed to do and assisting EOCs with ensuring accurate, and up-to-date information is available and disseminated to the public, while providing the means for rumor control during times of emergency. The on-site Nevada 2-1-1 Liaison is in constant contact with EOC staff and the 2-1-1 Call Center. Information is available to the public 24/7 by dialing 2-1-1, through text messaging, and on the www.Nevada211.org website.

	Nevada Homeland	Sec	rity Grant Program (HSG	iP)	PROJECT ID:	L		
	Project Proposal for	FFY	7 HSGP Funding Descrip	tion	Date Submitted	3/28/17		
PRO.	IECT TITLE REFERENCE:	Neva	ada 2-1-1					
10)	PRIORITIES - Identify applicable Objective to be addressed	le Nev	da Commission on Homeland Secu	rity (NCHS) Prio	rity and Urban Area	Strategy		
NCHS FFY17 Priority #3 - PUBLIC INFORMATION AND WARNING								
Urban Area Strategy Priority #3 - PUBLIC INFORMATION AND								
11) ELELD IS LIMITED TO VISIBLE TEXT BOX	Describe in rough order the process by v The nonprofit Financial Guidance Department of Health and Huma emergency, the affected EOC or Nevada 2-1-1 Liaison to travel to the EOC Manager and/or the de between the EOC, the 2-1-1 Liai	which the e Cent o Server count o the a signate son, a	ibe how, and by whom, the Propo project will be accomplished, identifying will r is the administrator of the Nevada ces. The CEO/President of Financi contacts Ms. Johnson, who would a propriate EOC or other designated I PIO, and a determination is made d the Nevada 2-1-1 Call Center. annual subscription and the install	no (i.e. staff, contrac 2-1-1 program, al Guidance Cer activate the 2-1- location. The Ne e how information	tor, or ?) will perform wh with oversight by the nter is Michele Johns 1 Call Center and as evada 2-1-1 Liaison o n should be commun	Nevada on. During an sign the checks-in with icated		
LIELD								

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Financial Guidance Center	Nonprofit	Michele Johnson
12(b)	Nevada Dept. of Health and Human Services	State	Jennifer White
12(c)			

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

XT BOX	The new iCarol database system requires an ongoing annual subscription of \$13,704.
VISIBLE TEXT	
70	
IS LIMITED	
LIELD	

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

50	50	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Г

	Project Proposal fo	or FFY17 HSGP Funding Description	Date	Submitted	3/28/17						
OJEC	T TITLE REFERENCE:	Nevada 2-1-1	•								
Bl	BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.										
15	a) Planning [Development of po	olicies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal						
					\$ 0.00						
15	b) Organization [Establishmer	t of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal						
					\$ 0.00						
_		d installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal						
2-		se system, which is specifically designed to assist risis intervention, among other areas, requires an 704.									
	urchase of two Dell R730 ser 6,500 each, \$13,000 for both.	vers in the Reno office to support COOP at a cost of	\$ 13,352.00	\$ 13,352.00	\$ 26,704.00						
15	d) Training [Development and d	lelivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal						
					\$ 0.00						
15	e) Exercise [Development and e	xecution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal						
					\$ 0.00						
15	f) Personnel [Staff (not contract	tors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal						
					\$ 0.00						
1											

PROJECT ID:

Nevada Homeland Security Grant Program (HSGP)

15g) PROJECT TOTALS

3

TOTAL

\$ 26,704.00

LV-UASI

\$ 13,352.00

State-wide

\$ 13,352.00

Nevada Homeland Security Grant Prog	ram (HSGP) PROJECT ID	: L
Project Proposal for FFY17 HSGP Funding	g Description Date Submitte	d 3/28/17
		,

Nevada 2-1-1

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

PROJECT TITLE REFERENCE:

	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	Purchase database software and subscription, and servers.	06/01/17	06/01/18	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.

In the event of a terrorist attack, Nevada 2-1-1 would have a direct impact by providing non-emergency information and referrals to the public 24/7.
b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES
NO
Explain below.

NO
Nevada 2-1-1 fits into the Public Information and Warning core priority.

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

If it is necessary to reduce funding request in a specific identified category, Nevada 2-1-1 would comply by modifying its request for funding.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	L
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/28/17
PROJ	ECT TITLE REFERENCE:	Nevada 2-1-1		
	d. Can this project continue wi	thout funding? YES 💽 NO 🔵 Explain below.		
are limitied to visible text box size	of emergency. e. Does this project provide a r	fficult to maintain and improve the service available to the	ow.	s during times
Fields "d" and "e" are	As identified previously, Nevada		nievadans.	

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

- **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
- NO Agency has not participated in the 2016 Threats and Hazards 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*

No additional comments at this time.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	Agency Name		Name & Contact #	Micheleer	nancial nter.org; (702)	Grant Manager Name & Contact #	Michele John	son; Michele@F	inancialGuidanc	eCenter.org; (702	364-0344				
	IJ TITLE:	Nevada 211													
		One Budget Per Funding Stream													
		SHSP													
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1															
2															
3								\$-					\$-		
4	Personnel							\$-					\$-		
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$-						\$-	
01011110		AY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED A					negoeon.								
Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
Line #	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort					AEL Ref #		Total Budget		Descriptions on how it will
5				Funding	Salary Hourly	% of Effort					AEL Ref #		\$0.00		Descriptions on how it will
5	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort		Amount \$ - \$ -			AEL Ref #		\$0.00		Descriptions on how it will
5	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above		Funding	Salary Hourly	% of Effort	(hours)	Amount \$-			AEL Ref #		\$0.00		Descriptions on how it will
5 6 7	Fringe	Positions Require: Fringe to be separate from Personnel Costs above		Funding	Salary Hourly	% of Effort	(hours)	Amount \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$			AEL Ref #		\$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
5 6 7 8	Fringe Benefits Fringe Sub- Total	Positions Require: Fringe to be separate from Personnel Costs above	Type	Funding Type			(hours)	Amount \$ \$ \$ \$ \$	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it will
5 6 7 8	Fringe Benefits Fringe Sub- Total COST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above	Type	Funding Type		ND DELIVERABLE	(hours)	Amount \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it will affect your program
5 6 7 8 FRINGE (Fringe Benefits Fringe Sub- Total COST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		Funding Type			(hours)	Amount \$ \$ \$ \$ \$	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it will
5 6 7 8 FRINGE C Narrative	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Type	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability TO ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 FRINGE C Narrative I Line #	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability TO ENSURE ITE	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 FRINGE C Narrative Line # 9 10	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability TO ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget Total Budget \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 FRINGE C Narrative 1 Line #	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability Capability TO ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 Narrative Line # 9 10 11 12 13 14	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability Capability TO ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 FRINGE C Narrative 1 Line #	Fringe Benefits Fringe Sub- Total OST NARRATIVE ERE CATEGORY Travel Planning Exercise Equipment Organization	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability Capability TO ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will
5 6 7 8 Narrative Line # 9 10 11 12 13 14 15	Fringe Benefits Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE	(hours)	Amount S - S - S - S - S - S - S - S -	Capability Capability TO ENSURE ITE To ENSURE ITE Total Cost	Capability	AEL ROT#	Source THE GRANT	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions Descriptions on how it will

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$-					\$0.00	\$0.00	

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$-		
23								\$-					\$-		
24								\$-					\$-		
25								\$-					\$-		
26								\$-					\$-		
27								\$-					\$-		
	Organization Sub-Total							\$-					\$ -	-	
ORGANIC	ZATION COST NAM	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	ASE EYPI	AINE IN DET	ALL THE POSI	TIONS AND DELIV	FRARIES NA	RRATIVE WILL F	RELISED TO ENS	URE ITEMS LIST	ED WILL BE COMPL	FTED IN THE			

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL												
28		Annual subscription cost for iCarol database	New	Other	1.00	13,704.00	\$ 13,704.00			04SW-04-NETW		\$ 13,704.00		
29		Purchase two Dell R730 servers in the Reno office to support COOP.	New	Other	2.00	6,500.00	\$ 13,000.00	Public Information and Warning		04HW-01-INHW		\$ 13,000.00		
30														
31							\$ -					\$ -		
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	EQUIPMENT Sub-Total						\$ 26,704.00					\$ 26,704.00		

The new iCarol database system will allow Nevada 2-1-1 to communicate with the affected EOC and the public more effectively as this software is specificically designed to assist 2-1-1 Call Centers. The software requires an annual subscription. The purchase of two servers to be placed in the Reno office of the Financial Guidance Center/Nevada 2-1-1 would serve the purpose of redundancy and satisfy Continuity of Operations Plan requirements.

₋ine #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	Ι
	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					-	-								
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ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
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Narrative HERE							Total Original Budget	Line Item Reductions Total	
							\$ 26,704.00	\$ -	
All budgets require an	email approval from the financial and/or grant	manager							

	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	M
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/4/17
1)	PROJECT TITLE:	Homeland Security Work	ing Group	-	
2)	Proposing/Lead Agency:	Nevada Division of Emer	gency Management		
3)	1° Project Manager Name/Title:	Kelli Anderson			
	1º Project Manager Contact Info:	Phone: (775) 220-1618	Email: kanderson@dps.state.mv	.us	
4)	2 [°] Project Manager Name/Title:	Sonja Williams			
	2 ^o Project Manager Contact Info:	Phone: (775) 687-0388	Email: swilliams@dps.state.nv.u	S	
5)	Finance/Grant Contact Name/Title:	Justin Luna			
	Finance/Grant Contact Info:	Phone: (775) 687-0304	Email: justin.luna@dps.state.nv.	us	
6)	CLASSIFICATION - Check the p	primary intention of the P	roposed Project:	C	hoose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The goal of this project is to continue to support the Homeland Security Working Group, Finance Committee and Commission. DEM support the Homeland Security Grant Program employees, committee members with travel, supplies, equipment and overtime to complete the review of the overall program. The direct user is NDEM and the beneficiaries of the funds all of the working group, finance committee, commission as well as the urban area.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Planning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The project is in direct connection to "planning" and NIMS. Under operational coordination. Establish and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities. This project ensures the overall approved process is reviewed, implemented and monitored for compliance.

d Sec	irity Grant Program (HSGP)	PROJECT ID:	М									
Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/4/												
Home	and Security Working Group											
10) PRIORITIES - Identify applicable Nevada Commission on Homeland Sec Objective to be addressed												
	#4 - OPERATIONAL COORDINATION											
	#4 - OPERATIONAL COORDINATION											
which th ation of avel to rogram d and m	project will be accomplished, identifying who (i.e. staf the current project, state grant staff will ensu- commission, finance and any sub committees also sponsor representatives to attend the Na anaged by state staff and DEM and we will c	f, contract re that th approv ational H	tor, or ?) will perform wh nis project is carried ed by the commissic lomeland Security C	out. on as will as onference								
	hor FFY1 Home ble Neva ble Neva N - Descu which the ation of t ravel to c rogram a d and ma	Homeland Security Working Group ble Nevada Commission on Homeland Security (NCI #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION N - Describe how, and by whom, the Proposed Proj which the project will be accomplished, identifying who (i.e. staf ation of the current project, state grant staff will ensur- ravel to commission, finance and any sub committees rogram also sponsor representatives to attend the Na	Ar FFY17 HSGP Funding Description Homeland Security Working Group ble Nevada Commission on Homeland Security (NCHS) Prior #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION Which the project will be accomplished, identifying who (i.e. staff, contract ation of the current project, state grant staff will ensure that the ravel to commission, finance and any sub committees approviour rogram also sponsor representatives to attend the National H d and managed by state staff and DEM and we will continue	In FFY17 HSGP Funding Description Date Submitted Homeland Security Working Group Image: Security Working Group Ible Nevada Commission on Homeland Security (NCHS) Priority and Urban Area #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION Which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will perform where ation of the current project, state grant staff will ensure that this project is carried ravel to commission, finance and any sub committees approved by the commission rogram also sponsor representatives to attend the National Homeland Security C d and managed by state staff and DEM and we will continue to work with all commission								

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	DEM	State	Kelli Anderson
12(b)			
12(c)			

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

DEM will carry out the management of the grant if the funding decreases or is eliminated. DEM has funding each year to carry out the projects through this process, we would scale back slowly and stretch out the three year performance period until the grant is phased out.

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14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

PROJECT ID:

Date Submitted 4/4/17

M

PROJECT TITLE REFERENCE:

Homeland Security Working Group

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
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 HSWG Members (5 people x 2 trips)= \$6,500.00 Homeland Security Conferences UASI Members (2 members x 1 Trip) = \$3,000.00 State Staff (2 members x 1 Trip) = \$3,000.00 Homeland Security & FEMA meetings	\$ 0.00	\$ 21,600.00	\$ 21,600.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
x	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Access and review equipment for potential upgrades in the main conference areas were 90% of the meetings are held. Training Room and Conference Room. To ensure Continuity with our open meetings under the commission and all sub-committee meetings. 1 computer, software, monitors, printer (\$2,000.00)	\$ 0.00	\$ 2,000.00	\$ 2,000.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
	\$ 0.00		\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
K	\$ 0.00	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
15f) Personnel [<i>Staff (not contractors) directly implementing project and programmatic capability</i>] Overtime 2018/2019 process 100 hours x \$60.00 = \$6,000	LV-UASI \$ 0.00	State-wide \$ 6,000.00	SubTotal \$ 6,000.00

3

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:MProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/4/17

PROJECT TITLE REFERENCE:

Homeland Security Working Group

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

	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	Approve Funding	10/01/17	01/31/18	3
3	Procure equipment and supplies	02/01/18	07/31/18	5
4	manage travel for members	10/01/18	09/30/19	12
5	book and complete travel	10/01/18	09/30/19	12
6	attend conferences	10/01/18	06/30/19	8
7	overtime for 2018 process	01/01/19	12/31/19	12
8	Close out	09/01/18	12/31/19	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 🔵 Explain below.

This project is for the overall review and prioritization of the grant projects. This project also supports the commission and all of the sub-committees for the commission to complete their mission.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with NIMS and planning, this process is a large planning process that starts 6-8 months before the grant is released and continues the support through the entire program performance period.

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

This project is budged low as compared to previous years. It is approx 20% of the highest request in past years, however this project may be cut and it is scaleable as the working group sees fit.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Μ
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17
PROJ	ECT TITLE REFERENCE:	Homeland Security Working Group		
	d. Can this project continue wi	thout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	using older funding, however on committees in the manner in whi e. Does this project provide a	and we may be able to continue with the same level of sup ce funding was spent, DEM would no longer be able to supp ch we have in the past. <u>measurable "state-wide" benefit? YES () NO () Explain below</u> is are spent to support the entire process as well as the UAS	ow.	
Fields "d" and "e" ar				

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

- (•) YES Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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*

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HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LINE ITEM DETAIL BUD	GET

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14 members x 1 trip) ent State Planning 2 1,500.00 3,000.00 \$3,000.00 15 Image: Constraint of the state o	7 8 RINGE (arrative ne # 9 10 11	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Attend UASI meetings (1 person) Attend Finance Committee Meetings (2 people x 3 trips) Attend Commission Meetings (2 people x 3 trips) Travel for HSWG voting members (5 people x 2 trips)	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent	Previous Funding Type State State State	Category of Each Travel Planning Planning Planning	Travel Reference # from	Total Trips	\$ - \$ - TIVE WILL BE US Cost for each Trip 650.00 1,300.00 1,300.00	Total Cost - 1,300.00 3,900.00 3,900.00	Primary Core Capability	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1,300.00 \$3,900.00 \$3,900.00	Line Item	Descriptions on how it will
	7 8 RINGE (arrative 9 10 11 12	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Attend UASI meetings (1 person) Attend Finance Committee Meetings (2 people x 3 trips) Attend Commission Meetings (2 people x 3 trips) Travel for HSWG voting members (5 people x 2 trips) Homeland Security Conference (2 UASI members x 1 trip)	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent	Previous Funding Type State State State State	Category of Each Travel	Travel Reference # from	Total Trips	\$ - \$ - TVE WILL BE US Cost for each Trip 650.00 1,300.00 1,300.00	Total Cost - 1,300.00 3,900.00 6,500.00	Primary Core Capability	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$1,300.00 \$3,900.00 \$3,900.00 \$6,500.00	Line Item	Descriptions on how it will
	7 8 RINGE (arrative ne # 9 10 11 12 13	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Attend UASI meetings (1 person) Attend Finance Committee Meetings (2 people x 3 trips) Attend Commission Meetings (2 people x 3 trips) Travel for HSWG voting members (5 people x 2 trips) Homeland Security Conference (2 UASI members x 1 trip)	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent Sustainm	Previous Funding Type State State State State State	Category of Each Travel	Travel Reference # from	Total Trips	\$ - \$ - S - TVE WILL BE US Cost for each Trip 650.00 1,300.00 1,300.00 1,300.00 1,500.00	Total Cost 	Primary Core Capability	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 Total Budget \$1,300.00 \$3,900.00 \$6,500.00 \$3,000.00 \$3,000.00	Line Item	Descriptions on how it will
Travel Sub- Total Travel Sub- 21,600.00 21,600.00 \$0.00 -	7 8 RINGE carrative ne # 9 10 11 12 13 14 15	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Attend UASI meetings (1 person) Attend Finance Committee Meetings (2 people x 3 trips) Attend Commission Meetings (2 people x 3 trips) Travel for HSWG voting members (5 people x 2 trips) Homeland Security Conference (2 UASI members x 1 trip)	Purchase Type Select Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent Sustainm	Previous Funding Type State State State State State	Category of Each Travel	Travel Reference # from	Total Trips	\$ - \$ - S - TVE WILL BE US Cost for each Trip 650.00 1,300.00 1,300.00 1,300.00 1,500.00	Total Cost 	Primary Core Capability	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$1,300.00 \$3,900.00 \$6,500.00 \$3,000.00 \$3,000.00 \$3,000.00	Line Item	Descriptions on how it will

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$-					\$0.00	\$0.00	

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$-		
23								\$					\$		
24								\$-					\$-		
25								\$-					\$-		
26								\$-					\$-		
27								\$ -					\$ -		
	Organization Sub-Total							\$-					\$-	-	
ORGANIZ	VATION COST NAR	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	All THE POSI	TIONS AND DELIV	FRABLES	NARRATIVE WII	I BE USED TO E	INSURE ITEMS 1	STED WILL BE CON	IPI ETED IN			

.ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTI	Y UNIT COS		OTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wi affect your program
	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 an AEL													
28		1 computer with software, monitors and printer	Enhance	State		1.00 2,000.	00 \$	2,000.00					\$ 2,000.00		
29							\$	-					\$-		
30							\$	-					\$-		
31							\$	-					\$-		
32							\$	-					\$-		
33							\$	-					\$-		
34							\$	-					\$-		
35							\$	-					\$ -		
36							\$	-					\$-		
37							\$	-					\$-		
38							\$	-					\$-		
39							\$	-					\$-		
	EQUIPMENT Sub-Total						s	2,000.00					\$ 2,000.00	_	

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	Μ
	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	9				-	-								
40											\$ -		\$ -			1
41											\$-		\$-			1
42											\$ -		\$ -			1
43											\$ -		\$ -			1
44											\$-		\$ -			1
45											\$-		\$-			1
46											\$ -		\$ -			1
47											\$-		\$ -			i i
48											\$ -		\$ -			1
49											\$-		\$-			1
	Training Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE									\$-		\$-	-		

ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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)												-	
50											\$ -		\$ -		
51											\$ -		\$ -		
52											\$ -		\$-		
53											\$ -		\$-		
54											\$ -		\$-		
55											\$ -		\$-		
56											\$ -		\$ -		
57											\$-		\$-		
	Exercise Sub- Total										\$-		\$-	-	
XERCISE	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	N DETAIL T	HE POSITIONS	AND DELIVERAR	IES NARR	ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

Narrative HERI	E							Total Original Budget	Line Item Reductions Total	
								\$ 29,600.00	\$ -	
All budgets	require an	email approval from the financial and/or grant i	manager							



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

			**Required Fields									*:								
		Funding	Purpose (Please note if	Departure	Destination	Travel Start	Travel End	No.	No.				Motor Pool			Public		Rental	Baggage	1
Traveler's Name	Title	Source	travel is for training)	City	City	Date	Date	Days	Nights	Airfare	Hotel	Per Diem	Car	Mileage	Reg Fees	Trans	Parking	Car	Fees	Total
TBD			UASI meeting																	\$ 650.00
TBD			UASI meeting																	\$ 650.00
			Finance Committee																	
TBD			Meeting																<u> </u>	\$ 1,300.00
			Finance Committee																	1
TBD			Meeting																 '	\$ 1,300.00
			Finance Committee																	* 1 200 00
TBD TBD			Meeting Commission Meeting												-				 '	\$ 1,300.00 \$ 1,300.00
TBD		_	Commission Meeting					-											└─── ′	
TBD			Commission Meeting																<u> </u>	\$ 1,300.00 \$ 1,300.00
TBD			HSWG Voting Members																<u> </u>	\$ 1,300.00
TBD			HSWG Voting Members																<u> </u>	\$ 1,300.00
TBD																			<u> </u>	
		_	HSWG Voting Members					-											└─── ′	+ -,
TBD			HSWG Voting Members			-													└─── '	\$ 1,300.00
TBD			HSWG Voting Members																L'	\$ 1,300.00
			Homeland Security																	1
			Conference UASI																	1
TBD			member																· · · · ·	\$ 1,500.00
			Homeland Security																	1
			Conference UASI																	1
TBD			member																	\$ 1,500.00
			Homeland Security																	
TBD			Conference State Staff																	\$ 1,500.00
			Homeland Security																	
TBD			Conference State Staff																	\$ 1,500.00
																				\$ -
-																	1			\$ -
																				\$ -
						1		1							1	1	1			\$ -
								1									1			\$ - \$ -
		+				+		+			1	1				1	+		<u> </u> '	s -
		1				1		1			1	1				1			<u> </u>	s -
**You must complete the re	quired fields the	o othor field	s are optional							s -	\$ -	¢							├ ────′	\$ 21,600.00
- 1 ou must complete the re	quireu neius, the	e other nela	s are optional		l	I			1	- ф	\$ -	\$ -	l		1	1	1		1	φ 21,000.00

	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	N							
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/5/17							
1)	PROJECT TITLE:											
2)	Proposing/Lead Agency:	Department of Public Saf	ety - Division of Emergency Mana	agement								
3)	1° Project Manager Name/Title:	Jim Walker / Emergency	lim Walker / Emergency Management Program Manager									
	1° Project Manager Contact Info:	Phone: (775) 687-0305	(775) 687-0305 Email: james.walker@dps.state.nv.us									
4)	2 [°] Project Manager Name/Title:											
	2° Project Manager Contact Info:	Phone:	Email:									
5)	Finance/Grant Contact Name/Title:	Sonja Williams										
	Finance/Grant Contact Info:	Phone: (775) 687-0388 Email: swilliams@dps.state.nv.us										
6)	CLASSIFICATION - Check the p	primary intention of the Pl	roposed Project:	Cl	noose one:							
	NEW New: no grant	funded projects have recon	thy (within 5 years) addressed this ca	nahility	\bigcirc							

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\bigcirc

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

According to the Notice of Funding Opportunity, "Prior to allocation of any Federal preparedness awards in FY 2016, recipients must ensure and maintain adoption and implementation of NIMS." The outcome of this project will be to sustain fundamental NIMS-required programs and projects statewide to all jurisdictions, tribes, and disciplines. This project will support continued improvement in NIMS-required planning, training, and exercise programs, as well as support the Statewide Resource Management Program and Credentialing Project for physical, logical and incident access control and identify verification. The NIMS Program sets the foundation for the core capability of Operational Coordination which crosses all Mission Areas of the National Preparedness Goal under PPD-8. Additionally, NIMS components (Command and Management: ICS, Multi-agency Coordination Systems, Public Information; Preparedness; Resource Management; Communications and Information Management and Maintenance) are foundational to all other core capabilities identified by the Nevada Commission on Homeland Security FFY 2017 priority of Operational Coordination.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Planning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

DHS defines Operations Coordination as "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 Planning, Training, Exercises, Communications, Public Information and Resource Management items supported in this project directly establish and maintain the operational structure and processes used by state, tribal and local jurisdictions. This project provides these services statewide, integrating all stakeholders, and supports the execution of all Mission Areas of the National Preparedness Goal.

	Nevada Homeland	Sec	urity Grant Program (HSGP)	PROJECT ID:	Ν						
	Project Proposal for	FFY	17 HSGP Funding Description	Date Submitted	4/5/17						
PRC	JECT TITLE REFERENCE:	State	wide NIMS								
10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strue Objective to be addressed											
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION	#4 - OPERATIONAL COORDINATION							
	Urban Area Strategy Priority										
11) HELD IS LIMITED TO VISIBLE TEXT BOX	Describe in rough order the process by v Project Management shall: a) Conduct three core assessme Report (SPR), and NIMS assess b) Conduct the Annual Training, c) Use Staff and Contractor supp as resource typing, qualification d) Sustain resource managemer and inventory. e) Continued development of the efforts designed to meet federal f) Conduct HSEEP-compliant ex g) Upgrade the audio and visual communication and information s This project supports the life cyc	which the ints in: ment to Exerci- bort to and in t active crequire ercise conne sharing le of E	ities including WebEOC, Resource Request and De entialing Project for physical, logical and incident acc ements and overcome identified gaps. activities and their resulting AAR/IP process. ctivity between jurisdictions and communities to imp	ettor, or ?) will perform whether (THIRA), State Prabilities. Additional plans to address ning, and exercise ac ployment Module (RR cess control and ident rove operational coor	reparedness ss shortfalls. tivities as well RDM), typing tity verification dination,						

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Division of Emergency Management	State of Nevada	Jim Walker
12(b)			
12(c)			

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

The NIMS Program investment will require sustainment funds based upon changes in NIMS requirements, attrition within agencies and organizations, SPR, THIRA, and NIMS evaluations, planning improvements, exercise and real event After Action Reports and Improvement Plans, as well as maintenance of resource inventories, and credentialing.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID:

Date Submitted

Ν

4/5/17

PROJECT TITLE REFERENCE:

Statewide NIMS

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
THIRA/SPR/NIMS Assessments: Travel \$32,000 Nevada Preparedness Summit Travel \$9,750 Supplies and Materials for THIRA/SPR/NIMS Assessments \$1,000 Supplies and Materials for Training \$11,680 Supplies and Materials for Exercises \$5,750 Supplies and Materials for Planning \$1,000 Supplies and Materials for Resource Management & Credentialing \$1,000 Nevada Preparedness Summit Supplies, Materials and Logistics \$10,000	\$ 0.00	\$ 72,180.00	\$ 72,180.00
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
 Travel to Install Local Jurisdiction Video Teleconference Equipment \$3,000 DEM and Local Jurisdiction Video Teleconference Equipment \$71,500 Lightning Protection for State EOC Radio Equipment \$20,000 Computers for State EOC Information Displays \$3,600 Resource Mgt & Credentialing Personal Identity Verification - Interoperable (PIV-I) Equipment \$50,000 	\$ 0.00	\$ 148,100.00	\$ 148,100.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Travel to Conduct and Monitor Local/Tribal/State Jurisdiction Training \$65,170 Develop and Conduct NIMS Training to Local/Tribal/State jurisdictions \$32,625 Training Program Support (Manpower Contractor) \$40,000	\$ 0.00	\$ 137,795.00	\$ 137,795.00
		¢ 101,1 00100	
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] Travel to Support Local/Tribal/State Jurisdiction Exercises \$41,016 Local/Tribal/State Jurisdiction Exercise Support (Overtime, Backfill, Meals) \$4,352 State Level COOP Exercise (Overtime, Backfill, Meals) \$1,000 National Mass Care Exercise Support and Participation \$5,660 Exercise Program Support (Manpower Contractor) \$14,765			SubTotal \$ 66,793.00
Travel to Support Local/Tribal/State Jurisdiction Exercises \$41,016 Local/Tribal/State Jurisdiction Exercise Support (Overtime, Backfill, Meals) \$4,352 State Level COOP Exercise (Overtime, Backfill, Meals) \$1,000 National Mass Care Exercise Support and Participation \$5,660	LV-UASI	State-wide	
Travel to Support Local/Tribal/State Jurisdiction Exercises \$41,016 Local/Tribal/State Jurisdiction Exercise Support (Overtime, Backfill, Meals) \$4,352 State Level COOP Exercise (Overtime, Backfill, Meals) \$1,000 National Mass Care Exercise Support and Participation \$5,660 Exercise Program Support (Manpower Contractor) \$14,765 15f) Personnel [<i>Staff (not contractors) directly implementing project and programmatic capability</i>]	LV-UASI \$ 0.00	State-wide \$ 66,793.00	\$ 66,793.00
Travel to Support Local/Tribal/State Jurisdiction Exercises \$41,016 Local/Tribal/State Jurisdiction Exercise Support (Overtime, Backfill, Meals) \$4,352 State Level COOP Exercise (Overtime, Backfill, Meals) \$1,000 National Mass Care Exercise Support and Participation \$5,660 Exercise Program Support (Manpower Contractor) \$14,765	LV-UASI \$ 0.00 LV-UASI	State-wide \$ 66,793.00 State-wide	\$ 66,793.00 SubTotal

	Nevada Homeland Security Grant Program (HSGP) PROJECT ID:											
	Projec	ct Proposal fo	r FFY17 HSGP Funding Description	Date	Submitted	4/5/17						
PRO.	IECT TITLE	REFERENCE:	Statewide NIMS									
16)	TASKS & SO	CHEDULE - Identify	_									
		IMITED TO TEXT BOX S		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, SPI	R, NIMS Assessments	10/01/17	09/30/19	24						
	3	Conduct Jurisdiction	al Plans Reviews and Updates	10/01/17	09/30/19	24						
	4	Prepare for and Deliv	ver Operational Coordination Training	10/01/17	09/30/19	24						
	5	Statewide Exercise I Final Planning Confe	nitial Planning Conference, Mid-term Planning Conference, rence, and event	10/01/17	09/30/19	24						
	6	SEOC / Local EOC E	exercise Development and Delivery	10/01/17	09/30/19	24						
	7	Acquire and install V systems	ideo Teleconferencing Systems to select jurisdictions, test	10/01/17	09/30/19	24						
	8	Acquire and install c	omputers for SEOC displays	10/01/17	09/30/19	24						
	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.

All Operational Coordination 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.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project is in direct alignment with the Nevada Commission on Homeland Security priorities of Operational Coordination and Operational Communication. Project items will directly contribute to the coordination of statewide operations through planning, training and exercise; and equipment purchased will directly increase the ability of the State to communicate with tribal and local jurisdiction during terrorism events.

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.

	Ν								
Date Submitted									
Statewide NIMS									
JIDIE	for Federal								
	port to tribal al and local								

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

None

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

LINE ITEM DETAIL BUDGET

			riojeci	-		DETAIL BUD									
	Agency Name	Nevada Division of Emergency Management	Manager Name &	Jim Walker ((775) 687-0305	Grant Manager Name & Contact #		ns (775) 687-038	8						
		Nevada Division of Emergency Management									T				
	IJ TITLE:	Project Name: STATEWIDE NIMS													
		One Budget Per Funding Stream													
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					<u> </u>		}	\$- \$-			+		\$ - \$ -		
	Personnel							-					*		
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ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
_	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above						•					* ****		
5 6								\$- \$-					\$0.00 \$0.00		
7								\$ -					\$0.00		
8	Fringe Sub-						-	\$-					\$0.00		
	Total							\$-					\$0.00	\$0.00	
RINGEC	COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPL	AINE IN DE	TAIL THE PC	SITIONS AND I	DELIVERABLES. N	IARRATIVE WI	LL BE USED TO E	ENSURE ITEMS LIS	TED WILL BE CO	MPLETED IN THE GR	ANT CYCLE -			
larrative H	HERE														
ine #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding	Category of	Travel Reference									
	Travel			Туре	Each Travel	# from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	Туре		# from	Total Trips		Total Cost				Total Budget		Descriptions on how it will
9	Training Exercise Equipment	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-	Type Sustainm ent	Туре		# from	Total Trips			Capability Operational Coordination			Total Budget		Descriptions on how it will
9	Training Exercise Equipment	NFORMATION 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) Training Delivery/Management of NIMS Courses in	Type Sustainm	Туре	Each Travel	# from	_	Trip		Capability		Source			Descriptions on how it will
10	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State	Type Sustainm ent Sustainm ent Sustainm	Type	Each Travel Training Training	# from	- 36	Trip 1,467.00 334.00	- 52,812.00 12,358.00	Capability Operational Coordination Operational Operational		Source SHSP SHSP	\$52,812.00 \$12,358.00		Descriptions on how it will
	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State Training Delivery/Management Out of State Travel Exercise Technical Assistance/Participation in State.	Type Sustainm ent Sustainm ent	Type	Each Travel	# from	- 36 37 21	Trip 1,467.00	- 52,812.00	Capability Operational Coordination Operational Coordination		Source	\$52,812.00		Descriptions on how it will
10	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State Training Delivery/Management Out of State Travel Exercise Technical Assistance/Participation in State. Exercise Planning/Conduct Out of State	Type Sustainm ent Sustainm ent Sustainm ent	Type	Each Travel Training Training	# from	- 36	Trip 1,467.00 334.00	- 52,812.00 12,358.00 11,025.00	Capability Operational Coordination Operational Coordination Operational Coordination Operational Coordination	Capability	Source SHSP SHSP	\$52,812.00 \$12,358.00		Descriptions on how it will
10 11	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State Training Delivery/Management Out of State Travel Exercise Technical Assistance/Participation in State.	Type Sustainm ent Sustainm ent Sustainm Sustainm	Type	Each Travel Training Training Exercise	# from	- 36 37 21	Trip 1,467.00 334.00 525.00	- 52,812.00 12,358.00 11,025.00 29,991.00	Capability Operational Coordination Operational Coordination Operational Coordination Operational Operational		SHSP SHSP SHSP	\$52,812.00 \$12,358.00 \$11,025.00		Descriptions on how it will
10 11 12 13	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State Training Delivery/Management Out of State Travel Exercise Technical Assistance/Participation in State. Exercise Planning/Conduct Out of State Communications VTC Equipment Installation and	Type Sustainm ent Sustainm ent Sustainm ent New Sustainm	Type	Each Travel Training Training Exercise Exercise Organization	# from	- - - - - - - - - - - - - - - - - - -	Trip 1,467.00 334.00 525.00 769.00 300.00	- 52,812.00 12,358.00 11,025.00 29,991.00 3,000.00	Capability Operational Coordination Operational Coordination Operational Coordination Operational Coordination Operational Operational Operational Operational	Capability	Source SHSP SHSP SHSP SHSP	\$52,812.00 \$12,358.00 \$11,025.00 \$29,991.00 \$3,000.00		Descriptions on how it will
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10 11 12 13 14 15 16	Training Exercise Equipment	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) Training Delivery/Management of NIMS Courses in State Training Delivery/Management Out of State Travel Exercise Technical Assistance/Participation in State. Exercise Planning/Conduct Out of State Communications VTC Equipment Installation and Training THIRA/SPR/NIMS Assessment - Clark County THIRA/SPR/NIMS Assessment - Rural THIRA/SPR/NIMS Assessment - Out of State Planning Support - Clark County	Type Sustainm ent Sustainm ent Sustainm ent Sustainm ent Sustainm ent Sustainm ent Sustainm ent		Each Travel Training Training Exercise Exercise Organization Planning Planning Planning	# from	- - - - - - - - - - - - - - - - - - -	Trip 1,467.00 334.00 525.00 769.00 300.00 1,000.00 500.00 2,500.00	- 52,812.00 12,358.00 11,025.00 29,991.00 3,000.00 8,000.00 6,000.00 5,000.00 3,000.00 2,000.00	Capability Coperational Coordination Operational Coordination	Capability	Source SHSP SHSP SHSP SHSP	\$52,812.00 \$12,358.00 \$11,025.00 \$29,991.00 \$3,000.00 \$8,000.00 \$6,000.00		Descriptions on how it will

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HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017 LINE ITEM DETAIL BUDGET

	LINE ITEM DETAIL BUDGET														
	Agency Name	Anager Manager Name & Contact # Jim Walker (775) 687-0305 Contact # Sonja Williams (775) 687-0388													
	IJ TITLE:	Project Name: STATEWIDE NIMS													
20		Nevada Preparedness Summit	Sustainm ent		Planning		13	750.00	9,750.00				\$9,750.00		
21									-				\$0.00		
	Travel Sub-														
	Total								150,936.00				\$150,936.00	\$0.00	-
TRAVEL	COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPI	AINE IN DE	TAIL EACH L	INE ITEM AND	DELIVERABLES.	NARRATIVE WI	LL BE USED TO	ENSURE ITEMS LIS	STED WILL BE CO	MPLETED IN THE GI	RANT CYCLE			

Ln 9 - 10: Travel to conduct training courses that sustain/build core capabilities with a terrorism nexus and that support all mission areas. Focus of Train-the-Trainer courses is to build in-state/organization training cadre. Courses include: ICS 300/400; ICS 300/400 T-t-T; ICS-EOC Interface;Field Position-specific T-t-T (OSC, PSC, LSC, FSC, LNO); ICS for Executives; Situational Awareness-Common Operating Picture; Bomb Making Materials Awareness T-t-T; Active Shooter Response T-t-T; PIO Series (G289, G290, G291; DHS Training Symposium at CDP; Nevada Trainers Workshop (DHS Course Development); Basic Academy; and Training Management/Quality Assurance of selected in-state courses (new trainers/training program).

Ln 11: Travel for Technical Assistance and participation in State/Local/Tribal Jurisdiction exercises for the development and execution of those exercises.

Ln 12: Out of State Travel for ETO/State/County participants in FEMA Region strategic planning and interstate exercise planning/conduct.

Ln 13: Installation of VTC Equipment at the following locations: NDEM (3), Carson (1), Douglas (1), Lyon (1), Storey (1), Churchill (1), Humbolt (1), Pershing (1), Lander (1), Elko (1), Lincoln (1).

Ln 14-16: Travel to State/Local/Tribal jurisdictions to conduct the annual THIRA/SPR/NIMS assessment as required for the State to be eligible for HSGP funding, including the Gap Analysis and Kind/Type inventories. Includes travel to attend the annual FEMA THIRA/SPR regional meeting.

Ln 17-18. Travel within the State for DEM Plans personnel to assist local jurisdictions with the development and update of local plans.

Ln 19: Travel to attend the FEMA Identity, Credential and Access Management (ICAM) Sub-Committee meetings.

Ln 20: Travel related to the annual Nevada Preparedness Summit

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
22		Training - Printing, Course Materials and Supplies	Sustainm ent		32.00	365.00		Operational Coordination			SHSP	\$11,680.00		
23		Exercise: Exercise Document Printing/Support Materials	Sustainm ent		10.00	575.00		Operational Coordination			SHSP	\$5,750.00		
24		THIRA/SPR/NIMS Assessment supplies & materials	Sustainm ent		1.00	1,000.00	1,000.00	Operational Coordination			SHSP	\$1,000.00		
25		Planning supplies & materials	Sustainm ent		1.00	1,000.00		Operational Coordination			SHSP	\$1,000.00		
26		Resource Mgmt & Credentialing supplies & materials	Sustainm ent		1.00	1,000.00		Operational Coordination			SHSP	\$1,000.00		
27		Nevada Preparedness Summit	Sustainm ent		1.00	10,000.00		Operational Coordination			SHSP	\$10,000.00		
	Planning Sub- Total	ZE REQUIRED FOR FACH LINE ITEM ABOVE - PLEASE FY					\$ 30,430.00					\$30,430.00	\$0.00	

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 GI

Ln 22: Printing of Course Materials in support of the training scheduled on the Multi-Year Training and Exercise Plan.

Ln 23: Printing of Course Materials in support of the exercises scheduled on the Multi-Year Training and Exercise Plan.

Ln 24: Printing and supply costs for the development and distribution of the annual THIRA/SPR/NIMS Assessement as required for HSGP funding eligibility.

Ln 25: Supplies and Materials, including printing costs, for plans development and distribution.

Ln 26: Supplies and Materials, including printing costs, for the development of documentation relating to the Typing of NIMS resources throughout the state.

Ln 27: Supplies, Materials, Logistical support for the annual Nevada Preparedness Summit

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
28													\$ -		
29								\$ -					\$		1
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33								\$ -					\$-		
	Organization Sub-Total							\$-					\$-	-	
ORGANIZ	ATION COST NARE	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	SE EXPLAIN	E IN DETAIL	THE POSITION	S AND DELIVERA	BLES. NARRA	TIVE WILL BE US	ED TO ENSURE IT	EMS LISTED WILL	BE COMPLETED IN	THE GRANT			

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LINE ITEM DETAIL BUDGET

	Agency Name	Nevada Division of Emergency Management	Manager Name & Contact #	Jim Walker (*	Grant Manager Name & Contact #	Sonja Willian	ns (775) 687-03	38						
	IJ TITLE:	Project Name: STATEWIDE NIMS												
Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL												
34		Communications Video Teleconferencing Equipment	New		13.00	5,500.00	\$ 71,500.00	Operational Coordination				\$ 71,500.00		
35		Communications Protection equipment, Lightening Strike mitigation system/prevention for antennas	New		1.00	20,000.00	\$ 20,000.00	Operational Communications				\$ 20,000.00		
36		Communications Computer, Touch Screen Compatible		Other Federal	3.00	1,200.00	\$ 3,600.00	Operational Coordination				\$ 3,600.00		
37		Resource Mgt & Credentialing Project Support Equipment and Software (physical and logical access)	Sustainm ent		1.00	50,000.00	\$ 50,000.00	Operational Coordination				\$ 50,000.00		
38 39							\$ - \$ -					s - s -		
40							\$ -					\$ -		
41							\$ -					\$ -		
42							\$ -					\$-		
43							\$ -					\$ -		
44 45							\$ -					\$ -		
	EQUIPMENT						р -					\$ -		
	Sub-Total						\$ 145,100.00					\$ 145,100.00	-	

Ln 34: Video Teleconterencing equipment to ensure DEM and other State/Local/ Inbal jurisdictions maintain interoperability with the new cloud-based system used by Clark County. The VTC equipment must be compatible with LifeSize systems including hardware and software installation and training per site, Licensing for the performance period, at the following locations: NDEM (3), Carson (1), Douglas (1),Lyon (1), Storey (1)Churchill (1), Humbolt (1), Pershing (1), Lander (1), Elko (1) Lincoln (1)> Will be used to support SHSG Program meetings and Working Group. This equipment will also increase the offerings of alternative, long-distance training opportunities throughout Nevada's rural communities and tribes via bridged Video Teleconference (VTC). The resulting increased rural/tribal training opportunities reduces long-distance travel time and costs.

Ln 35: Lightning Protection for all SEOC Communications Center Radio systems (16)

Ln 36: Computers for Touch Boards in the State Emergency Operations Center. Current computers have reached their end-of-life and are failing. Boards are used for display of operational awareness information during activations.

Ln 37: FEMA has determined that they will require ALL persons who access federal databases to have a federal background check and to be issued a Personal Identification Verification - Interoperable (PIV-I) card. Although FEMA has indicated they will, in the short term, issue the cards it is their intent to require the State to provide these in the future. This funding is to upgrade the existing DEM system to meet the federal requirements going forward to enable the State to seamlessly continue to manage federal grants. This project will include the equipment and software to issue PIV-IC ards and track the credentials of those with cards.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	le This Poquest	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					<u>-</u>	-							
46		Training In State NIMS Training (delivery of courses to urban/rural/tribal stakeholders).	Sustainm ent		YES	YES	29.00		Operational Coordination		\$ 32,625.00		\$ 32,625.00		
47		Training Preparedness Program Support	Sustainm ent		YES		1.00		Operational Coordination		\$ 40,000.00		\$ 40,000.00		
48											\$-		\$-		
49											\$-		\$-		
	Training Sub- Total										\$ 72,625.00		\$ 72,625.00	-	
TRAINING	COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXE	DI AINE IN D		DOCITIONIC AND	DELIVERABLES	NADDATIVEV	ULL BELICED TO	ENGLIDE ITEME I	ISTED WILL BE CO	MOLETED IN THE C	DANT			

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 GR/ Ln 46: Conduct and develop NIMS and Core Capability training courses that build and sustain NIMS-required programs and projects statewide to all jurisdictions, tribes, and disciplines. Focus is dual-purpose: continue to meet and expand NIMS / Core

Ln 46: Conduct and develop NIMS and Core Capability training courses that build and sustain NIMS-required programs and projects statewide to all jurisdictions, tribes, and disciplines. Focus is dual-purpose: continue to meet and expand NIMS/-required programs and projects statewide to all jurisdictions, tribes, and disciplines. Focus is dual-purpose: continue to meet and expand NIMS/ Core Capabilities training while increasing cadre of skilled Nevada instructors throughout Nevada and in major disciplines by attending Train-the-Trainer courses. Course offerings include: ICS 300(400 (4 offerings); ICS 300(400 T-t-T (2 offerings); CS-EOC Interface (2 offerings); Position-specific INT/MACC T+-T (5 offerings); Active Shooter Response T-t-T (1 offering); POS Series (G289, G290, G291 of 1 offering each); DHS Training Symposium at CDP (1 offering); Basic Academy (includes CBRNE, Terrorism, THIRA) - 2 offerings); Nevada Trainers/DHS Course Development Workshop (2 offerings); and Training Mgmt/Quality Assurance of students attending EMI offerings. NOTE 1: Courses listed are shown as number of offerings with exception of E0449 which is number of students attending EMI offerings. NOTE 2: All costs are for contracted adjunct instructors with exception of E0449 which is number of students attending EMI offerings. NOTE 2: All costs are for contracted adjunct instructors with exception of E0449 which is manpower support tatf.

Ln 47: Manpower Support Staff for the DEM Training program.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)						Page 3 of 4						-	

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

LINE ITEM DETAIL BUDGET

	Agency Name		Manager Name & Contact #	Jim Walker (775) 687-0305	Grant Manag Name &		(775) 697 029	•							
		Nevada Division of Emergency Management	Contact #	Jim waiker (775) 687-0305	Contact #	Sonja winnams	(773) 087-038	0							
	IJ TITLE:	Project Name: STATEWIDE NIMS													
50		Exercise State/Tribal/Jurisdictional Exercise Support	Sustainm ent	YES	YES	8.00		Operational Coordination	Operational Communication	\$ 4,352.0		\$	4,352.00		
51		Exercise State Level COOP FSE 2017	Sustainm ent	YES	YES	1.00		Operational Coordination	Logistics and Supply Chain Management	\$ 1,000.0		s	1,000.00		
52		Exercise 2018 FEMA Region IX National Mass Care EX	New	YES	YES	1.00	5,660.00	Mass Care Services	Operational Coordination	\$ 5,660.0		\$	5,660.00		
53		Exercise Program Support	Sustainm ent	YES	YES	1.00	14,765.00	Operational Coordination	Mass Care Services	\$ 14,765.0	,	\$	14,765.00		
	Exercise Sub- Total									\$ 25,777.0	1	\$	25,777.00	-	
.n 50: Sup	port of overtime, b	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX ackfill and meals for State/Tribal/Local jurisdiction exercises. meals for the 2017 State Level Continuity of Operations Exe													

N

Ln 51: Overtime, backfill and meals for the 2017 State Level Continuity of Operations Exercise (This occurs at Western Nevada College where the State EOC moves after our primary EOC fails). This exercise will by design be eight hours in length with a working lunch for participants and exercise staff to continue play.

public work	s) personnel.	I meals to support Nevada's portion of the Nati exercise support for COOP FSE, Active Shoote		• •	esponders (i.e., law	enforcement, fi	re, rescue, EMS), e	emergency manage	ment, and support	organization (i.e., hea	lth, medical,	Total Original Budget	Line Item Reductions Total	
												\$ 424.868.00	s -	l

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:OProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted3/28/17

1)	PROJECT TITLE:	Northeast Nevada Citize	Northeast Nevada Citizen Corps/CERT Program							
2)	Proposing/Lead Agency:	Elko County Sheriff's Off	ice							
3)	1º Project Manager Name/Title:	Ron L. Supp, ECSO Und	ersheriff							
	1º Project Manager Contact Info:	Phone: (775) 777-2525	Email: rsupp@elkocountynv.net							
4)	2 [°] Project Manager Name/Title:	Mary Ann Laffoon, Progr	am Coordinator							
	2° Project Manager Contact Info:	Phone: (775) 934-9130	Email: mlaffoon@elkocountynv.net							
5)	Finance/Grant Contact Name/Title:	Debbie Armuth, Elko County Comptroller								
	Finance/Grant Contact Info:	Phone: (775) 753-7073 Email: darmuth@elkocountynv.net								

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	$\overline{\bullet}$

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Northeast Nevada Citizen Corps/CERT Program is requesting funding to continue to build, sustain, improve and expand the program in its Five (5) county area. The program will continue to train citizens, youth and adult, in emergency and disaster preparedness to volunteers supporting prevention, protection, mitigation, response and recovery efforts partnering with other agencies to build community resilience. The NNNCCP is a member of Elko County Local Emergency Planning Committee, (LEPC), the State Citizen Corps Council, and an affirming member of the National Youth Preparedness Strategy.

NNCCCP with trained volunteers/citizens can can and do provide assistance in Operational Coordination through education, situational awareness, protective actions, community alerts, shelter set-up/support, and critical and emergency personnel in EOC's, untilizing ICS and NIMS.

NNCCCP can/does provide support in community events, Child I D cards, and emergency/disaster preparedness information concerning many threats and hazards.

NNCCCP can/will provide assistance to other agencies, and groups through requests and partnerships to benefit the citizens of the area through a whole community approach to build a more resilient community.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* 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

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Community Resilience [Mission Area: MITIGATION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The Northeast Nevada Citizen Corps/CERT Program through its programs/trainings, membership in Local Emergency Planning Committee's (LEPC), and other organizations can and does provide assistance, establishes and maintains partnerships, and cooperative agreements, and continues to create multiplication of trained volunteers/citizens to be part of the Operational Coordinated effort of it's community to help and facilitate integration of all critical stakeholders within emergency operations.

NNCCCP can be of assistance in partnership of other agencies, VOAD's, and the affected populations by establishing a inter operable voice. Through NNCCCP programs, and it's coordinating efforts with other agencies and the citizens of the geographical area the NNCCCP assists with the building of a strong community resilience program, with county government, citizens, youth and adult, VOAD's, and other first responding agencies to protect against, mitigate, respond to, and recover from the threats and hazards that pose the greatist risk. This operational coordination has and will continue to enhance Public Information and Operational Communications.

Nevada Homeland Se	Nevada Homeland Security Grant Program (HSGP) PROJECT ID:						
Project Proposal for FF	(17 HSGP Funding Description	Date Submitted	3/28/17				

PROJECT TITLE REFERENCE:

Northeast Nevada Citizen Corps/CERT Program

NCHS FFY17 Priority

Urban Area Strategy Priority

#4 - OPERATIONAL COORDINATION

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 Coordinator implements and manages the day to day program, grants administration, and reports.

The coordinator reports to the Elko County Sheriff's Office Emergency Manager, the Elko County Sheriff, Elko County Commissioners, Elko County Comptroller, Elko County LEPC, and the State of Nevada Department of Emergency Management.

The coordinator will offer Citizen Corps/CERT programs/trainings/outreaches, to target new volunteers, offer volunteer opportunities, and assistance throughout the region when requested.

The coordinator will promote, advertise, schedule, plan, conduct trainings, as well as manage volunteers.

The NNNCCCP program and it's coordinator will assist and partner with other agencies/stakeholders throughout the area, and the state of Nevada to provide information to all citizens to be better prepared in case of any threat of hazard, and to help promote a safer, more resilient community.

FIELD IS LIMITED TO VISIBLE TEXT BOX

TEXT BOX

FIELD IS LIMITED TO VISIBLE

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Elko County Sheriff's Office	Elko, Elko County, NV	Sheriff Jim Pitts, Undersheriff Ron L. Supp
12(b)			
12(c)			

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

To Sustain, maintain, and expand the programs and partnerships of the Northeast Nevada Citizen Corps/CERT Program. To continue young adult and adult programs to increase the awareness of emergency/disaster preparedness, and volunteer opportunities throughout the area. To continue the recruitment of partnerships of other agencies, first responding, community organizations, and VOAD's. Due to the fact that the program covers other counties other than Elko County, travel funds are needed to advertise, and facilitate the program in other areas if requested. The program and the coordinators position is funded 100% through this funding request.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100
Enter your %	Enter your %	
from 0 to 100	from 0 to 100	
for UASI	for Statewide	

Nevada Homeland	Nevada Homeland Security Grant Program (HSGP) PRO						
Project Proposal for	Project Proposal for FFY17 HSGP Funding Description						
PROJECT TITLE REFERENCE:	Northeast Nevada Citizen Corps/CERT Program	-					

Fields are limitied to visible text box size

15)

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
The Northeast Nevada Citizen Corps/CERT Program Coordinator will provide the support, and the educational services related to the recruiting, coordinating, training, supervising, of volunteers, grant management, and general program administration. The coordinator/program will partner with with and train with other agencies to meet the national preparedness goal and mission. The programs provided will be accessible to all who are interested. The program and it's coordinator will facilitate trainings and outreaches to teach all interested parties ways to build safer, stronger and better prepared communities to respond the all threats and hazards.		\$ 60,000.00	\$ 60,000.00
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
The NNCCCP is requesting funds to refill 5 lb. Fire Extinguishers it uses in the facilitation of the CERT Basic Training Course, Unit 2.		\$ 525.00	\$ 525.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Travel for the Northeast Nevada Citizen Corps/CERT Coordinator to travel within the northeast Nevada region to present CCP/CERT classes/programs/outreaches and trainings to better prepare the citizens of the region in time of threats or hazards. To allow the NNCCCP to attend meetings, trainings, and form partnerships to build, expand, and sustain community resilience in times of all threats and hazards.		\$ 4,631.90	\$ 4,631.90
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
			\$ 0.00
		State-wide	SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI		
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI		\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide	\$ 0.00 TOTAL

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	0
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/28/17

PROJECT TITLE REFERENCE:

Northeast Nevada Citizen Corps/CERT Program

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	Appear in front of the County Commissioners to accept award.	10/17/17	11/17/17	1
3	Recruit, advertise, and schedule classes and outreaches. (Travel within the program boundaries to provide above.)	05/12/17	12/31/18	14
4	Continue with training in all assigned geographical areas when requested (CERT Basic Training)	10/01/17	12/31/18	14
5	Plan, participate and assist in upcoming table tops and Live X's.	06/20/17	08/31/18	14
6	Participate in and work with community event, booth events and safety fairs. (Wild Fire Picnic, National Night Out, Fire Picnic, etc.)	05/25/17	02/28/18	9
7	Procurement of Fire Extinguisher refills.	11/01/17	11/30/17	1
8				
9	Note: All tasks related to the program are continual and on going to expand awareness of the program, emergency/disaster preparedness, and			
10	the mission of the Citizen Corps Program and the the CERT Program.			
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.

When the NNCCCP provides CERT Basic Trainings, informational outreaches, including public booth events the program informs citizens of terrorist related topics, with an emphasis on situational awareness, and implications of any terroristic event, including Cyber Security and its implications.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

The NNCCCP program is a boots on the ground organization that provides programs and assistance to the citizens of the area, as well as first responders, planning committees, and other VOAD's to meet the National Preparedness Goals mission to help build a strong and resilient community with a whole community approach.

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

As we have in the past, if needed, we would make cuts somewhere in the program requested funding to continue the program and it's mission.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	0
	Project Proposal for	r FFY17 HSGP Funding Description	Date Submitted	3/28/17
ROJ	ECT TITLE REFERENCE:	Northeast Nevada Citizen Corps/CERT Program		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size		l it's coordinator are 100% funded by the SHSP		
nitie	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔘 Explain bel	ow.	
Fields "d" and "e" are li	need when volunteers are need	olunteers, and build programs in the northeast, this provides most. Working in the rural areas, everyone depends on eac State they can work together to preserve life and protect pro	ch other. By continui	
.8)	THIRA COMPLETION - Please	ndicate the participation level in completing the 2016 T	HIRA Survey. <u>CHOO</u>	<u>SE ONE</u> :

- **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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 program was instrumental in helping with the Elko County February Floods and Emergency EOC operations.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LINE ITEM DETAIL	BUDGET
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			manager			ETAIL BUDG									
	Agency Name		Name & Contact #	Undersherift 775.777.252 Laffoon, 775	5 Mary An	Grant Manager Name & Contact #		ty Comptroller, I	Debbie Armuth.	775.753.7073					
		Elko County Sheriff's Office, Elko, NV					Lino coui	ij comptonet, i	Jeoble Filmani,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	IJ TITLE:	Northeast Nevada Citizen Corps/CERT I	Program												
		One Budget Per Funding Stream	_												
		SHSP													
e #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1		Northeast Nevada Citizen Corps/CERT Program Coordinator. Contractor One (1) Position, no benefits.	Sustainm	State	Salary	100%		\$ 60,000.00	Operational Coordination	Community Resilience			\$ 60,000.00		
2			ent	olulo				\$ 00,000.00					\$ 00,000.00		
3								\$ -					\$ -		
4								\$-					\$-		
	Personnel Sub-Total							\$ 60,000.00					\$ 60,000.00	\$-	
	NEL COST NARR.	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						RRATIVE WILL E					. 20,000.00		
tion p	rovides CERT Bas	east Nevada Citizen Corps/CERT Program Coordinator (1) e ic Training Classes to the citizens of the northeast in both add he CERT Program, and Community Emergency Preparedness	ult and youth	n programs.	The coordinator	is responsible for c	coordination a	nd organization fo	or services/activiti	es for, and includir	ng training, drills/exerc	ises,	ing		
e #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
5	Denents							\$ -					\$0.00		
~								\$-					\$0.00		
								-					\$0.00		
7							-	\$ - \$ -					\$0.00 \$0.00		
6 7 8 NGE (Fringe Sub Total COST NARRATIVE	- - E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	- ES. NARRA	s - s -	ED TO ENSURE	ITEMS LISTED W	VILL BE COMPLETED	IN THE		\$0.00	
7 8 NGE (Total COST NARRATIVE HERE			Previous		Travel Reference		s - s -		ITEMS LISTED W	VILL BE COMPLETED	IN THE	\$0.00	\$0.00	Line Item Reductions
7 8 NGE (Total COST NARRATIVE HERE CATEGORY	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX			POSITIONS A Category of Each Travel			\$- \$- Tive will be us	ED TO ENSURE Total Cost				\$0.00		Line Item Reductions Descriptions on how it will affect your program
7 8	Total COST NARRATIVE HERE	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)	Purchase	Previous Funding	Category of	Travel Reference # from		\$ - \$ - TIVE WILL BE US Cost for each		Primary Core	Secondary Core	Funding	\$0.00	Line Item	Descriptions on how it will
7 8 NGE (rative	Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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) Travel: The NNCCCP Coordinator to travel to White Pine, NV to provide requested CERT Basic Training Classes to expand the program and build community	Purchase Type Select	Previous Funding	Category of Each Travel	Travel Reference # from Addendum		\$ - \$ - TIVE WILL BE US Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 Total Budget	Line Item	Descriptions on how it will
7 8 NGE (Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Travel: The NNCCCP Coordinator to travel to White Pine, NV to provide requested CERT Basic Training Classes to expand the program and build community resilience.	Purchase Type Select Type Sustainm	Previous Funding Type State	Category of Each Travel	Travel Reference # from Addendum	Total Trips	\$ - \$ - TVE WILL BE US Cost for each Trip 535.12	Total Cost 	Primary Core Capability Operation Coordination	Secondary Core Capability	Funding Source	\$0.00 \$0.00 Total Budget \$535.12	Line Item	Descriptions on how it will
7 8 ative #	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Travei: The NNCCCP Coordinator to travel to White Pine, NV to provide requested CERT Basic Training Classes to expand the program and build community resilience. Travei: The NNCCCP Coordinator to travel to Humboldt County, NV to provide requested CERT Basic Training Classes to expand the program and build community resilience.	Purchase Type Select Type Sustainm ent	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	\$ - \$ - S - TIVE WILL BE US Cost for each Trip	Total Cost	Primary Core Capability Operation Coordination	Secondary Core Capability	Funding Source	\$0.00 \$0.00 Total Budget	Line Item	Descriptions on how it will
7 8 NGE (ative # 9	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Travel: The NNCCCP Coordinator to travel to White Pine, NV to provide requested CERT Basic Training Classes to expand the program and build community resilience. Travel: The NNCCCP Coordinator to travel to Humboldt County, NV to provide requested CERT Basic Training Classes to expand the program and build community resilience.	Purchase Type Select Type Sustainm ent	Previous Funding Type State State	Category of Each Travel	Travel Reference # from Addendum	Total Trips	\$ - \$ - TVE WILL BE US Cost for each Trip 535.12 327.46	Total Cost 	Primary Core Capability Operation Coordination Operation Coordination	Secondary Core Capability	Funding Source SHSP SHSP	\$0.00 \$0.00 Total Budget \$535.12 \$654.92	Line Item	Descriptions on how it will
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	Fravel Sub-								4,631.90				\$4,631.90	\$0.00	_
C	ST NARRATIVI	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX ng is the estimated costs associated with the above travel rec													
ne,	NV - 1 3day/2nig	ht trip, Hotel:\$200.26, Per Diem:\$127.50 & Mileage:\$207.36 e:\$273.24=\$608.24 Lander County, NV- 2 2day/2night trips,	=\$535.12 H	Humboldt Cour	nty, NV- 2-2da	y/2night trips, Hotel:	\$203.84, Per	Diem:\$153.00, & I	/ileage:\$298.08=	\$654.92 Eureka, I	NV-2 2day/2night trip	s, Hotel:\$182.0	0,		
	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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•	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.													
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	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
B	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 - Must an AEL	ı						-						
		5lb. Fire Extinguisher refills. (For use with the training of unit #2 in the CERT Basic Training Classes.)	New	State		30.00	17.50	\$ 525.00	Operational Coordination	Community Resilience	03OE-04-EXAC		\$ 525.00		
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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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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	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					-	-							
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TRAINING	COST NARRATIN	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E	XPLAINE I	N DETAIL TH	HE POSITIONS	AND DELIVERAB	LES. NARR	ATIVE WILL BE U	JSED TO ENSUR	E ITEMS LISTED	WILL BE COMPLET	ED IN THE			

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Narrative HERE

ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
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	Exercise Sub- Total										s -		s -		

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
		omail approval from the financial and/or grant a						\$ 65,156.90	\$	

All budgets require an email approval from the financial and/or grant manager



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

**Required Fields						**Required Fields						Ο								
		Funding	Purpose (Please note if	Departure	Destination	Travel Start	Travel End	No.	No.				Motor Pool			Public		Rental	Baggage	1
Traveler's Name	Title	Source	travel is for training)	City	City	Date	Date	Days	Nights	Airfare	Hotel	Per Diem	Car	Mileage	Reg Fees	Trans	Parking		Fees	Total
Mary Ann Laffoon	NNCCCP Coord.		CERT taining/mtg.	Spring Creek	White Pine, NV	Various	Various	3	2	N/A	\$ 200.26	\$ 127.50		\$ 207.36		N/A	N/A	N/A	N/A	\$ 535.12
Mary Ann Laffoon	NNCCCP Coord.		CERT taining/mtg.	Spring Creek	Humboldt Co. NV	Various	Various	4	2	N/A	\$ 203.84	\$ 153.00		\$ 298.08		N/A	N/A	N/A	N/A	\$ 654.92
Mary Ann Laffoon	NNCCCP Coord.	SHSP	CERT taining/mtg.	Spring Creek	Eureka, NV	Various	Various	4	2	N/A	\$ 182.00	\$ 153.00	N/A	\$ 273.24	N/A	N/A	N/A	N/A	N/A	\$ 608.24
Mary Ann Laffoon	NNCCCP Coord.		CERT taining/mtg.	Spring Creek	Lander Co., NV	Various	Various	4	2	N/A	\$ 159.70	\$ 153.00	N/A	\$ 185.76	N/A	N/A	N/A	N/A	N/A	\$ 498.46
Mary Ann Laffoon	NNCCCP Coord.		CERT taining/mtg.	Spring Creek	Battle Mountain	Various	Various	4		N/A	N/A		N/A	\$ 371.52		N/A	N/A	N/A	N/A	\$ 371.52
Mary Ann Laffoon	NNCCCP Coord.		CERT taining/mtg.	Spring Creek	Elko Co., Various	Various	Various	4	2	N/A	\$ 178.00	\$ 153.00	N/A	\$ 298.08	N/A	N/A	N/A	N/A	N/A	\$ 629.08
Mary Ann Laffoon	NNCCCP Coord.	SHSP	CERT taining/mtg.	Spring Creek	Carson City, NV	Various	Various	6	4	N/A	\$ 391.60	\$ 255.00	N/A	\$ 687.96	N/A	N/A	N/A	N/A	N/A	\$ 1,334.56
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Nevada Homeland Security Grant Program (HSGP) PROJECT ID: P Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/5/17 1) PROJECT TITLE: CCFD Enhancements to Suspicious Activity Reporting 4/5/17 2) Proposing/Lead Agency: Clark County Fire Department 1 3) 1° Project Manager Name/Title: Troy Tuke, Assistant Fire Chief 1

1º Project Manager Contact Info: Phone: (702) 455-7311 Email: ttuke@clarkcountynv.gov Larry Havdu, Assistant Fire Chief 4) 2° Project Manager Name/Title: Email: LHaydu@clarkcountynv.gov 2[°] Project Manager Contact Info: Phone: (702) 455-7311 5) Finance/Grant Contact Name/Title Karen Taylor Phone: (702) 455-6183 Email: karent@clarkcountynv.gov Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

This project is an enhancement to previous efforts, most recently in FFY2012, where we received funding for development of a Fire incident and reporting tool, to improve the frequency, speed, and quality of suspicious activity reporting by fire personnel out in the field to the Southern Nevada Counterterrorism Center (SNCTC). Rapid, reliable internet connectivity from the field, especially in rural areas supported by volunteer fire stations, is critical for achieving maximum capability of the EMS and fire reporting tool previously funded under the UASI program. Enhanced internet connectivity will allow safety and security of confidential documents, including medical records, of transported patients, especially critical during a mass casualty incident, which will protect privacy of the patients as well as expedite patient identification and tracking and treatment of the patients. This enhanced capability will further integrate urban and rural fire and EMS services.

Fire personnel, including fire suppression and Emergency Medical staff often encounter situations and obtain information that may be useful to the SNCTC. Timely reporting of this information may be critical to thwarting a potential intentional harmful act or terrorist attack. HSGP funding has been used in the past to strengthen the capabilities of Operational Coordination and Intelligence and Information Sharing with regard to Suspicious Activity Reporting by first responders.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Operational Coordination between rural EMS/Fire Suppression Personnel, is essential for both prevention and response activities. The ability to quickly report suspicious activity or observed criminal activity is essential for the safety and security of both residents and public safety personnel.

Intelligence and Information Sharing will be enhanced by the ability to submit suspicious activity reports directly to the SNCTC in the event of suspected or observed activities that could be related to a terrorist attack or other intentional act.

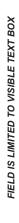
The ability to submit timely reports will assist in rapid transfer of information to the proper authorities as well as assist in patient transport and treatment.

	Nevada Homeland	PROJECT ID:	Р	
	Project Proposal for	Date Submitted	4/5/17	
PRO	JECT TITLE REFERENCE:			
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS) P	riority and Urban Arec	ı Strategy
	NCHS FFY17 Priority			
	Urban Area Strategy Priority	#4 - OPERATIONAL COORDINATION		

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

This project will use both vendor services and in-house IT personnel to implement the steps necessary to complete the project. Prioritization and implementation will be achieved through coordination among Clark County Deputy Chiefs and Assistant Chiefs and Clark County Fire IT with support from the services of a vendor, resulting in a a completed project within the performance period of the grant.



12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	MHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County Fire Department	Clark County	Assistant Chief Troy Tuke
12(b)			
12(c)			

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

Clark County Fire Department will support ongoing repair and maintenance of the equipment.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland	l Security Grant Program (HSGP)	PROJECT ID:	Р
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
	-		

PROJECT TITLE REFERENCE: CCFD Enhancements to Suspicious Activity Reporting

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
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Equipment (computer hardware and software) for support of enhanced wireless internet connectivity in the rural areas of Clark County, including paid and volunteer fire stations within unincorporated Clark County	\$ 100,000.00		\$ 100,000.C
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	SubTotal \$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	LV-UASI	State-wide State-wide	

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	Р
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

CCFD Enhancements to Suspicious Activity Reporting

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

	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	11/01/17	01/31/18	3
3	Install equipment	02/01/18	04/30/18	3
4	Test equipment	05/01/18	06/01/18	1
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.
 The ability to submit timely suspicious activity reports to the SNCTC is essential to preventing or responding to man-made threats.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns primarily with Operational Coordination and Intelligence and Information Sharing as they relate to coordination among Fire/EMS personnel and law enforcement, and the ability to report observations from the field via laptops and rural fire stations directly to the SNCTC.

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

This project can be partially completed, but some rural fire stations and rural public safety personnel would continue to lack internet connectivity. This project could be completed in phases, but future funding would need to be requested through the UASI program.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Р				
	Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/5/17							
PROJ	ROJECT TITLE REFERENCE: CCFD Enhancements to Suspicious Activity Reporting							
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.						
are limitied to visible text box size		peted by the rural fire stations, County Fire operating budge		idget.				
Fields "d" and "e" are lin	This project primarily supports th Clark County.	e Urban Area, and could be of support to the City of Mesqu		al areas of				

- 18) THIRA COMPLETION Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:
 - **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



Nevada Homeland Security Grant Program (HSGP)PROJECT ID:QProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted3/28/17

Washoe County Sheriff's Office Citizen Corps Program **PROJECT TITLE:** 1) 2) **Proposing/Lead Agency:** Washoe County Sheriff's Office 3) 1º Project Manager Name/Title: Capt. Patrick Lee 1º Project Manager Contact Info: Phone: (775) 328-3354 Email: plee@washoecounty.us 4) 2° Project Manager Name/Title: 2° Project Manager Contact Info: Phone: (775) 325-6928 Email: srhodes@washoecounty.us 5) Finance/Grant Contact Name/Title: Laura Daniels Phone: (775) 328-3013 Email: Idaniels@washoecounty.us Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

To improve operational effectiveness through continued training of community members and recruitment of volunteers, including development and coordination of neighborhood-centric CERT Strike Teams that can be activated to respond to emergencies in specific populated areas or neighborhoods within our 625 square mile service area of southwest Washoe County.

To improve public information and awareness through a combination of outreach efforts at various venues, including community events, conferences, speaking engagements and ongoing implementation of the Child I.D. Program. The Child ID Program processes child identification cards for parents and legal guardians while providing safety information and key messages developed by the Washoe County Sheriff's Office.

To sustain operational coordination relative to emergency response and disaster preparedness by providing necessary emergency equipment, supplies, training, and safeguards to CCP volunteers supporting prevention, protection, mitigation, response and recovery efforts for citizens, property and environmental concerns within our service area.

To establish 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, 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 provided by our effective Citizen Corps website, continuing to target new volunteers and current volunteers, as well as other agencies and the general public outside of our organization but residing within our service area.

8) **PROPOSED CORE CAPABILITY** - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core

Capabilities here: https://www.fema.gov/pdf/prepared/crosswalk.pdf

Primary Core Capability:	Community Resilience [Mission Area: MITIGATION]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

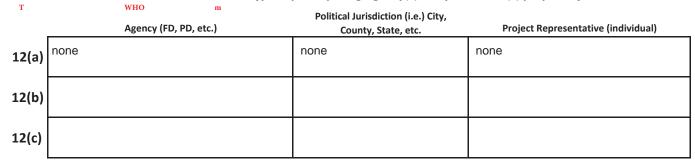
We support and participate in preparedness drills conducted by other agencies. We offer four CERT academies each year to provide training and information on preparedness and response to community members and local groups. Our program trainings are open to and frequently include members from other CERT programs, including inter-program drills. We conduct outreach efforts and provide information to Neighborhood Watch groups, Neighborhood Advisory groups, and other public and private organizations. Our program is an active member of VOAD and works closely with the local Emergency Manager to support disaster response efforts.

Our volunteer standards-based training programs include regular review 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 have strong working relationships with the Sheriff's Office, the Emergency Manager, the County, other local law enforcement and fire departments, and with the local Department of Homeland Security and Transportation Security Administration/Airport.

	Nevada Homelanc	l Sec	urity Grant Program (HSGP)	PROJECT ID:	Q						
	Project Proposal for	· FFY	17 HSGP Funding Description	Date Submitted	3/28/17						
PRO	JECT TITLE REFERENCE:	Wash	ashoe County Sheriff's Office Citizen Corps Program								
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nev	ada Commission on Homeland Security (NCHS) I	Priority and Urban Area	ı Strategy						
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION								
	Urban Area Strategy Priority		#3 - PUBLIC INFORMATION AND WARNING								
FIELD IS LIMITED TO VISIBLE TEXT BOX	and protect life and property. Si leverage relevant training oppor- programs and develops exercise organizes and facilitates quarter preparedness training to the ger Staff organizes and facilitates vo Staff actively participate in mont Security/Terrorism Awareness (security), facilitating volunteer as	aff res tunities es/drills ly CER heral po bluntee hly trai CHSC) ssignm		with agencies and organ agencies. Staff builds tr m leaders and guest spe pert instructors to provid program for new volunt ERT teams, one Homel iated Rail Auxiliary Tear	nizations to aining bakers. Staff le emergency teers. and						
Held is Limi	Staff manages Intelligence and coordinate and conduct security Staff field requests from Comma	Information testing and Sta	burchases to support training and outreach progra ation Sharing with our partners at the TSA, providi J. ff, Emergency Operations Manager, outside ager well as coordinating volunteers for emergency ar	ing specially trained voluncies and organizations	relative to						

Staff manages the Public Information and Warning efforts to volunteers through approved channels of communications.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.



13) 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 funding ceases. WCSO will commit personnel and office space for the project.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) **PROJECT ID: Project Proposal for FFY17 HSGP Funding Description** Date Submitted

3/28/17

O

PROJECT TITLE REFERENCE:

Washoe County Sheriff's Office Citizen Corps Program

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 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 transit security. Conduct robust community outreach encouraging the public to "make a plan, make a kit, be prepared." Planning and securing speakers for Citizens' Homeland Security Council 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.	\$ 0.00	\$ 6,965.00	\$ 6,965.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Citizen 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.	\$ 0.00	\$ 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 NERT Strike Teams to respond is essential to our mission. Providing needed equipment to volunteers for training, backpacks, NERT teams and team conexes helps volunteers protect citizens, mitigate impacts, respond quickly and strengthen recovery efforts. Supporting the Child I.D. Program reduces risk and enhances response and recovery of lost	\$ 0.00	\$ 32,850.00	\$ 32,850.00
children. Community outreach through speaking engagements, presentations and collateral materials improve awareness about disaster preparedness.			
collateral materials improve awareness about disaster preparedness.	LV-UASI	State-wide	SubTotal
	\$ 0.00	State-wide	SubTotal \$ 3,934.00
 collateral materials improve 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, and terrorism 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 			
collateral materials improve 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, and terrorism 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 LV-UASI	\$ 3,934.00	\$ 3,934.00
 collateral materials improve 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, and terrorism 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 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 LV-UASI	\$ 3,934.00 State-wide	\$ 3,934.00 SubTotal
 collateral materials improve 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, and terrorism 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. 	\$ 0.00 LV-UASI \$ 0.00	\$ 3,934.00 State-wide \$ 0.00	\$ 3,934.00 SubTotal \$ 0.00
 collateral materials improve 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, and terrorism 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 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] Staff recruits and liaisons with volunteers, helps with training coordination and exercises, and public outreach. With 3 programs and 250+ active volunteers within a 625 square mile service area, there is a need for more than just one person to manage our programs. Providing hands-on support at meetings/trainings helps our programs remain robust and successful. We have trained 900 individuals, and 	\$ 0.00 LV-UASI \$ 0.00 LV-UASI	\$ 3,934.00 State-wide \$ 0.00 State-wide	\$ 3,934.00 SubTotal \$ 0.00 SubTotal

15)

	Nevada Homeland Security Grant Program (HSGP) PROJECT ID:											
	Projec	ct Proposal for	Date	Date Submitted								
PRO.	JECT TITLE	REFERENCE:	ram									
16)	TASKS & SO	CHEDULE - Identify	the necessary tasks/steps, and time needed.	_								
	FIELDS ARE L	IMITED TO TEXT BOX S	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 Con	missioners acceptance of award	10/01/17	01/01/18	3						
	3	Schedule classes for	the funding cycle	01/18/18	04/01/18	3						
	4	Purchase equipment		02/01/18	11/01/18	9						

03/01/18

04/01/18

02/01/19

05/01/19

11

13

12 2) SUDDIEMENTARY INFORMATION. Diagram provide a DDIEC overlage tion for your response to these superiors

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.

Schedule outreach activities for the funding cycle

Conduct scheduled outreach

The Citizen's Homeland Security Council team receives monthly trainings on terrorism and related law enforcement topics. Members support TSA training missions several times each month at the airport for the purpose of reducing terrorist attacks on airlines.

The Rail Auxiliary Team is trained in both safety and security of trains and rail systems, how to identify suspicious behavior and items/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 Nevada Commission on Homeland Security FY17 Priorities? 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 disasters. Operational Coordination requirements are met through training and drills, and inter-agency support during emergencies and training preparations.

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.

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	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Q								
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/28/17								
PROJ	ECT TITLE REFERENCE:	Washoe County Sheriff's Office Citizen Corps Program										
	d. Can this project continue w	ithout funding? YES 🔵 NO 💿 Explain below.										
"e" are limitied to visible text box size	The organizational support and materials for community outreach, continual training and emergency response would not be possible without this funding. e. Does this project provide a measurable "state-wide" benefit? YES NO Explain below. Perhaps not, however, this project does serve a 625 square mile service area, and provides inter-agency benefit to several											
Fields "d" and "e" a	counties in Northern Nevada out											

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission?



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	M DETAIL BUDGET	
Name &	Grant Manager	
Contact	Name &	
# Patrick Lee 775-328-3	354 Contact # Laura Daniels 775-328-3013	

	Agency	7	Name & Contact			Grant Manager Name &									
	Name	Washoe County Sheriff's Office	#		775-328-3354		Laura Dan	iels 775-328-301	3						
	II TITI P	Washoe County Sheriff's Office Citizen	Corne	rogram											
	IJ TITLE:	washoe County Sheriff's Office Citizen	Corps F	rogram											
		One Budget Per Funding Stream													
		SHSP													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1		Part-time Intermittent (PT/I) WCSO positions for WCSO CCP, annual basis	Sustainm ent		22	100%	2200	\$ 48,400.00	Community Resilience Facilitation	Public Information and Warning	n/a	SHSP	\$ 48.400.00	4 400 00	Fewer outreach events, less ager support during emergencies; possible fewer trainings, less meeting support
2								\$ -			104		\$ -	4,400.00	
3				1			1	\$ -					\$-		†
4								\$-					\$-		
_	Personnel Sub-Total							\$ 48,400.00					\$ 48,400.00	\$-	
RSON		ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAII	NE IN DETAIL	THE POSITIO	NS AND DELIVER	ABLES. NA		E USED TO ENS	URE ITEMS LIST	ED WILL BE COMPL	ETED IN THE	+ .0,+00.00	Ŧ	
arrative	HERE														
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
5								\$-					\$0.00		
6 7								\$ - \$ -					\$0.00 \$0.00		
8							-	\$ -					\$0.00		
	Fringe Sub- Total	-						s -					\$0.00	\$0.00	
RINGE	COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	S. NARRA	TIVE WILL BE US	ED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	IN THE		• • • • •	
arrative	HERE														
				Previous		Travel Reference									Line Item Reductions
ine #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
ne #		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)		Funding		# from	Total Trips		Total Cost				Total Budget		Descriptions on how it will
ine #	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability				Descriptions on how it will
9	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg. MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal	Type Select Type Sustainm	Funding Type		# from	Total Trips		Total Cost 	Capability Community Resilience	Capability	Source	\$213.00 \$0.00		Descriptions on how it will
9 10 11	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select Type Sustainm	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability	Source	\$213.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12 13	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select Type Sustainm	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability	Source	\$213.00 \$0.00		Descriptions on how it will
9 10 11 12 13 14	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select Type Sustainm	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability	Source	\$213.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select Type Sustainm	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability	Source	\$213.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12 13 14 15	CATEGORY Travel Planning Training Exercise Equipment	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) to attend FEMA training related to the Citizen Corps program and managing volunteers at EMI in Emmitsburg, MD.) It is anticipated that these funds will allow one person to attend at one FEMA training, as registration/air fare/lodging are covered by FEMA at EMI. This is a replacement hire. Only the meal ticket and minor travel-related expenses are	Type Select Type Sustainm	Funding Type	Each Travel	# from Addendum	Total Trips	Trip		Capability Community Resilience	Capability	Source	\$213.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will

Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17		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.	Sustainm ent	Local	1.00	1,950		Community Resilience Facilitation	Public Information and Warning	N/A	SHSP	\$1,950.00	\$600.00	reductions here may impact overall efficiency in ability to provide information and training materials to volunteers and community members
18		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 bags imprinted with our website and other preparedness information, and declaration that funding sources are provided	Sustainm ent		1.00	2,600		Community Resilience Facilitation	Public Information and Warning	N/A	SHSP	\$2,600.00	\$1,400.00	These useful items are used to educate visitors about emergency preparedness. Having these visual enticements helps to 'draw' them into an outreach discussion, allowing us to engage more people at outreach events.
19		Stickers/pins/pens/patches for volunteers. These are items for the volunteer uniforms to designate affiliation, training and EM response accomplishments.	Sustainm ent		1.00	340	340.00	Community Resilience Facilitation	Public Information and Warning	N/A	SHSP	\$340.00	\$170.00	Pins/patches, etc., that identify various teams show pride and elicit interest in participation. Loss of these items reduces visibility and recruitment potential.
20		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 wares.	Sustainm ent		1.00	1,575	1,575.00	Community Resilience Facilitation	Public Information and Warning	N/A	SHSP	\$1,575.00	\$1,000.00	Volunteers respond well to recognition. We have enjoyed increasing levels of participation in emergency and community safety events, which are rewarded at the annual Appreciation dinner with these items. Attendance at this dinner has also imporved. Without funding support, attendance and participation may dwindle.
21		Safety vests for training. The inexpensive safety vests used for training are worn out and diminished. These vests will be used for CERT academies and other trainings, and may also be used in emergencies if necessary.	Select Type		1.00	500	500.00	Community Resilience Facilitation	Public Information and Warning	N/A	SHSP	\$500.00	\$250.00	Reduction of this line item will reduce the number purchased and some of the ways they will be put to use. Not a serious impact.
	Planning Sub- Total	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE					\$ 6,965.00					\$6,965.00	\$3,420.00	

LANNING COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE

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CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT								Line Item Reductions
			туре		QUANTIT	COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
ganization	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													
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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

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL	l											

		Supplies for currently issued CERT backpacks. Fully												This reduction means we will focus
28		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, reolacement batteries, etc.	Sustainm ent		1.00	6,350.00	\$ 6.350.00	Community Resilience Facilitation	Public Information and Warning	SHSP	s	6.350.00		I his reduction means we will focus on stocking and replacing basic items and purchase fewer new items that may prove useful in an emergency.
29		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, a replacment 3,500 Watt generator and 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.	Sustainm ent		1	6,200.00	\$ 6,200.00	Community Resilience Facilitation	Public Information and Warning	SHSP	\$	6,200.00	4,000.00	This reduction means we will focus on stocking and replacing basic items, and purchase fewer new items that may prove useful in an emergency.
30		Duffel bag items. Duffel bags are 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 invidual 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: additionafirst aid supplies, portable stretchers, storage clipboards, etc An additional duffel will be purchased to store/transport the newly purchased triage tarp set.	Sustainm		1	1,620.00	\$ 1,620.00	Community Resilience Facilitation	Public Information and Warning	SHSP	\$	1,620.00		These duffels are an important component to our ability tofunction as isolated teams following a disaster. Reductions here will limit some of the equipment that could be vital to an emergency response.
31		Specially item: our ourrent BullEx fire extinguishment training equipment is beginning to indicate wear of the electronics and the end of its useful functionality. Costs to repair it, if possible, are not covered by grant funds and would be prohibilive. This training tool is used frequently, to train academy attendees at our four CERT academies each year, County employees, visitors at outreach events, and to provide refresh training to our volunteers, including during drills. The item includes the base unit, 2 laser extinguishers remote and tablet control and a sturdy carrying cases. Fund for this item would make it possible to purchase a replacement within 2 years, by the end of the anticipated useful electronic life.			1	18,230.00	\$ 18,230.00	Community Resilience Facilitation	Public Information and Warning	SHSP	\$	18,230.00		Our current equipment is approaching the end of its useful life. Without this piece of equipment, we can no longer provide fire extinguishment training to volunteers, academy trainees, other groups, and community members during outreach.
32		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.	Sustainm ent		1	450.00	\$ 450.00	Community Resilience Facilitation	Public Information and Warning	SHSP	\$	450.00		Without the needed ink for the printers, the Child ID team cannot provide this service to the public.
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39	EQUIPMENT									 				

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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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40		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 head on the hurth a telepate	Sustainm ent				1.00		Community Resilience Facilitation	Public Information and Warning	\$ 2,186.00	SHSP	\$ 2,186.00		Reduction of this line will significantly reduce the number of First Aid training materials needed to provide First Aid certification classes to our volunteers, which is a valuable addition to their training and could save lives.
41		Purchase Quick-Series pocket guides for distribution to volunteers. Provides quick access and description for conducting damage assessments and providing appropriate assistance to people with functional needs. For training and emergencies.	Sustainm ent				1.00		Community Resilience Facilitation	Public Information and Warning	\$ 1,535.00	SHSP	\$ 1,535.00		Reduction of this line means loss of these extremely helpful tools which are much appreciated by the volunteers, especially when our ability to offer trainings in some areas is limited.
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	Training Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I					50 1105				\$ 3,721.00		\$ 3,721.00	1,850.00	

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ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												_	
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Narrat	tive HEI	RE						Total Original Budget	Line Item Reductions Total	
								\$ 92,149.00	\$ 31,670.00	

All budgets require an email approval from the financial and/or grant manage



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

		*	*Required Fields										**Require	d Fields							
aveler's Name	Title	Funding Source	Purpose (Please note if travel is for training)	Departure City	Destination City	Travel Start Date	Travel End Date	No. Davs	No. Nights	Airfare	Hotel	Per Diem	Motor Pool Car		Reg Fees	Public Trans	Parking	Rental Car	Baggage Fees		Total
irlee Rhodes																				\$	
			travel for Part Time / Intermittent employee to attend the FEMA training for CCP programs and volunteer management at EML (only																		
		GLIGD	costs are for EMI food ticket, food for two travel					-	-	¢	¢	¢ 212.00	¢	¢	¢	¢		¢		¢	
D: Intermittent pe	PR/Int	SHSP	days and baggage fees)	Reno, NV	Emmitsburg, VA	tbd	tbd	7	6	\$ -	\$ -	\$ 213.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$-		\$ \$	21
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omplete the required fields, the other fields are opti

	Nevada Homeland	l Secu	irity Grant Pr	ogram (HSGP)	PROJECT ID:	R
	Project Proposal for	· FFY1	7 HSGP Fund	ling Description	Date Submitted	3/24/17
1)	PROJECT TITLE:	Dougla	as County CERT P	rogram		
2)	Proposing/Lead Agency:	Dougla	as County Emerger	ncy Managment		
3)	1° Project Manager Name/Title:	Tod F.	Carlini, District Ch	ief/Emergency Manager		
	1º Project Manager Contact Info:	Phone:	(775) 782-9048	Email: tcarlini@eastforkfire.org		
4)	2 [°] Project Manager Name/Title:	Dave	Fogerson, Deputy (Chief/Deputy Emergency Manage	r	
	2° Project Manager Contact Info:	Phone:	(775) 782-9096	Email: dfogerson@eastforkfire.or	rg	
5)	Finance/Grant Contact Name/Title:	Joseph	n Langkilde, CPA, I	District Accountant		
	Finance/Grant Contact Info:	Phone:	(775) 782-9991	Email: jlangkilde@eastforkfire.or	g	

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\bigcirc

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Douglas County Emergency Management and LEPC is proposing to expand and improve the Citizen Corps CERT program serving Douglas County and surrounding region. The project would increase the current capabilities of CERT to include greater responsibilities for emergency shelter management, support major event rehabilitation of emergency service personal and conducting Douglas County Employee CERT Based Emergency Preparedness training. The project would also support continued sustainment of CERT capacity for shelter deployment, EOC support, and large animal rescue support functions. The current CERT program has approximately 100 citizen volunteers participating. Our goal is to reach 150 participants. Douglas County covers a large geographic area with many areas subject to isolation issues under several circumstances. Deployment goals also include being able to have the capacity to preassign CERT into those areas subject to isolation, such as the South Shore of Lake Tahoe and Northern and Southern Douglas County.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Community Resilience [Mission Area: MITIGATION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project aligns with the Primary Core Capability of Operational Coordination by working within a unified and coordinated operational structure and process that appropriately integrates 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.

	Nevada Homeland	d Secu	rity Grant Program (HSGP)	PROJECT ID:	R
	Project Proposal for	or FFY1	7 HSGP Funding Description	Date Submitted	3/24/17
PRO.	IECT TITLE REFERENCE:	Dougla	s County CERT Program		
10)	PRIORITIES - Identify applicab Objective to be addressed	ble Neva	da Commission on Homeland Security (NCHS) I	Priority and Urban Area	Strategy
	NCHS FFY17 Priority	7	#4 - OPERATIONAL COORDINATION		
	Urban Area Strategy Priority	1	NO URBAN AREA STRATEGY PRIORITY		
IS LIMITED TO VISIBLE TEXT BOX	provisions of training to CERT v management, and rehabilitation CERT coordinator. Additionally,	volunteers n of emerg , these ca	nt, working through its agent, the East Fork Fire s. Program development and training for greater gency services personnel will be accomplished v apacities will be included in the Douglas County iakeholders, response organizations, the school	responsibilities for eme vith current staff and the EOP and will be exercis	rgency shelter part-time
O IS LIMITED TO					

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	East Fork Fire Protection District	Douglas	Tod F. Carlini, District Fire Chief
12(b)	None		
12(c)	None		

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

Sustainment of the project will require on-going recruitment and retention efforts, including the replenishment of supplies and equipment. Sustainable funding will require comments from a combination of public/private sources including Douglas County and the East Fork Fire Protection District.



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14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your % from 0 to 100 for UASI	Enter your % from 0 to 100 for Statewide		2

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

R

3/24/17

Date Submitted

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	SubTotal
Provide funding for recruitment efforts such as print materials, advertising and display board.			
		\$ 750.00	\$ 750.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
None		\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Provide funding for CERT member equipment and supplies including advanced CERT bags for regional deployment. Purchase one office printer for the CERT office and one pop up shelter for CERT outings. Provide funding for a number of general office supplies and to cover the cost of reproduction of print material.		\$ 2,500.00	\$ 2,500.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Provide funding for training to increase the capacity of CERT in the areas of shelter management, EOC operations, and event rehabilitation. Also provide the basic training for new CERT members county wide. Provide funding for training materials and to allow CERT personnel to provide public training presentation as part of recruitment. Provide funding for CPR training and recertification for CERT personnel		\$ 2,000.00	\$ 2,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
Provide funding for travel, coordination, and other supplies for an evaluation exercise with Carson City and Washoe County CERT.		\$ 750.00	\$ 750.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
Provide funding for the recruitment and contract engagement of a new CERT Contract Coordinator at a cost of \$1,000 per month. Provide funding for the annual costs of CERT Worker's Compensation Insurance and initial costs of background checks, identification cards, and application		\$ 15,000.00	\$ 15,000.00
processing records maintenance			
15g) PROJECT TOTALS	LV-UASI	State-wide	TOTAL

_ 3

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID:

Date Submitted 3/24/17

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PROJECT TITLE REFERENCE:

Douglas County CERT Program

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

FIELDS ARE I	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	Recruit new CERT coordinator and establish contract	09/01/17	08/31/18	12
3	Purchase and or develop recruitment and promotional materials	09/01/17	08/31/19	24
4	Conduct Basic and specialized CERT Trainings which reinforce mission essential CERT functions and assigned responsibilities.	09/01/17	08/31/19	24
5	Shelter Management Trainings	09/01/17	08/31/19	24
6	CPR/First aid Trainings	09/01/17	08/31/19	24
7	Purchase CERT Supplies and equipment	09/01/17	08/31/19	24
8	Conduct Douglas County CERT Team EOC support training	09/01/17	08/31/19	24
9	Conduct Douglas County Emergency Preparedness Employee Training	09/01/17	08/31/19	24
10	Identify and train three volunteers for "Train the Trainer"	09/01/17	08/31/19	24
11	Evaluation exercise with Carson City and Washoe County CERT Teams	09/01/17	08/31/19	24
12	Expand CERT into EOP	09/01/17	08/31/19	24

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.

CERT in Douglas County has evolved into an indespensible 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 Nevada Commission on Homeland Security FY17 Priorities? 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.

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

It would be difficult to reduce this request. The Douglas County CERT is needing to expand. We have seen increase in participation and interest in the program. While not a part of this request, interest in a "teen CERT" continues to increase. The cost of doing business also has seen an increase over the years, however, a small reduction in the request may be possible.

	Nevada Homeland	Security Grant Prog	ram (HSGP)	PROJECT ID:	R
	Project Proposal for	FFY17 HSGP Funding	g Description	Date Submitted	3/24/17
PROJ	ECT TITLE REFERENCE:	Douglas County CERT Progr	am		
	d. Can this project continue w	thout funding? YES 🔵 NO 🤇	Explain below.		
"d" and "e" are limitied to visible text box size	NO. Without this funding Dougla program.	is County would have to termin	nate the program. There are	e no other funding opti	ions for this
itied	e. Does this project provide a	neasurable "state-wide" benefit	?YES 💽 NO 🔵 Explain be	low	
Fields "d" and "e" are lir	Absolutely. While not a terrorist at least that has been Douglas C trained civilians with the skills, ki this day and age. CERT serves	ounty's experience. We live in owledge, and abilities, taught	a dangerous and unpredicta as part of the CERT curricul	able world. Having an	"army" of
18)	THIRA COMPLETION - Please	indicate the participation lev	el in completing the 2016 1	THIRA Survey. CHOO	SE ONE:
		ated in the 2016 Threats and			
			-		-
	V - Agency has not part	icipated in the 2016 Threats a	πα παzaras ιαθητιμιτατίοη κ	ISK ASSESSMENT (THIR.	A) Survey
19)	ADDITIONAL COMMENTARY Field is limited to the visible tex		nal project commentary yo	ou feel may be impor	tant.
	CERT is an important program. community , in particular our old county and country.				



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017 LINE ITEM DETAIL BUDGET

	Agency Name	Douglas County	Manager Name & Contact #	Tod Carlini		Grant Manager Name & Contact #									
	IJ TITLE:	CERT													
		One Budget Per Funding Stream													
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)		Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1		Contract CERT coordinator for 12 months	Sustainmen	State	\$1000 per month -Salary	100%		\$ 12,000.00	Operational Coordination	Community Resilience			\$ 12,000.00		
2								\$ -					\$ -		
3								\$-					\$-		
								\$-					\$ -		
4	Personnel							\$ 12,000.00					¢ .	¢	

Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)		Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		Positions Require: Fringe to be separate from Personnel Costs above													
5		Funding for annual workers comp insurance	Sustainmen t	State		100%	32.00	\$ 1,920.00	Operational Coordination	Community Resilience			\$1,920.00		
6		New volunteer background checks	Sustainmen t	State		100%	40.00	\$ 1,080.00	Operational Coordination	Community Resilience			\$1,080.00		
7								\$-					\$0.00		
8							-	\$ -					\$0.00		
	Fringe Sub- Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX						\$ 3,000.00					\$3,000.00	\$0.00	

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

Narrative HERE

Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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									-				\$0.00		
10									-				\$0.00		
11									-				\$0.00		
12									-				\$0.00		
13									-				\$0.00		
14									-				\$0.00		
15									-				\$0.00		
16									-				\$0.00		
	Travel Sub- Total								-				\$0.00	\$0.00	_

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17		Print advertising	New		4.00	25.00	100.00					\$100.00		
18		CERT display board (additional)	New		1.00	300.00	300.00					\$300.00		
19		Promotional materials	New		1,000.00	0.35	350.00					\$350.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$ 750.00					\$750.00	\$0.00	

R

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$-		í I
23								\$-					\$ -		1
24								\$-					\$-		ĺ
25								\$-					\$-		ĺ
26								\$-					\$-		ĺ
27								ş -					\$-		
	Organization Sub-Total							s -					\$-	-	
		RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	ASE EXPLAI	NE IN DETAIL	THE POSITIO	NS AND DELIVER	ABLES. NA	ARRATIVE WILL	BE USED TO ENS	SURE ITEMS LIST	ED WILL BE COMPL	ETED IN THE			

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 AN AEL													
28		Replenish medical supplies and provide CERT kits for new volunteers		State			2,500.00	\$ 2,500.0	Operational Coordination	Community Resilience	21GN-00-CCEQ	SHSP	\$ 2,500.0		
29							,	\$ -					\$ -		
30								\$ -					\$ -		
31								\$-					\$-		
32								\$-					\$ -		
33								\$-					\$ -		
34								\$-					\$ -		
35								\$-					\$ -		
36								\$-					\$ -		
37								\$-					\$ -		
38								\$-					\$ -		
39								\$ -					\$ -		
	EQUIPMENT Sub-Total							\$ 2,500.0	D				\$ 2,500.0	-	
EQUIPME Narrative		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASI	E EXPLAINE I	N DETAIL TH	E POSITIONS	AND DELIVERAB	LES. NARR	ATIVE WILL B	EUSED TO ENSU	RE ITEMS LISTED	WILL BE COMPLET	ED IN 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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	R
	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					-	-								
40		Provide funding for training to increase the capacity for shelter management, EOC operations, event rehabilitation, new member training (ie CPR/First Aid), public presentation training and recruitment and Train the Trainer.		State				\$ 2,000.00		Community Resilience			\$ 2,000.00			
41											\$ -		\$			1
42											\$ -		\$ -			1
43											\$ -		\$ -			1
44											\$ -		\$ -		<u> </u>	1
45 46											ъ -		\$ -		<u> </u>	1
40											ф с		\$ -			1
48			1							<u> </u>	\$ -	1			łł	ł
49										1	\$ -		\$ -		1	1
	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

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)	6											-	
50		Provide funding for coordination and other supplies for an evaluation exercise with Carson City and Washoe County CERTs.	Sustainmen	State						Community Resilience	\$ 750.00		\$ 750.00		
51											\$ -		\$-		
52											\$ -		\$-		
53											\$ -		\$-		
54											\$ -		\$-		
55											\$ -		\$-		
56											\$ -		\$-		
57											\$ -		\$-		
	Exercise Sub- Total										\$ 750.00		\$ 750.00	-	
EXERCIS	E COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE IN	DETAIL THE	E POSITIONS A	ND DELIVERABL	ES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	IN THE			

Narrative HERE		Total Original Budget	Line Item Reductions Total	
		\$ 7,000.00	\$-	

	Nevada Homeland	l Secu	rity Grant Pr	ogram (HSGP)	PROJECT ID:	S							
	Project Proposal for	· FFY1	7 HSGP Fund	ling Description	Date Submittee	d 4/4/17							
1)	PROJECT TITLE:	Southe	ern Nevada Comm	unity Emergency Response Tean	n (CERT)								
2)	Proposing/Lead Agency:												
3)	1° Project Manager Name/Title:	ager Name/Title: Mary M. Camin											
	1º Project Manager Contact Info:	Phone:	(702) 229-0076	a.gov									
4)	2 [°] Project Manager Name/Title:	Caroly	n Levering										
	2 ^o Project Manager Contact Info:	Phone:	(702) 229-0313	Email: clevering@lasvegasneva	da.gov								
5)	Finance/Grant Contact Name/Title:	Wymor	n Curry										
	Finance/Grant Contact Info:	Phone:	(702) 229-6810	Email: wcurry@lasvegasnevada	.gov								
6)	CLASSIFICATION - Check the p	orimary	intention of the P	roposed Project:	(Choose one:							

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Train and equip 450 individuals throughout Southern Nevada in the Community Emergency Response Team course. Support all Emergency Management Offices in Souther 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 CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Community Resilience [Mission Area: MITIGATION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

450 individuals from the Southern Nevada Area (Clark, Lincoln, Esmeralda 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.

	Nevada Homeland	d Secu	irity Grant	Program	(HSGP)	PROJECT ID:	S
	Project Proposal for	or FFY1	.7 HSGP Fu	inding De	scription	Date Submitted	4/4/17
PRO.	IECT TITLE REFERENCE:	Southe	ern Nevada Cor	mmunity Eme	ergency Response	e Team (CERT)	
10)	PRIORITIES - Identify applicab Objective to be addressed	ble Neva	da Commissior	n on Homela	nd Security (NCHS	δ) Priority and Urban Area	a Strategy
	NCHS FFY17 Priority						
	Urban Area Strategy Priority		#4 - OPERATIO	ONAL COOR	DINATION		
FIELD IS LIMITED TO VISIBLE TEXT BOX	CERT Program Coordinator will: courses and schedule the requis Reports, and Program Change F CERT Course Facilitators (Instru- breakdown classrooms. Program Support Staff will: Arra Financial Analyst will: Monitor gr accounting at the end of the rep	ill:Identify iisite instr Request tructors) v range for grant spe	partners and so ructors. Perform is. Respond to p vill: Transport n purchasing of s nding and comp	ecure course n public relation public inquirie needed course upplies, arran	e locations. Then p ons activities to pr es regarding the pr e supplies, set up nging travel, and h	procure course materials, omote CERT. Do Quarter rogram. classrooms, teach the cla nelp with general program	schedule y Progress sses, administration.
HELD IS LI							

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	City of Las Vegas	City of Las Vegas	Mary Camin
12(b)			
12(c)			

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

There are no continuing costs created by this program. This program in 100% dependent on this funding stream and absent the funds, this program would be terminated.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

80	20	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:SProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/4/17

PROJECT TITLE REFERENCE:

15)

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 for the International Association of Emergency Managers.			
Travel: CERT T3 course at Emergency Management Institute in Emmitsburg, MD provides advanced training to facilitators. International Association of Emergency Managers provides continuing professional development to the Program Coordinator.	\$ 4,755.00	\$ 4,126.00	\$ 8,881.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
None			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Provide funding for CERT instructor uniforms and badging. Also provides backpacks for course participants for use in the field. AEL # 21GN-00-CCEQ	\$ 40,836.00	\$ 10,209.00	\$ 51,045.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Provides training to core group clients (Clark, Nye, Lincoln Counties and Cities of Las Vegas, North Las Vegas & Henderson) Also allows the program to expand into a larger urban area. Funding provides Certified CERT instructors for a Spanish			
language CERT class and qualified translators for a DEAF CERT class and other	\$ 9,566.00	\$ 2,616.50	\$ 12,182.50
language CERT class and qualified translators for a DEAF CERT class and other printed materials.	\$ 9,566.00 LV-UASI	\$ 2,616.50 State-wide	\$ 12,182.50 SubTotal
Induction and a provided Contract of a DEAF CERT class and other printed materials.			
language CERT class and qualified translators for a DEAF CERT class and other printed materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] None			SubTotal
Ianguage CERT class and qualified translators for a DEAF CERT class and other printed materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] None 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 class rooms, and provide input for course modification and updates. The Program Coordinator does budget and quarterly reports, schedules courses, manages public relations and speaks to	LV-UASI	State-wide	SubTotal \$ 0.00
Ianguage CERT class and qualified translators for a DEAF CERT class and other printed materials. 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] None 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 class rooms, and provide input for course modification and updates. The Program Coordinator does budget	LV-UASI LV-UASI	State-wide State-wide	SubTotal \$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	S
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

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.	09/01/17	01/01/19	15
3	Schedule Courses and Facilitators	09/01/17	02/01/19	18
4	Purchase/procure course materials	09/01/17	02/01/19	18
5	Train Participants	09/01/17	02/01/19	18
6	Comply with required reporting requirements	09/01/17	02/01/19	18
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.

The CERT curriculum teaches specific actions for CERT members to take and what to avoid if they suspect a terrorist attack. (Unit 8) Terrorism topics include: What is Terrorism? Terrorist Targets/Terrorist Weapons/CBRNE indicators/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 dictate that these programs now be included in these funding streams.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? 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 ONO Explain below.

Yes: We can reduce the number of courses offered, but this will impact the Operational Coordination Core Capability. As courses are reduced so are the outcomes which will inhibit Operational Coordination.

	TITLE REFERENCE:	r FFY17 HSGP Funding Description Date Submitted Southern Nevada Community Emergency Response Team (CERT)	<u> </u>
d.	Can this project continue w	ithout funding? YES (•) NO () Explain below.	
Fixe	d costs associated with this	program are dependent on this funding stream.	
e.	Does this project provide a	measurable "state-wide" benefit? YES 💿 NO 🔵 Explain below.	

- YES Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - NO Agency has not participated in the 2016 Threats and Hazards 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

Southern Nevada CERT has been consistently ranked in the top 5 priorities in UWAG and State-wide working groups because it is an effective return on investment and provides productive outreach to the communities through individuals who are trained on terrorism and other hazards through the CERT program.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

						ETAIL BUDG	ET									
	Agency Name		Manager Name & Contact #	229 mcamin@la	Camin (702) 0-0076 asvegasnevada. gov		Wymon wcurry	Curry (70 @lasvega)2) 229-68 snevada.	810 gov						
	IJ TITLE:	Southern Nevada CERT Program														
		One Budget Per Funding Stream														
		SHSP														
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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.								3120						
1		CERT Program Coordinator	Sustainment	Other Federal	\$ 28.00	20%	2080		Operational Coordination	Community Resilience		SHSP	\$ 11,648.00			1
2		Support Staff	Sustainment	Other Federal	\$ 20.00	20%	2080		Operational Coordination	Community Resilience		SHSP	\$ 8,320.00			1
3		Course Facilitators	Sustainment	Other Federal	\$ 30.00	20%	2000	\$ 12,000.00	Operational Coordination	Community Resilience		SHSP	\$ 12,000.00			1
4								ş -					\$-]
	Personnel Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$ 31,968.00					\$ 31,968.00	\$-		

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 etcl for all courses.) Cour facilitators deliver training, sep-up classrooms and provide input for course and dupt for course and updates as appropriate. The Program coordinator does budget and quarterly reports, scheduling, facilitates 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	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		Positions Require: Fringe to be separate from Personnel Costs above													
5		CERT Program Coordinator	Sustainment	Other Federal	\$ 21.28	20%	2,080.00	\$ 8,852.48				SHSP	\$8,852.48		
6		Support Staff	Sustainment	Other Federal	\$ 15.20	20%	2,080.00	\$ 6,323.20				SHSP	\$6,323.20		
7		Course Facilitators	Sustainment	Other Federal	\$ 5.10	20%	2,000.00	\$ 2,040.00				SHSP	\$2,040.00		
8							-	s -					\$0.00		
	Fringe Sub- Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX						\$ 17,215.68					\$17,215.68	\$0.00	

Retirement, medical insurance, sick leave, taxes as required by law, 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	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		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		CERT Train the Trainer at EMI in Emmitsburg MD	New	Other Federal	Training	Lines 2 & 3	2	43.00	86.00	Operational Coordination	Community Resilience	SHSP	\$86.00		
10		Laughlin Hotel & Per Diem to teach CERT Class	New	Other Federal	Training	Line 4	1	900.00	900.00	Operational Coordination	Community Resilience	SHSP	\$900.00		
11		Mesquite Hotel & Per Diem to teach CERT Class	New	Other Federal	Training	Line 5	1	900.00		Operational Coordination	Community Resilience	SHSP	\$900.00		
12									-				\$0.00		
13									-				\$0.00		
14									-				\$0.00		r
15 16		ł							-				\$0.00		
16	Travel Sub-														
	Total								1,886.00				\$1,886.00	\$0.00	-

Provides funding for Spanish CERT classes taught by qualified instructors and for professional development for CERT Program Coordinator and Cours Facilitators.

		Туре	Funding Type		QUANTITY	UNIT COST	TOTAL	Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program	S
anning	DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON-														Ŭ
	Terrorism Quick Series App	Sustainment	Other Federal	NO	NO	1.00	2 240 00	Operational Coordination	Community Resilience	21GN-00-CCE0		\$ 2 240.00			
			rodordi			1.00	-	Coordination	rtoomonoo	2101-00-00EQ		\$0.00			
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anning Sub-															
tal							\$ 2,240.00					\$2,240.00	\$0.00		
anital	ning ning Sub-	MILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Terrorism Quick Series App	ning DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Terrorism Quick Series App Sustainment Ining Sub- I Image: Compliance of the series of the seri	ning DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Terrorism Quick Series App Sustainment Federal	DefaileD out (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Other Federal NO Terrorism Quick Series App Sustainment Federal NO Image Sub- I Image Sub- I	Detrail ED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Other Federal NO NO Terrorism Quick Series App Sustainment Other Federal NO NO Ining Sub- I Inining Sub- I Ining Sub- I Ining Sub- I <td>DefaileD out (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Other Federal NO NO 1.00 Terrorism Quick Series App Sustainment Other Federal NO NO 1.00 Image Sub- I Image Sub</td> <td>DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Other Federal NO NO 1.00 2,240.00 Terrorism Quick Series App Sustainment Federal NO NO 1.00 2,240.00 Image: Sub- Ining Sub- Ininining Sub- Ining Sub- Ining Sub- Inining Sub- Ining Sub- Ining Sub</td> <td>Detrail ED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVEL IN THIS CATEGORY Other Federal NO NO 1.00 Operational Coordination Terrorism Quick Series App Sustainment Federal Other Federal NO NO 1.00 Operational Coordination Image: Sub- No Image: Sub- Image: Sub- Image</td> <td>DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVELIN THIS CATEGORY Other Federal NO NO 1.00 Operational 2,240.00 Community Resilience Terrorism Quick Series App Sustainment Federal NO NO 1.00 0.2,240.00 Operational Coordination Community Resilience Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Community Resilience Coordination Community Resilience Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Community Resilience Community Resilience Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Community Resilience Community Resilience Community Resilience Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Community Resilience Community Resilience Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Coordination Coordination Image: Subscript Coordination Image: Subscript Coordination Image: Subscript Coordination Coordination 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Federal Other Federal NO NO 1.00 Operational 2,240.00 Community Resilience 21GN-00-CCEQ Image: Community Community Image: Compliance of the stress App Sustainment Other Federal NO NO 1.00 Operational 2,240.00 Community Resilience 21GN-00-CCEQ Image: Community Community Image: Compliance of the stress App Image: Community Community Ima	DETALED OUT (GENERAL TERMS AND INFORMATION NUL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) NO TRAVELINI THIS CATEGORY Image: second	DETAILE DOUT (GENERAL TERMS AND INFORMATION NUL NOT BE ACCEPTED BASED UPON NON, COMPLIANCE) NO TRAVELIN THIS CATEGORY Image: state in this category	ning DETAILED OUT (GENERAL TERNS AND INFORMATION VOMPLIANCE DASED UPON NON, COMPLIANCE) NO TRAVELIN THIS CATEGORY n

To pay for registration for the International Association of Emergency Managers Conference in Grand Rapids MI.

.ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITTIES - TO INCLUDE OVERTIME, VENCLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.												
22							ş -					\$ -		
23							s -					\$-		
24							ş -					\$-		
25							s -					\$ -		
26							ş -					\$ -		
27							s -					\$ -		
	Organization Sub-Total						s -					s -	-	

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL													
28		CERT Facilitator Identification-Badges, Shirts, Hats.		rederal		9.00	25.00	\$ 225.00	Operational Coordination	Community Resilience	21GN-00-CCEG	SHSP	\$ 225.00		
29		Participant Backpacks	Sustainment	Other Federal	NO	96.00	104.00	\$ 9,984.00	Operational Coordination	Community Resilience	\$ 9,984.00	SHSP	\$ 9,984.00		
30								\$-					\$-		
31								\$ -					\$-		
32								\$ -					\$ -		
33								\$-					\$-		
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37								ş -					\$ -		
38								<u>s</u> -					\$ -		
39	EQUIPMENT							ə -					\$-		
	Sub-Total							\$ 10,209.00					\$ 10,209.00	-	
EQUIPME		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	S. NARRATIV		TO ENSURE IT	EMS LISTED WILL	BE COMPLETED IN	THE GRANT			

Provides funding for CERT instructor uniforms and badging. Backpacks provide training tools and safety gear.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	S
		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						-								
40		Contract payment for two spanish speaking CERT T3 instructors to teach a Spanish CERT class.		Other Federal	YES	NO	1.00	400.00	Operational Coordination	Community Resilience	\$ 400.00		\$ 400.00			
41		First Aid Training Packets	Sustainment	Other Federal	NO	NO	200.00	1.07	Operational Coordination	Community Resilience	\$ 214.00		\$ 214.00			I
42			Sustainment		NO	NO	70.00	3.25	Operational Coordination	Community Resilience	\$ 227.50		\$ 227.50			I
43		Deaf Translators for Deaf CERT Class		Other Federal	NO	NO	1.00		Operational Coordination	Community Resilience	\$ 900.00		\$ 900.00			I
44		Student Manuals	Sustainment	Other Federal	NO	NO	70.00	12.50	Operational Coordination	Community Resilience	\$ 875.00	:	\$ 875.00			I
45											ş -		\$-			1
46											\$-		\$-			1
47											\$ -		\$-			ı
48													•			1
49	Training Sub- Total	•									\$ 2,616.50		\$	-		

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

Funding provides each student with a backpack containing items that support course curriculum: first aid training kits, CERT vest, bump hat, pry bar, multi-purpose wrench etc. Also Participant Manual P-925, Quick Series App Terrorism Guide, and other printed materials including brochures: When Disaster Strikes, Food and Water in an Emergency, Helping Children Cope with a Disaster, Earthquake Safety Checklist, Emergency Supplies Checklist, Preparing Pets for a Disaster, Preparing Seniors for a Disaster

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$ -		\$-		
51											\$-		\$-		
52											\$-		\$		
53											\$-		\$-		
54											\$-		\$-		
55											\$ -		\$-		
56											\$-		\$-		
57											\$ -		\$-		
	Exercise Sub- Total										ş -		\$-	-	

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

Narrative HERE					Total Original Budget	Line Item Reductions Total	
					\$ 66,135.18	\$ -	
All budgets require an	n email approval from the financial and/or grant	manager	 				



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

		**	Required Fields									**R	equired Fi	elds						3
Traveler's Name	Title	Funding Source	Purpose (Please note if travel is for training)	Departure City	Destination City	Travel Start Date			No. Nights	Airfare	Hotel	Per Diem	Motor Pool Car	Mileage	Reg Fees	Public Trans	Parking	Baggage Fees	'	Total
Unknown	Course Facilitator		CERT T3 @ Emergency Management Institute	Las Vegas	Emmitsburg MD	Unknown	Unknown	6	5			\$ 86.00							\$	86.00
Unknown	Course Facilitator		CERT T3 @ Emergency Management Institute	Las Vegas	Emmitsburg MD	Unknown	Unknown	6	5										\$	-
Unknown	Course Facilitator	SHSP	Teach CERT	Las Vegas	Laughlin	Unknown	Unknown	3	2		\$ 700.00	\$ 200.00							\$	900.00
Unknown	Course Facilitator	SHSP	Teach CERT	Las Vegas	Mesquit	Unknown	Unknown	3	2		\$ 700.00	\$ 200.00							\$ \$	900.00
																			\$ \$	
																			<u>\$</u>	
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																			\$ \$	-
**You must complete the		- 4h (° - 1-1								\$ -	\$ 1,400.00	\$ 486.00							\$ \$	- - 1,886.00

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HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

						A DETAIL BU	DGET								
	Agency Name		Name & Contact #	22 mcamin@1	Camin (702) 9-0076 asvegasnevad gov	Grant Manager	Wymo	n Curry (7 y@ lasveg a							
	IJ TITLE:	Southern Nevada CERT Program													
		One Budget Per Funding Stream													
		UASI													
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	Sustainm ent	Other Federal	\$ 28.0	0 80%	2080	\$ 46,592.00	Operational Coordination	Community Resilience		UASI	\$ 46,592.00		
2		Support Staff	Sustainm ent	Federal	\$ 20.0	0 80%	2080	\$ 33,280.00	Operational Coordination	Community Resilience		UASI	\$ 33,280.00		
3		Course Facilitators	Sustainm ent	Other Federal	\$ 30.0	0 80%	2000	\$ 48,000.00	Operational Coordination	Community Resilience		UASI	\$ 48,000.00		
4								s -					\$-		
	Personnel Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$ 127,872.00					\$ 127,872.00	\$-	

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 etcl for all courses.) Cour facilitators deliver training, sep-up classrooms and provide input for course modification and updates as appropriate. The Program coordinator does budget and quarterly reports, scheduling, facilitates 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	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		Positions Require: Fringe to be separate from Personnel Costs above													
5		CERT Program Coordinator	Sustainm ent	Other Federal	\$ 21.28	80%	2,080.00	\$ 35,409.92				UASI	\$35,409.92		
6		Support Staff	Sustainm ent	Other Federal	\$ 15.20	80%	2,080.00	\$ 25,292.80				UASI	\$25,292.80		
7		Course Facilitators	Sustainm ent	Other Federal	\$ 5.10	80%	1,200.00	\$ 4,896.00				UASI	\$4,896.00		
8							-	\$-					\$0.00		
	Fringe Sub- Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E						\$ 65,598.72					\$65,598.72	\$0.00	

Retirement, medical insurance, sick leave, taxes as required by law, 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	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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		International Association of Emergency Managers Conference in Grand Rapids MI	New	Other Federal	Training	Line #1	1	1,500.00	1,500.00		Community Resilience	UASI	\$1,500.00		
10		CERT Train the Trainer at EMI in Emmitsburg MD	New	Other Federal	Training	Lines #2 & 3	2	200.00	400.00		Community Resilience	UASI	\$400.00		
13									-				\$0.00		1
14									-				\$0.00		·
15									-				\$0.00		
16									-				\$0.00		1
	Travel Sub- Total								1,900.00				\$1,900.00	\$0.00	-

Provides funding for Spanish CERT classes taught by qualified instructors and for professional development for CERT Program Coordinator and Cours Facilitators.

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	S
	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													
17		Conference Registration Fees: International Association of Emergency Managers Conference in Grand Rapids MI	New	Other Federal	1.00	615.00	615.00	Operational Coordination	Community Resilience		UASI	\$615.00			
18		Terrorism Quick Series App	Sustainm ent	Other Federal	1.00	2,240.00	2,240.00	Operational Coordination	Community Resilience	21GN-00-CCEG	UASI	\$2,240.00			
19							-					\$0.00			1
20							-					\$0.00			1
21															1
	Planning Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE					\$ 2,855.00					\$2,855.00	\$0.00		

To pay for Conference Registration Fees: International Association of Emergency Managers Conference in Grand Rapids MI for continued professional development. Terrorism Quick Series App provides guidance and instruction to CERTs in the field.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$-					\$ -		
23							\$ -					\$-		
24							\$ -					\$ -		
25							\$-					\$ -		
26							s -					\$ -		
27							ş -					\$ -		
	Organization Sub-Total						ş -					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

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL												
			Sustainm		36.00	05.00		Operational	Community					
28		CERT Facilitator Identification-Badges, Shirts, Hats.		Federal Other	36.00	25.00		Coordination		21GN-00-CCEG	UASI	\$ 900.00		
								Operational	Community		UASI			
29		Participant Backpacks	ent	Federal	384.00	104.00	\$ 39,936.00	Coordination	Resilience	21GN-00-CCEG	UASI	\$ 39,936.00		
30							ş -					\$ -		
31							ş -					\$ -		
32							\$ -					\$ -		
33							\$ ·					\$-		
34							s -					\$ -		
35							\$ ·					\$-		
36							s -					\$-		
37							\$ -					\$-		
38							\$ -					\$ -		
39														
	EQUIPMENT													
	Sub-Total						\$ 40,836.00					\$ 40,836.00	-	

Provides funding for CERT instructor uniforms and badging. Backpacks provide training tools and safety gear.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	S
	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					-	-								
40		Contract payment for two spanish speaking CERT T3 instructors to teach a Spanish CERT class.		Other Federal	YES		2.00	800.00	Operational Coordination	Community Resilience	\$ 1,600.00	21GN-00-CCEQ	\$ 1,600.00			
41		First Aid Training Packets	Sustainm ent	Other Federal	NO	NO	800.00	1.07	Operational Coordination	Community Resilience	\$ 856.00	21GN-00-CCEQ	\$ 856.00			
42		Registration & Graduation Packet	Sustainm ent	Other Federal	NO	NO	280.00	3.25	Operational Coordination	Community Resilience	\$ 910.00	21GN-00-CCEQ	\$ 910.00			
43		Deaf Translators for Deaf CERT Class		Other Federal	NO	NO	3.00	900.00	Operational Coordination	Community Resilience	\$ 2,700.00	21GN-00-CCEQ	\$ 2,700.00			
44		Student Manuals	Sustainm ent	Other Federal	NO	NO	280.00	12.50	Operational Coordination	Community Resilience	\$ 3,500.00	21GN-00-CCEQ	\$ 3,500.00			
45											ş -		\$ -			I
46											s -		\$ -			ļ
47											5 -		\$ -			ł
49										1						t
	Training Sub Total										\$ 9,566.00		\$ 9,566.00	-		

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

Funding provides each student with a backpack containing items that support course curriculum: first aid training kits, CERT vest, bump hat, pry bar, multi-purpose wrench etc. Also Participant Manual P-925, Quick Series App Terrorism Guide, and other printed materials including brochures: When Disaster Strikes, Food and Water in an Emergency, Helping Children Cope with a Disaster, Earthquake Safety Checklist, Emergency Supplies Checklist, Preparing Pets for a Disaster, Preparing Seniors for a Disaster

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											s -		s -		
52											\$-		\$-		
53											\$ -		\$-		
54											s -		s -		
55											\$-		s -		
56											s -		s -		
57											s -		s -		
	Exercise Sub- Total										s -		s -	-	

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

Narrative HERE						Total Original Budget	Line Item Reductions Total	
						\$ 248,627.72	\$ -	
All budgets require ar	n email approval from the financial and/or grant manager							



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

		**	Required Fields									**	Required F	ields					S
Traveler's Name	Title		· Purpose (Please note if travel is for training)	Departure City	Destination City	Travel Start Date		No. Days	No. Nights	Airfare	Hotel		Motor Pool Car		Reg Fees	Public Trans		Baggage Fees	Total
Mary Camin	Program Coordinator		Attend IAEM Conference in Lancing MI	Las Vegas	Grand Rapids, MI	Oct. 18, 18	Oct. 24,18	6	5	\$ 664.50	\$ 545.00	\$ 265.50						\$ 25.00 5	\$ 1,500.0
	Course Facilitator		CERT T3 @ Emergency Management Institute																
Unknown		UASI		Las Vegas	Emmitsburg MD	Unknown	Unknown	6	5			\$ 200.00						5	\$ 200.0
	Course Facilitator		CERT T3 @ Emergency Management Institute																
Unknown		UASI		Las Vegas	Emmitsburg MD	Unknown	Unknown	6	5			\$ 200.00						5	\$ 200.0
																		5	s -
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**You must complete the		- () (° -).)	no ontional					-		\$ 664.50	¢ 545.00	\$ 665.50	1		+			3	\$ 1,900.0

	Nevada Homeland	l Secı	irity Grant Pr	ogram (HSGP)	PROJECT ID:	Т				
	Project Proposal for	· FFY1	.7 HSGP Fund	ling Description	Date Submitted	4/5/17				
1)	PROJECT TITLE:	Nevad	a Tribal NIMS							
2)	Proposing/Lead Agency:	Inter-T	er-Tribal Council of Nevada, Inter-Tribal Emergency Response Commission (ITERC)							
3)	1° Project Manager Name/Title:	Dan H	an Hourihan, Director, ITERC							
	1º Project Manager Contact Info:	Phone:	(775) 355-0600	Email: dhourihan@itcn.org						
4)	2 [°] Project Manager Name/Title:	Danie	Thayer, Program	Administrator, ITERC						
	2 ^o Project Manager Contact Info:	Phone:	(775) 355-0600	Email: dthayer@itcn.org						
5)	Finance/Grant Contact Name/Title:	Cynde	Cyndee Carsten, Program Specialist, ITCN							
	Finance/Grant Contact Info:	Phone:	(775) 355-0600	Email: ccarsten@itcn.org						

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Tribal emergency management programs have grown significantly. This growth is, in large part, due to the coordination and program deliverables of the ITERC, a department of the Inter-Tribal Council of Nevada. By virtue of the FFY17 HSGP funding, we seek to sustain activities of the ITERC and move into the next phase of the Tribal NIMS project. This need is exacerbated by the significant personnel turn-over amonast Nevada's Tribes. This next phase will improve and enhance state-wide Tribal emergency management programs through increased planning implementation, training and exercises among the 27 Tribal Nations in the state of Nevada. Nevada's Tribes are in various stages of emergency management implementation and need further training and exercises to test capability. Through training and exercises on the use and maintenance of the satellite communications capability of the Disaster Communications Boxes provided to each Nevada Tribe, we will greatly enhance reliable communications with, in many cases, very remote tribes. By delivering Incident Command System (ICS) and other courses in-person, we can effectively demonstrate the ICS and how it will apply to Tribal governments in both small and large unified command incidents. Applying this training to activities conducted per the Homeland Security Exercise and Evaluation Program (HSEEP) will enhance planning implementation activities and NIMS capability across all core capabilities within each Tribal jurisdiction. Exercises will focus on four of the five Nevada Homeland Security Commission Priorities for FFY2017: Intelligence and Information Sharing, Public Information and Warning, Operational Coordination and Operational Communications. The organization, outreach and involvement of the ITERC is recognized as a successful example of Tribal emergency management implementation and participation throughout the western U.S. and the ITERC is committed to helping Nevada's Tribes now and into the future.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Public Information and Warning [Mission Area: ALL]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Through planning efforts and six (6) exercises testing the effectiveness of Public Information and Warning systems at the tribal level, it will demonstrate the need for this capability. The need was demonstrated this past winter during flooding incidents of significant magnitude. Additionally demonstrated during those real world incidents is the need for increased Operational Coordination through further and, in many cases, initial Incident Command System and general emergency management training. That training will target not only responders, but Tribal leadership and administrative staff. When an emergency or disaster strikes, all members of the Tribal community are involved or affected.

	Nevada Homeland	d Secu	rity Grant Program (HSGP)		PROJECT ID:	Т		
	Project Proposal for	r FFY1	7 HSGP Funding Description		Date Submitted	4/5/17		
PROJ	ECT TITLE REFERENCE:	Nevad	Tribal NIMS					
10)	PRIORITIES - Identify applicabl Objective to be addressed	ole Neva	a Commission on Homeland Security (NC	CHS) Prio	rity and Urban Area	Strategy		
	NCHS FFY17 Priority	-	3 - PUBLIC INFORMATION AND WARNI	NG				
	Urban Area Strategy Priority	rban Area Strategy Priority						
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 Receive Funding 							
FIELD IS LIMITED TO VISIBLE TEXT BOX	 #2 Project Management: Suppo Staff #3 Training: Schedule, plan and #4 Exercise: Schedule, plan and #5 Technical Assistance: Provid 	d deliver d deliver de NIMS Maintain	RC Director and Program Administrator to minimum of eight (8) ICS/NIMS trainings: minimum of six (6) HSEEP compliant exer technical assistance to Tribes, as requeste and enhance ITERC staff expertise throug RC Staff	ITERC S rcises: IT ed.: ITEF	taff ERC Staff RC Staff			

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Inter-Tribal Council of Nevada (ITCN)	Sparks, Washoe, Nevada	Daryl Crawford, Exec. Director, ITCN
12(b)			
12(c)			

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

The only continuing financial obligation is the recurring training, exercise and technical assistance necessary with existing personnel and staff turnover. The proposed funding solution is the continued support of the Homeland Security Grant Program and other, as yet unidentified, future funding sources.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		2
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

Date Submitted

4/5/17

PROJECT TITLE REFERENCE:

Nevada Tribal NIMS

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
-Tribal Planning and Technical Assistance: x 6 @ \$500			
		\$ 3,000.00	\$ 3,000.00
		\$ 3,000.00	\$ 3,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
 Office Lease: \$4500 Landline and Mobile: \$500 Duplication: \$200 Office Supplies: \$200 ITCN Indirect Rate @ 17.8% \$16606 		\$ 22,006.00	\$ 22,006.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
None			\$ 0.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Tribal Incident Command System (ICS) Training Delivery x Eight (8) @ \$1,000.00		\$ 8,000.00	\$ 8,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
Tribal HSEEP Exercise Support and Delivery x Six (6) @ \$1,000.00		\$ 6,000.00	\$ 6,000.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
Dan Hourihan, Director, ITERC: 65% \$64766.40 Daniel Thayer, Program Administrator, ITERC: 8.5% \$6126.05		\$ 70,892.45	\$ 70,892.45
	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS	\$ 0.00	\$ 109,898.45	\$ 109,898.45

Nevada Tribal NIMS

PROJECT ID:

Date Submitted 4/5/17

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

PROJECT TITLE REFERENCE:

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	Lease office space, purchase and maintain landline, cell phone and internet	09/01/17	08/31/19	24
3	ITERC Director and ITERC Program Administrator to coordinate and oversee	09/01/17	08/31/19	24
4	Deliver a minimum of eight (8) ICS courses (100 through 420, 700 and 800)	09/01/17	08/31/19	24
5	Deliver a minimum of six (6) exercises per HSEEP to Tribal Nations in Nevada	09/01/17	08/31/19	24
6	Provide technical assistance, upon, request, to further NIMS compliance.	09/01/17	08/31/19	24
7	Maintain and enhance ITERC staff expertise through training and attendance at applicable conferences and events.	09/01/17	08/31/19	24
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.

Domestic or foreign terrorism is always a threat to Nevada's Tribes. Each tribe is a sovereign nation and must rely on their individual response capability and laws, in addition to their relationship with adjacent jurisdictions, i.e. county, state or federal. Nevada's Tribes, through the ITERC, work closely with the Nevada Threat Analysis Center (NTAC), better known as the Fusion Center, and many tribal members are FLO/TLO qualified.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.

Primary: Public Information and Warning, #3 Priority Secondary: Operational Coordination, #4 Priority

Plus, HSEEP exercises establish and test the capabilities of four of the five FY17 priorities: Intelligence and Information Sharing, Public Information and Warning, Operational Coordination and Operational Communication.

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

It has already been reduced from last year's request by appealing to the Nevada Homeland Security Finance Committee to change the budgeted percentages for personnel in FY15 and forecasting an additional reduction in percentages this year. This reduction will see no reduction in delivered services per the grant. In fact, there will be an increase.

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Т
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
JECT TITLE REFERENCE:	Nevada Tribal NIMS		
d. Can this project continue w	thout funding? YES 🔵 NO 💽 Explain below.		
There is no other source of fund			
e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explai	n below.	
This project benefits all 27 states west.	vide Tribes in Nevada. Nevada's Tribes cover all areas	s of the state: north, south	n, east and

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

No further comments.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

				LINE ITE	M DETAIL	DUDGEI									
	Agency Name		Manager Name & Contact #	Dan Hourihan, 7 ext. 154	75-355-0600	Grant Manager Name & Contact #			Director, Inter-	Tribal Council of	Nevada, 775-355-				
	IJ TITLE:	Project Name:: Tribal NIMS													
		One Budget Per Funding Stream													
		SHSP													
	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	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.							Public						
		ITERC Director (Tribal NIMS & Maint.)	Sustainment	Other	38.2	65%	2080	\$ 51,646.40	Information and Warning	Operational Coordination			\$ 51,646.40		
			Sustainment						Public Information and	Operational					
		ITERC Program Administrator (Tribal NIMS & Maint.)		Other	27.07	9%	2080		Warning	Coordination			\$ 4,785.98		
								\$ - \$ -					\$ - \$ -		
	Personnel							ş -					ф -		
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLA						\$ 56,432.38					\$-	\$-	
	exercises, deliver	technical and planning assistance to Tribes upon request, assist ITERC	Director with pro	gram and tribal co	ompiance with N			h Tribal NIMS prog	gram sustainment	and compliance. Secondary Core		Funding	Total Rudget	Line Item	
	CATEGORY	FRINGE DETAIL DESCRIPTION		gram and tribal co			onsistent with	h Tribal NIMS prog	gram sustainment	and compliance.			Total Budget	Line Item Reductions	
	exercises, deliver	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above	Director with pro	Previous Funding Type	Salary Hourly	IMS, other duties c % of Effort	Calculatio n (hours)	h Tribal NIMS prog Personnel Cost Amount	pram sustainment Primary Core	and compliance. Secondary Core		Funding			Descriptions on how it w
	CATEGORY	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.)	Purchase Type Sustainment	Previous Funding Type Other	Salary Hourly 38.2	IMS, other duties c	Calculatio n (hours) 2,080.00	Personnel Cost Amount \$ 13,120.00	pram sustainment Primary Core	and compliance. Secondary Core		Funding	\$13,120.00		Descriptions on how it v
	CATEGORY	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above	Director with pro	Previous Funding Type Other	Salary Hourly	IMS, other duties c % of Effort 65%	Calculatio n (hours) 2,080.00	Personnel Cost Amount \$ 13,120.00	pram sustainment Primary Core	and compliance. Secondary Core		Funding			Descriptions on how it w
	exercises, deliver CATEGORY Fringe Benefits	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.)	Purchase Type Sustainment	Previous Funding Type Other	Salary Hourly 38.2	IMS, other duties c % of Effort 65%	Calculatio n (hours) 2,080.00 2,080.00	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07	pram sustainment Primary Core	and compliance. Secondary Core		Funding	\$13,120.00 \$1,340.07		Descriptions on how it w
nt	CATEGORY Fringe Benefits Fringe Sub Total	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.)	Director with pro	Previous Funding Type Other Other	Salary Hourly 38.2 27.07	IMS, other duties c % of Effort 65% 9%	Calculatio n (hours) 2,080.00 2,080.00	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ - \$ - \$ 14,460.07	Primary Core Capability	and compliance. Secondary Core Capability	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00		Descriptions on how it w
EC	CATEGORY Fringe Benefits Fringe Sub Total	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.)	Director with pro	Previous Funding Type Other Other	Salary Hourly 38.2 27.07	IMS, other duties c % of Effort 65% 9%	Calculatio n (hours) 2,080.00 2,080.00	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ - \$ - \$ 14,460.07	Primary Core Capability	and compliance. Secondary Core Capability	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00 \$0.00	Reductions	Descriptions on how it w
EC	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.)	Director with pro	gram and tribal co	Salary Hourly 38.2 27.07 DELIVERABLES	IMS, other duties c % of Effort 65% 9%	Calculatio n (hours) 2,080.00 2,080.00 - LL BE USED	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 14,460.07 TO ENSURE ITT	Primary Core Capability	and compliance. Secondary Core Capability	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00 \$0.00	Reductions	Line Item Reductions
EC	CATEGORY CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE HERE	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) 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)	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type	Previous Provious Other Other Other Other Previous Previous Funding Type	Salary Hourly 38.2 27.07 ELIVERABLES Category of Each Travel	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 - - LL BE USER	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 1,4460.07 DTO ENSURE IT Cost for each Trip	Primary Core Capability	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00 \$0.00 \$14,460.07 Total Budget	Reductions	Line Item Reductions Descriptions on how it w
E C ve H	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN 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 ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVEL MUST BE LINE ITEMED OUT ON THE TRAVEL ALL TRAVE TAYS THIS IS A DEWOND NON-COMPLIANCE) TRAVELOWN	Director with pro- Purchase Type Sustainment Sustainment DETAIL THE P Purchase Type Select Type Sustainment	gram and tribal co Previous Funding Type Other Other Other OSITIONS AND D Previous Funding Type Other	Salary Hourly 38.2 27.07 DELIVERABLES	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 -	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 14,460.07 TO ENSURE IT(Cost for each	Primary Core Capability	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00 \$0.00 \$14,460.07	Reductions	Line Item Reductions Descriptions on how it w
E C	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) 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)	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type	gram and tribal co Previous Funding Type Other Other Other Previous Previous Funding Type Other Other Other	Salary Hourly Salary Hourly 38.2 27.07 Category of Each Travel Training	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 LL BE USED Total Trips	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 14,460.07 DTO ENSURE ITI Cost for each Trip	Primary Core Capability 	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120,00 \$1,340,07 \$0,00 \$14,460,07 Total Budget \$8,000,00 \$6,000,00 \$3,000,00	Reductions	Line Item Reductions Descriptions on how it w
EC /e F	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above Frence Personnel Costs ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUB TROUBDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) Tribal Outreach: ICS Class Delivery Tribal Outreach: Exercise Delivery	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type Sustainment Sustainment	gram and tribal co Previous Funding Type Other Other Other Previous Previous Funding Type Other Other Other	Salary Hourly 38.2 27.07 Category of Each Travel Training Exercise	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 - - - Total Trips - 8 6	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 1,4460.07 > TO ENSURE IT Cost for each Trip	Primary Core Capability MS LISTED WIL Total Cost	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120.00 \$1,340.07 \$0.00 \$14,460.07 Total Budget \$8,000.00 \$6,000.00 \$3,000.00 \$0.00	Reductions	Line Item Reductions
EC /e F	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above Frence Personnel Costs ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUB TROUBDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) Tribal Outreach: ICS Class Delivery Tribal Outreach: Exercise Delivery	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type Sustainment Sustainment	gram and tribal co Previous Funding Type Other Other Other Previous Previous Funding Type Other Other Other	Salary Hourly 38.2 27.07 Category of Each Travel Training Exercise	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 - - - Total Trips - 8 6	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 1,4460.07 > TO ENSURE IT Cost for each Trip	Primary Core Capability MS LISTED WIL Total Cost 8,000.00 6,000.00 - -	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120,00 \$1,340,07 \$0,00 \$14,460,07 Total Budget \$8,000,00 \$3,000,00 \$0,00 \$0,00 \$0,00	Reductions	Line Item Reductions
EC ve F	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above Free Costs ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) Tribal Outreach: ICS Class Delivery Tribal Outreach: Exercise Delivery	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type Sustainment Sustainment	gram and tribal co Previous Funding Type Other Other Other Previous Previous Funding Type Other Other Other	Salary Hourly 38.2 27.07 Category of Each Travel Training Exercise	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 - - - Total Trips - 8 6	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 1,4460.07 > TO ENSURE IT Cost for each Trip	Primary Core Capability MS LISTED WIL Total Cost	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120.00 \$1,1340.07 \$0.00 \$14,460.07 Total Budget \$8,000.00 \$6,000.00 \$3,000.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Line Item Reductions
E C	CATEGORY Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above Free Costs ITERC Director (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) ITERC Program Administrator (Tribal NIMS & Maint.) EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN THIS IS A NEW REQUIREMENT TO PROVIDE ALL INFORMATION ON TRAVEL. ALL TRAVEL MUM PROVIDED. ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE) Tribal Outreach: ICS Class Delivery Tribal Outreach: Exercise Delivery	Director with pro- Purchase Type Sustainment Sustainment NDETAIL THE P Purchase Type Select Type Sustainment Sustainment	gram and tribal co Previous Funding Type Other Other Other Previous Previous Funding Type Other Other Other	Salary Hourly 38.2 27.07 Category of Each Travel Training Exercise	IMS, other duties c % of Effort 65% 9% NARRATIVE WI Travel Reference # from	Calculatio n (hours) 2,080.00 2,080.00 - - - Total Trips - 8 6	Personnel Cost Amount \$ 13,120.00 \$ 1,340.07 \$ - \$ 1,4460.07 > TO ENSURE IT Cost for each Trip	Primary Core Capability MS LISTED WIL Total Cost 8,000.00 3,000.00 - - -	and compliance. Secondary Core Capability LBE COMPLETEI Primary Core	AEL Ref #	Funding Source	\$13,120,00 \$1,340,07 \$0,00 \$14,460,07 Total Budget \$8,000,00 \$3,000,00 \$0,00 \$0,00 \$0,00	Reductions	Line Item Reductions

ICS Classes: ICS 100 through 402 series, delivered at tribal locations, open to all (tribal and non-tribal). HSEEP Exercises: Operational Coordination and Communications. Delivered at tribal locations and integrating local, non-tribal jurisdictions. Tribal Planning and Technical Assistance: Planning and technical assistance to the tribes, upon request, TBD.

	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
P	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												
17			Sustainment		12.00	375.00	4,500.00					\$4,500.00		
18			Sustainment		1.00	500.00	500.00					\$500.00		
19			Sustainment		1.00	200.00	200.00					\$200.00		
20		Office Supplies	Sustainment		1.00	200.00	200.00					\$200.00		
21		Indirect @ 17.8%	Sustainment	Other	1.00	16,606.00	16,606.00					\$16,606.00		
Т	Planning Sub- Fotal	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAIN					\$ 22,006.00					\$22,006.00	\$0.00	

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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITTIES - TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.												
22							s -					\$-		
23							\$-					\$		
24							\$-					\$		
25							\$-					\$		
26							\$-					\$-		
27							\$-					\$-		
	Organization Sub-Total						\$ -					\$-	-	

ORGANZATION COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAIL THE POSITIONS AND DELIVERABLES. NARRATIVE WILL BE USED TO ENSURE ITEMS LISTED WILL BE COMPLETED IN THE GRANT CYCLE -

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE													
	Equipment	ACCEPTED BASED UPON NON-COMPLIANCE) SEE YOUR													
	-4-6	GUIDANCE FOR DESCRIPTION OF ORGANIZATION - NO													
		TRAVEL IN THIS CATEGORY - Must an AEL													
28								\$ -					\$-		
29								\$ -					\$ -		
30								\$ -					\$ -		
31								\$ -					\$ -		
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EQUIPM		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAI	NE IN DETAIL TH	E POSITIONS AN	D DELIVERAB	LES. NARRATIVI	WILL BE U	ISED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE GRAN	T CYCLE -			4
39 EQUIPM Narrative		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLA	NE IN DETAIL TH	E POSITIONS AN	ID DELIVERAB	LES. NARRATIVI	E WILL BE U	\$- SED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLE	TED IN THE GRAN	T CYCLE -	\$ - \$ -		-

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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				-	-							
40										\$-		\$-		
41										\$-		\$-		
42										\$-		\$-		
43										\$-		\$-		
44										\$-		\$-		
45										\$-		\$ -		
46										\$-		\$-		
47										\$-		\$-		
48										\$-		\$-		
49										\$-		\$-		
	Training Sub- Total	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAIN								\$-		\$-	-	

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ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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)											-	
50										\$-		\$-		
51										\$ -		\$-		
52										\$-		\$-		
53										\$-		\$-		
54										\$ -		\$-		
55										\$-		\$-		
56										\$-		\$-		
57										\$ -		\$-		
	Exercise Sub- Total									s -		\$-	-	

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					s -	
All budgets require an email approval from the financial and/or grant manager						н — — — — — — — — — — — — — — — — — — —



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

		*	**Required Fields					**Required Fields						T							
		Funding	Purpose (Please note if	Departure	Destination	Travel Start	Travel End	No.	No.					Motor Pool			Public		Rental	Baggage	
Traveler's Name	Title	Source	travel is for training)	City	City	Date	Date	Days	Nights	Airfare	I	Hotel	Per Diem	Car	Mileage	Reg Fees	Trans	Parking	Car	Fees	Total
Dan Hourihan	Director, ITERC	SHSG	ICS Training	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	47	\$ 428.00
Dan Hourihan	Director, ITERC	SHSG	ICS Training	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	e,	\$ 428.00
Dan Hourihan	Director, ITERC	SHSG	ICS Training	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	e,	\$ 428.00
Dan Hourihan		SHSG	ICS Training	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	•	\$ 428.00
Dan Hourihan		SHSG	ICS Training	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$150.00	9	\$ 629.00
Dan Hourihan		SHSG	ICS Training	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$150.00	9	\$ 629.00
Dan Hourihan	Director, ITERC	SHSG	ICS Training	Sparks	TBD	TBD	TBD	4	3	\$ 372.00) \$	300.00	\$ 179.00					\$ 40.00	\$150.00	v 7	\$ 1,041.00
Dan Hourihan	Director, ITERC	SHSG	ICS Training	Sparks	TBD	TBD	TBD	4	3	\$ 372.00) \$	300.00	\$ 179.00					\$ 40.00	\$150.00	v 7	\$ 1,041.00
Dan Hourihan	Director, ITERC	SHSG	NSA, Homeland Security	Sparks	Wash. D.C.	Feb-18	Feb-18	4	3	\$ 650.00) \$	550.00	\$ 234.00					\$ 40.00		9	\$ 1,474.00
Dan Hourihan		SHSG	NSA, Homeland Security	Sparks	New Orleans, LA	16-Jun	20-Jun	4	3	\$ 650.00) \$	550.00	\$ 234.00					\$ 40.00		9	\$ 1,474.00
Daniel Thayer		SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$ 150.00	9	\$ 629.00
Daniel Thayer		SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$ 150.00	9	\$ 629.00
Daniel Thayer	THEIRO	SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$150.00	9	\$ 629.00
Daniel Thayer		SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$150.00	9	\$ 629.00
Daniel Thayer	Program Admin., ITERC	SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3	\$ 450.00) \$	300.00	\$ 179.00					\$ 40.00	\$ 200.00	9 7	\$ 1,169.00
Daniel Thayer	Program Admin., ITERC	SHSG	HSEEP Exercise	Sparks	TBD	TBD	TBD	4	3	\$ 450.00) \$	300.00	\$ 179.00					\$ 40.00	\$ 200.00	5	\$ 1,169.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	5	\$ 428.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	9	\$ 428.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	Ş	\$ 428.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	9	\$ 428.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	9	\$ 428.00
ITERC Staff	Misc.	SHSG	Technical Assistance	Sparks	TBD	TBD	TBD	3	2		\$	200.00	\$ 128.00						\$100.00	5	\$ 428.00
	Misc.	SHSG	Planning	Sparks	TBD	TBD	TBD	4	3		\$	300.00	\$ 179.00						\$150.00	9	\$ 629.00
	Misc.	SHSG	Planning	Sparks	TBD	TBD	TBD	4	3	\$ 320.00) \$	300.00	\$ 179.00						\$150.00	5	\$ 949.00
**You must complete the	required fields, the									\$ 3,264.00) \$ 6	5,700.00	\$3,896.00							5	\$ 17,000.00

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	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	U								
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/4/17								
1)	PROJECT TITLE:	Clark County EOC Enhar	ncements										
2)	Proposing/Lead Agency:	sing/Lead Agency: Clark County OEMHS											
3)	1º Project Manager Name/Title:	John Steinbeck	hn Steinbeck										
	1º Project Manager Contact Info:	Phone: (702) 455-5710	e: (702) 455-5710 Email: John.Steinbeck@clarkcountynv.gov										
4)	2 [°] Project Manager Name/Title:	Irene Navis											
	2° Project Manager Contact Info:	Phone: (702) 455-5715	Email: iln@clarkcountynv.gov										
5)	Finance/Grant Contact Name/Title:	nt Contact Name/Title: Karen Taylor											
	Finance/Grant Contact Info:	Phone: (702) 455-6183 Email: karent@clarkcountynv.gov											
6)	CLASSIFICATION - Check the primary intention of the Proposed Project: Choose one:												

Check the primary intention of the Proposed Project: נס CLASSIFICATION

NEW New; no grant-funded projects have recently (within 5 years) addressed this capability \bigcirc ENHANCE Will primarily expand or enhance the capability(s) of prior grant-funded projects \bigcirc Will primarily sustain capability or continue establishment effort in existing program SUSTAIN

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

The goal of this project is to enhance Clark County Emergency Management Operations by continuing to establish an efficient, cost effective Emergency Operations center for Level 2 and 3 activations as defined in Clark County's Emergency Operations Plan. CCOEM began the process of converting an existing training room to accommodate a primary EOC in FFY2013. A fully functioning EOC (Emergency Operations Center) and JIC (Joint Information Center) will support all mission areas as well as the 5 core capabilities which comprise the Nevada Commission on Homeland Security Commission priorities. The EOC will act as a Multi-Agency Coordination Center (MACC) to support incident command response needs requiring multiple operational periods of support by multiple agencies. This facility is used for planned events such as New Years Eve, as well as unplanned incidents and emergencies such as flooding within the Las Vegas Urban Area. The facility is also used to support full-scale exercises, multi-agency training, and meetings of the Urban Area Working Group. Support functions that take place within the EOC/MACC maintain of situational awareness, resource coordination, public information and warning, damage assessment, and other essential functions that aid in preparedness, response, recovery, and mitigation.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Public Information and Warning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The two core capabilities chosen, Operational Coordination, and Public Information and Warning, are two of the key functions which are the responsibility of the Clark County MACC (EOC) during a planned or emergency event. This next phase of development of the EOC will focus on the technological infrastructure to ensure redundancy of power, telecommunications, and other technology to maintain 24/7 availability of the facility. The Clark County EOC is arranged by Emergency Support functions to maintain operational coordination, public information and warning, as well as situational awareness, resource coordination, damage assessment, and other essential functions that aid in maintaining

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	U
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17
PRO	JECT TITLE REFERENCE:	Clark County EOC Enhancements		
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS	5) Priority and Urban Area	Strategy
	NCHS FFY17 Priority	#4 - OPERATIONAL COORDINATION		
	Urban Area Strategy Priority	#4 - OPERATIONAL COORDINATION		
	Existing staff will manage this project, as well as any vendor contracts necessary to procure, install, and construct the necessary equipment and infrastructure needed to complete this project.			t the
FIELD IS LIMITED TO VISIBLE TEXT BOX				

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

1	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County OEMHS	County	John Steinbeck
12(b)			
12(c)			

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

Several funding sources have already been leveraged to complete various phases of this ongoing project, including EMPG, EPWG, and HSWG M&A. Should grant funding not be available, alternative funding sources will be pursued, including Clark County General or Capital funds. No County funds have currently been budgeted for this project.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT
Project Proposal for FFY17 HSGP Funding Description	Date Subm

U

PROJECT TITLE REFERENCE:

Clark County EOC Enhancements

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
			\$ 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
Procurement and installation of back-up generator, including construction of a pad and fencing, electrical panel and wiring upgrades, security surveillance equipment, networking equipment, as well as,status boards and viewing monitors for the MACC and JIC.	\$ 550,000.00		\$ 550,000.00
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	Charles suitable	· · · · ·
	LV-UASI	State-wide	SubTotal
		State-wide	SubTotal \$ 0.00
	LV-UASI	State-wide	
			\$ 0.00
			\$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:UProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/4/17

PROJECT TITLE REFERENCE:

Clark County EOC 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	Initiate Procurement Process	11/01/17	02/28/18	4
3	BCC approval of vendor contracts, as required	02/28/18	05/30/18	3
4	Issuance of purchase orders and receipt of equipment	06/01/18	07/30/18	2
5	Installation of equipment inside facility	08/01/18	09/30/18	2
6	Acquisition of any required permits, approvals, and construction of infrastructure outside facility	06/01/18	12/01/18	6
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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 Clark County MACC supports all 5 of the Commission priorities.

The Clark County EOC/MACC would play an essential role in supporting incident commanders, and providing resources, information and inter-agency coordination the case of a terrorist event, including a complex coordinated attack within the tourism corridor, which has emerged as a primary threat in the Las Vegas Urban Area THIRA.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.

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

Yes, it can be reduced and yes, it is scalable to the extent that key pieces of interdependent infrastructure would have to be installed at the same time, while others could be deferred to a later phase.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	U
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17
PROJ	ROJECT TITLE REFERENCE: Clark County EOC Enhancements			
	d. Can this project continue w	ithout funding? YES 💽 NO 🔵 Explain below.		
and "e" are limitied to visible text box size	becomes available.	ve to be identified, or the project could be delayed until suc	h time as sufficient U	ASI funding
18 Fields "d" and "e" are lim	The Las Vegas Urban Area prov prevent, respond to, or recover f would impact local, regional, and	measurable "state-wide" benefit? YES (•) NO () Explain be ides significant economic benefit to the entire state's finance rom acts of terrorism or other emergencies will result in dela d state financial stability.	ial stability. Reduced ayed socioeconomic	recovery that

- **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	V
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/5/17
1)	PROJECT TITLE:	NLV OEM Vehicle and Es	stablishment of MCI Vehicle	-	-
2)	Proposing/Lead Agency:	North Las Vegas	orth Las Vegas		
3)	1° Project Manager Name/Title:	Carlito Rayos	Carlito Rayos		
	1º Project Manager Contact Info:	Phone: (702) 633-1069	Email: rayosc@cityofnorthlasveg	as.com	
4)	2 [°] Project Manager Name/Title:	Solome Barton			
	2 [°] Project Manager Contact Info:	Phone: (702) 633-1125	Email: bartons@cityofnorthlasve	gas.com	
5)	Finance/Grant Contact Name/Title:	George Arting			
	Finance/Grant Contact Info:	Phone: (702) 633-1119	Email: artingg@cityofnorthlasve	gas.com	
6)	CLASSIFICATION - Check the p	primary intention of the Pl	roposed Project:	(Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	\bigcirc
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

They City of North Las Vegas proposed to use UASI funds to purchase a new vehicle and re-purpose the existing vehicle, which was purchased with UASI funds in 2006, in to a Mass Casualty Incident platform. This enhancement project will significantly increase preparedness and response capability to the North end of the valley and support events near or at the Las Vegas Motor Speedway where NLVFD would most certainly be first on scene. These events such as NASCAR, Aviation Nation and Electric Daisy Carnival. We will enhance preparedness and response capabilities related to hazardous material, inter-modal transfer mishaps and major transportation incidents along the I-15 corridor and the Union Pacific Railway. North Las Vegas has multiple high hazard facilities and the large presence critical facilities conducting operations involving natural gas and liquid fuel commodities. Furthermore, if awarded this proposal would allow for better support and augmentation to several existing programs to include DHS's BioWatch Program, the Southern Nevada Unified Command Type III Incident Management Team, FEAMS Urban Search and Rescue;NV Task Force 1 and the CBRN Task Force.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	On-Scene Security, Protection, and Law Enforcement [Mission Area: RESPONSE]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Operational Coordination: This vehicle will help in the establishment and maintenance of unified command and coordinate operational structures and processes that appropriately integrate all critical stakeholders and supports the execution of core capabilities at events and incidents with a valley-wide and state-wide economic impact.

On Scene Security, Protection and Law Enforcement: Through this proposal North Las Vegas can better ensure a safe and secure environment through law enforcement and related security and protection operations for people and communities adjacent to the North Las Vegas Motor Speedway and also for response personnel engaged in lifesaving and life-sustaining operations.

This proposal also will contribute to the materialization of the additional Secondary Core Capabilities: Critical Transportation, Environmental Response/Health and Safety, Mass Search and Rescue Operations Fatality Management, Mass Care, Public Health/Health and Emergency Medical Services

Nevada Homeland Security Grant Program (HSGP) PROJE		PROJECT ID:	V	
Project Proposal for FFY17 HSGP Funding Description Date Submitted			4/5/17	
PROJECT TITLE REFERENCE: NLV OEM Vehicle and Establishment of MCI Vehicle				
10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed				

NCHS FFY17 Priority	#4 - OPERATIONAL COORDINATION
Urban Area Strategy Priority	#4 - OPERATIONAL COORDINATION

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

NLV OEM will purchase a vehicle from a local vendor through the competitive bidding process or existing government contract. NLV OEM will then coordinate with vendor to up-fit the vehicle with required emergency vehicle equipment utilizing the same process. NLV OEM will contract with vendors and suppliers as needed in order to re-purpose the existing vehicle to meet the requirements of a Mass Casualty Incident vehicle. NLV OEM will conduct training and exercise on the equipment prior to deploying to the field in support of a pre-staged events or incident responses.

FIELD IS LIMITED TO VISIBLE TEXT BOX

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	City of North Las Vegas Office of Emergency Management	Clark, North Las Vegas, NV	Carlito Rayos
12(b)			
12(c)			

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

If approved, the City of North Las Vegas will assume costs of maintenance, supplies and incidental equipment. This project is not currently budgeted in and capital improvement projects.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **PROJECT ID:** V Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/5/17

PROJECT TITLE REFERENCE:

NLV OEM Vehicle and Establishment of MCI Vehicle

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubT
N/A	\$ 0.00	\$ 0.00	\$ 0.
		Chata wida	Cuba
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubT
N/A	\$ 0.00	\$ 0.00	\$ 0.
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubT
This amount includes the purchase of the new vehicle, the up0-fitting with emergency vehicle equipment and the retrofitting/re-purposing of the existing vehicle.	\$ 85,000.00	\$ 0.00	\$ 85,0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubT
N/A	\$ 0.00	\$ 0.00	\$ 0.
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubT
N/A	\$ 0.00	\$ 0.00	\$ 0.
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubT
N/A	\$ 0.00	\$ 0.00	\$ 0.
15g) PROJECT TOTALS	LV-UASI	State-wide	тот

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	V
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

NLV OEM Vehicle and Establishment of MCI Vehicle

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	Initiate procurement process	10/01/17	03/31/18	6
3	Secure emergency vehicle up-fitting	04/01/18	10/01/18	6
4	Conduct retrofit and repurposing of existing vehicle	04/01/18	10/01/18	6
5	Conduct training and exercises	11/01/18	01/01/19	2
6				
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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 I-15, 215 beltway transportation corridors, rail line, inter-modal transfer stations and commodity pipelines are of the busiest and most economically viable regions in Nevada. That coupled with the Las Vegas Motor Speedway, Nellis Air Force Base and their on-going special events make up a significant amount of travel and tourism. We also have the the Nevada Field Office for the Department of Energy within our jurisdiction and multiple high hazard facilities. The State of Nevada and the Greater Las Vegas Valley have a vested interested in protecting this area. Although the Speedway itself is in unincorporated Clark County, NLVFD would certainly be first in scene and certainly a member of the unified command. This proposal will make North Las Vegas better prepared and equipped to respond to and stabilize a terrorist attack on any and all of these key resources, critical infrastructures and symbolic venues/events.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Yes - Operational Coordination: This proposal will help in the establishment and maintenance of unified command and coordinated operational structures and processes that appropriately integrate all critical stakeholders and supports the execution of core capabilities at events and incidents that would result in a valley-wide and state-wide economic impact. The Greater Las Vegas Valley only has one MCI vehicle, CCFD, this proposal will double our regional preparedness and response capability, specifically in the North end of town where the aforementioned planned events occur and where the critical infrastructure and key resources exist.

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

A new vehicle needs to be purchased and upfitted with emergency vahicle equipment in order to re-purpose the existing vehicle and establishing a MCI platform. There are no local funds available and there is no existing capital improvement projects that will fund this project.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	V		
	Project Proposal for FFY17 HSGP Funding Description Date Submitted 4					
PRO	ECT TITLE REFERENCE:	NLV OEM Vehicle and Establishment of MCI Vehicle				
	d. Can this project continue w	thout funding? YES 🔵 NO 💽 Explain below.				
are limitied to visible text box size	No, this project cannot come to t					
imiti	e. Does this project provide a	neasurable "state-wide" benefit? YES 🔵 NO 💽 Explain be	low.			
Fields "d" and "e" are l	N/A					

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

N/A

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	W	
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	3/21/17	
1)	PROJECT TITLE:	Statewide Continuity of C	perations Sustainment	-		
2)	Proposing/Lead Agency:	Washoe County Emerger	Washoe County Emergency Management and Homeland Security			
3)	1° Project Manager Name/Title:	Aaron R. Kenneston				
	1º Project Manager Contact Info:	Phone: (775) 337-5898	Email: akenneston@washoecou	nty.us		
4)	2 [°] Project Manager Name/Title:	N/A	N/A			
	2 [°] Project Manager Contact Info:	Phone:	hone: Email:			
5)	Finance/Grant Contact Name/Title:	Larry Davis				
	Finance/Grant Contact Info:	Phone: (775) 337-5859	Email: Idavis@washoecounty.us	3		
6)	CLASSIFICATION - Check the r	primary intention of the P	roposed Project:		Choose one:	

NEW New; no grant-funded projects have recently (within 5 years) addressed this capability ENHANCE Will primarily expand or enhance the capability(s) of prior grant-funded projects SUSTAIN Will primarily sustain capability or continue establishment effort in existing program

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

To sustain operational coordination through continuity of operations (COOP) and continuity of government (COG) for agencies Statewide.

This is a request to continue sustainment efforts 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 third 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.

This phase will focus on sustainment efforts in Northern and Southern Nevada and secure the continued use of the planning tool through 2019..

8)

PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability: Operational Coordination [Mission Area: ALL]	
Secondary Core Capability:	Planning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. 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. COOP was specifically listed in prior years guidance and Target Capabilities. It is no longer listed as a separate Capability; however, in the last grant cycle it was considered to be Operational Coordination.

	Nevada Homelan	d Security Grant Program (HSGP)	PROJECT ID:	W		
	Project Proposal for FFY17 HSGP Funding Description Date Submitted 3/2					
PRC	JECT TITLE REFERENCE:					
10)	PRIORITIES - Identify applical Objective to be addressed	ole Nevada Commission on Homeland Security (NCHS)	Priority and Urban Area	Strategy		
	NCHS FFY17 Priority	#4 - OPERATIONAL COORDINATION				
	Urban Area Strategy Priority					
×	The project begins with sustain urban, public jurisdictions, and	ng the Statewide Task Force consisting of key stakehol the private sector.	lders from state, local, rura	I, tribes,		
Then, selection of this year's COOP planning vendor. Workshops will be held in two locations around the State to COOP/COG planning process. Plans-writers will work one-on-one with jurisdictions and agencies to develop the planning includes the City of North Las Vegas and the City of Sparks.						
щ	The collaborative website of NVstateCOOP.org will be continued along with the web-based COOP planning tool for resour Best practices are being integrated into the plans, and outreach efforts conducted throughout the State.					
FIELD IS LIMITED TO VISIBLE TEXT BOX		stateCOOP.org will be continued along with the web-ba		or resource		

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Emergency Mgmt & Homeland Security	Washoe County	Aaron R. Kenneston
12(b)			
12(c)			

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

×	Upon completion of this project, individual plan sustainment will be conducted by state-level and local agency planners.					
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FIEL						

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) PROJEC	TID: V	V
Project Proposal for FFY17 HSGP Funding Description Date Subr	nitted 3/21	/17

PROJECT TITLE REFERENCE:

Statewide Continuity of Operations Sustainment

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Establish Task Force, hire vendors, plan workshops and sustainment activities. (Includes planning tool, software support, logistics vendor, and planning consultant)			
		\$ 125,000.00	\$ 125,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
N/A			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
N/A			\$ 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-523 Continuity Plans for Cyber Incidents)			
(Includes venue space, trainers, and working lunch).		\$ 20,000.00	\$ 20,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	\$ 20,000.00 State-wide	\$ 20,000.00 SubTotal
	LV-UASI		
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI		SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] N/A		State-wide	SubTotal \$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] N/A 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]		State-wide	SubTotal \$ 0.00 SubTotal

Fields are limitied to visible text box size

15)

Nevada Homeland	PROJECT ID:	W				
Project Proposal for	Date Submitted	3/21/17				
PROJECT TITLE REFERENCE:	Statewide Continuity of Operations Sustainment					
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	Accept funding through Boards of County Commissioners	10/17/17	12/19/17	2
3	Establish Task Force		02/01/17	1
4	Hire COOP Vendor		03/15/17	1
5	Conduct Plan creation and refinement	04/01/17	11/30/19	18
6	Conduct Workshops	05/01/17	09/15/17	4
7	Complete sustainment training activities	11/20/19	12/31/19	1
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,

This project is all about preventing the failure of government after a terrorism event (but it is applicable to all-hazards, of course). The initiative ensures orders of succession, alternate facilities, and devolution planning.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.

Yes,

The Commission 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.

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

Yes,

The most essential piece 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.

	Nevada Homeland Security Grant Program (HSGP) PROJECT ID: W						
	Project Proposal for FFY17 HSGP Funding Description Date Submitted 3/21/17						
PROJ	ECT TITLE REFERENCE:	Statewide Continuity of Operations Sustainment					
ĺ	d. Can this project continue wi	thout funding? YES 🜔 NO 💽 Explain below.					
"e" are limitied to visible text box size	No, The current COOP Tool expires	in August 2017.					
mitie	e. Does this project provide a	neasurable "state-wide" benefit? YES 💽 NO 🔵 Explain bel	ow.				
Fields "d" and "e" are lin	Yes, Benefit is measured in numbers	of jurisdictions and agencies which can continue to operate	after a catastrophic	event.			

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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 project provides benefit to the entire State of Nevada- jurisdictions and agencies large or small, urban, rural, and tribal.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LINE	ITEM	DETAIL	BUD	GET

			ana ana gon	LI	NE ITEM I	DETAIL BUDO	GET							1	
	Agency Name		Name & Contact #	Aaron P. Kenty	eston	Grant Manager Name & Contact #	Larry Davis	ldavis@washoec	county.us (775)	337-5859					
	IJ TITLE:	Statewide Continuity of Operations													
		One Budget Per Funding Stream					-				ł				
		SHSP													
_ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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ine #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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larrative		PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference		VE WILL BE USE Cost for each Trip	D TO ENSURE IT	EMS LISTED WI Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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larrative	CATEGORY Travel Planning Training Exercise Equipment	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) Training Workshop -1	Type Select Type	Funding Type		Travel Reference # from		Cost for each		Primary Core Capability		Funding	Total Budget		Descriptions on how it will
larrative	CATEGORY Travel Planning Training Exercise Equipment	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) Training Workshop -1 Airline expense (3 airline tickets @ \$400 ea)	Type Select Type Sustainm ent	Funding Type Other Federal		Travel Reference # from		Cost for each	Total Cost	Primary Core Capability Operational Coordination		Funding			Descriptions on how it will
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The project will host two training workshops. One in Southern Nevada with travel of three Northern attendees, and one in Northern Neada with no travel required. The project will also host two Planning meetings in Southern Nevada with a cumulative total of three Northern Nevada attendees.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	W
	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														
17		Contractor- Continuation of Statewide access to Planning Portal	Sustainm ent	Other Federal		1.00	100,000.00		Operational Coordination	Planning			\$100,000.00			1
18			Sustainm			1.00	20,000.00		Operational	Planning			\$20,000.00			
19		Project Supplies (Paper, printing, etc.)		Federal		1.00	5,000.00		Operational Coordination	Planning			\$5,000.00			1
20				Other												1
21								-								1
	Planning Sub- Total							\$ 125,000.00					\$125,000.00	\$0.00		I
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This funds continued use of the BOLD Planning tool which contains the Statewide Continuity of Operations (COOP) plans, it adds two more jurisdictions (City of North Las Vegas and UNR) and addresses project supplies and logistics.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.													
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	Organization Sub-Total				<u>.</u>			\$-					\$-	-	

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CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
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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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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					-	-								
40		Training Contractor for two, one-day training workshops (to address COOP tool use and IS-523 Continuity Plans for Cyber Incidents)	Sustainm ent		YES	YES	1.00		Operational Coordination	Planning	\$ 14,742.00		\$ 14,742.00			
41		Lunch of 1 training workshop in LV (40 attendees x \$19 GSA Rate)		Other Federal			40.00	19.00			\$ 760.00		\$ 760.00			
42		Lunch of 1 training workshop in LV (40 attendees x \$13 GSA Rate)		Other Federal			40.00	13.00			\$ 520.00		\$ 520.00			
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48											\$ -		\$ -			
49											\$-		\$ -			
	Training Sub- Total										\$ 16,022.00		\$ 16,022.00	-		

The project supports training for Statwide participants to learn and sustain continuity knowledge, both training sessions will include a working lunch so that participants do not need to leave the venue.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												_	
50											\$-		\$-		
51											\$-		\$-		
52											\$-		\$-		
53											\$-		\$ -		
54											\$-		\$-		
55											\$-		\$-		
56											\$-		\$ -		
57											\$-		\$ -		
	Exercise Sub- Total										\$		s -	-	

Narrative HERE							Total Original Budget	Line Item Reductions Total	
							\$ 145,000.00	\$ -	
All budgets require an	email approval from the financial and/or grant n	nanager							

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:XProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/4/17

PROJECT TITLE: Northern Nevada Bomb Technicians Task Force Operational Coordination Training/Exercise 1) 2) **Proposing/Lead Agency:** Tahoe Douglas Fire Protection District 1º Project Manager Name/Title: Todd Moss/ BC/Commander 3) 1º Project Manager Contact Info: Phone: (775) 220-9363 Email: tmoss@tahoefire.com 4) 2° Project Manager Name/Title: Jim Antti /Assistant Chief 2° Project Manager Contact Info: Phone: (775) 721-8635 Email: jantti@tahoefire.com 5) Finance/Grant Contact Name/Title: Carrie Nolting / Accounting Specialist Phone: (775) 588-3591 Email: cnolting@tahoefire.com Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	\odot
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Program Objective – The program objectives achieved with the initial grant were to build out, unite, sustain and coordinate the state's bomb squads under a statewide program. The Northern Nevada Bomb Technicians Task Force (NNBTTF) is comprised of Tahoe Douglas Bomb Squad, Consolidated Bomb Squad, Elko Bomb Squad, ATF, and FBI.

The current program objective is to provide the technicians of the NNBTTF with the training necessary to maintain the previously achieved response coordination and readiness levels to meet the requirements of emerging threats and changing response abilities/requirements. Emphasis within this objective provides for multiple simultaneous response activities to maintain our unified and coordinated operational structure and process. This will also integrate the NNBTTF teams to work in concert during times of a large incident or coordinated terrorist attacks.

Submissions for this Investment Justification have all been aimed at improving the state's bomb squads' response to emerging threats and to improve the ability of our bomb squads to mitigate multiple incidents.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	NONE
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX .

Bomb squads are one of the unique first responders to protect critical infrastructure to include soft targets such as hotels and public places in addition to public transportation. This investment ensures dissemination and sharing of information between the state's bomb squads, emphasizing statewide interoperability and standardization of practices 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.

	Novada Homoland	600	irity Grant Program (HSC	20)	PROJECT ID:	V		
				-		^		
	Project Proposal for	r FFY:	7 HSGP Funding Descrip	tion	Date Submitted	4/4/17		
PROJ	ECT TITLE REFERENCE:	North	ern Nevada Bomb Technicians Tasł	<pre>K Force Operation</pre>	nal Coordination Trai	ining/Exercise		
10)	PRIORITIES - Identify applicable Objective to be addressed	le Nev	da Commission on Homeland Secu	ırity (NCHS) Prio	rity and Urban Area	a Strategy		
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINAT	ION				
	Urban Area Strategy Priority		#4 - OPERATIONAL COORDINAT	ION				
			project will be accomplished, identifying w sustainment of previously awarded					
	2007-2010			C C				
XT BOX	capabilities. (All Four Accredited		ssociation annual state IED defeat a Bomb Squads)	planning meeting	gs, revise bylaws, ini	tiative, and		
SIBLE TE	Enhance the developed common Bomb Squads)	n state	vide tactical procedures for bomb so	quads and equip	ment- (All Four Accre	edited Nevada		
FIELD IS LIMITED TO VISIBLE TEXT BOX	Promote interoperability while training on advanced IED's/WMD's techniques and continue advanced education. Identify training, equipment, and technology differences to improve future interoperability of squads -(Outside training contractors to provide NNBTTF training and evaluation)							
HELD IS LIN			o evaluate the NNBTTF's interopera Commanders and FBI to evaluate)		lities when respondir	ng to		

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Tahoe Douglas Fire Protection District	Douglas County, NV and surrounding area	BC Todd Moss
12(b)	Washoe County Sheriff's Office	Washoe County, NV and surrounding area	Sgt Rob Bowlin
12(c)	Elko Police Department	Elko County, NV and surrounding area	Detective/Corporal Rick Moore

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

All of the jurisdictions sponsoring Northern Nevada Bomb Technicians Task Force bomb squads have a vested interest in protecting the state's citizens and visitors. Theses jurisdictions have invested considerable time and personnel to achieve national Homeland Security capabilities and are committed to future support of equipment and training needs of their bomb squads through general fund expenses.



14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

20 0/10/70	otate mac /		
0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		-
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:XProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/4/17

PROJECT TITLE REFERENCE:

Northern Nevada Bomb Technicians Task Force Operational Coordination Training/Exercise

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
Reestablish the Nevada Bomb Squad Association annual state IED defeat planning meetings. The Nevada Bomb Squad Association provides for the statewide coordination of the four accredited Nevada Bomb Squads. Annual meetings provide for coordination of equipment, training and response procedures within the state. Annual updates to the organizations by-laws and squad coverage areas, through the development of mutual aid agreements, provide for bomb squad response coverage in those areas not directly serviced by one of Nevada's four bomb squads. Funding is for travel to attend planing meetings and training/exercise sessions		\$ 19,132.00	\$ 19,132.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
N/A			\$ 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
All training courses represent maintenance of current skill levels and additional capabilities for all Task Force Bomb Squads: Interoperability and Response to Advanced IED Training Course - \$45,000			
		\$ 45,000.00	\$ 45,000.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	\$ 45,000.00 State-wide	\$ 45,000.00 SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Provide for one task force training exercise within the grant period	LV-UASI		\$ 45,000.00 SubTotal \$ 0.00
Provide for one task force training exercise within the grant period	LV-UASI		SubTotal
		State-wide	SubTotal \$ 0.00
Provide for one task force training exercise within the grant period 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] Tahoe Douglas Bomb Squad - 8 Technicians Consolidated Bomb Squad - 7 Technicians Elko Bomb Squad - 4 Technicians		State-wide	SubTotal \$ 0.00 SubTotal

15)

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	Х
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

PROJECT TITLE REFERENCE:

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

Northern Nevada Bomb Technicians Task Force Operational Coordination Training/Exercise

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

	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	09/01/17	10/01/17	1
3	Schedule and provide training	10/01/17	02/28/18	24
4	Schedule Planning Meetings and Exercise	10/01/17	10/01/17	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.
Statewide Coordination and training of bomb squads to deter or defeat terrorism incidents involving IED's.
b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.
By maintaining our unified and coordinated operational structure and process which enhances the Nevada Bomb Squads interoperability capabilities.
c. Can this project funding request be reduced? Is it scaleable? YES 🔘 NO 💽 Explain below.
It is crucial for all NNBTTF assets to attend the training to assess interoperability.

4

Nevada Homelan	d Security Grant Program (HSGP)	PROJECT ID:	X
Project Proposal fo	or FFY17 HSGP Funding Description	Date Submitted	4/4/17
ECT TITLE REFERENCE:	Northern Nevada Bomb Technicians Task Force Ope	rational Coordination Trair	ning/Exerc
d. Can this project continue	without funding? YES 🔵 NO 💿 Explain below.		
The bomb squads of the NNBT Sheriff, or Fire Departments).	TF are part-time squads that have limited funds allocate	ed from their host agency (Police,
	a measurable "state-wide" benefit? YES () NO () Explai Bomb Squads to coordinate and asses our policies and	n below.	
~	se indicate the participation level in completing the 20 ipated in the 2016 Threats and Hazards Identification R		
	rticipated in the 2016 Threats and Hazards Identification		
ADDITIONAL COMMENTAN	RY - Please indicate any additional project commentai ext box	ry you feel may be import	ant.
The top three Core Capability	Targets for Operational Coordination are:		
	ctional and integrated communications among appropria ed States in accordance with established protocols.	te entities to prevent initial	or follow-
2. Establish and maintain parti coordination.	nership structures among Protection elements to support	t networking, planning, and	1
3. Establish protocols to integr coordination with Federal ager	ate mitigation data elements in support of operations wit ncies.	hin all states and territories	s and in

It is believed that this grant proposal is in alignment with this Core Capability.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original O Amended

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LINE	ITEM	DETAI	L BUDGET
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			manage		E ITEM D	ETAIL BUDG	TEL.					1	1	r	
	Agency Name		Name & Grant Manager Contact B/C Todd Moss (775) 220- Name & # 9363 Contact # Assistant Chief Jim Antti (775) 721-8635												
	IJ TITLE:	Northern Nevada Bomb Technician Tas	sk Force												
	10 111223	One Budget Per Funding Stream													
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. A personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$-		
2								\$-					\$-		
3							<u> </u>	\$ -					\$ -		l
4	Personnel							\$-					\$ -		
	Sub-Total							\$ -					\$ -	\$-	
ERSON	NEL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEA	SE EXPLAI	NE IN DETAII	THE POSITIC	ONS AND DELIVER	RABLES. NA	RRATIVE WILL	BE USED TO EN	SURE ITEMS LIST	ED WILL BE COMPI	ETED IN THE			
arrative	HERE														
ine #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe	Positions Require: Fringe to be separate from													
5	Benefits	Personnel Costs above						\$					\$0.00		
6								\$-					\$0.00		
7								\$-					\$0.00 \$0.00		
8	Fringe Sub-	-					-	\$-					\$0.00		
	Total							\$-					\$0.00	\$0.00	
RINGE	COST NARRATIVE	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E	XPLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABL	ES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETE	D IN THE			
arrative	HERE														
				Description		Travel Deferrer									Line Item Reductions
ine #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Y Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	e Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	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)	New	Other			-		-	Occurrii: 1					
		Planning - Revision and update of Strategic Plan	New	Other Federal	Planning		10	565.00	5,650.00	Operational Coordination		SHSP	\$5,650.00		
9			New	Other Federal	Training		20	392.69	6,283.00	Operational Coordination		SHSP	\$6,283.00		
9 10		Interoperability and response to terrorism training					20	284.95	5,699.00	Operational Coordination		SHSP	\$5,699.00		
		Interoperability and response to terrorism training Interoperability and response to terrorism exercise	New	Other Federal	Exercise		20					1			
10 11 12			New		Exercise		20		-				\$0.00		
10 11 12 13			New		Exercise		20		-				\$0.00		
10 11 12			New		Exercise		20		- - - -						
10 11 12 13 14			New		Exercise								\$0.00 \$0.00		
10 11 12 13 14 15	Travel Sub- Total		New		Exercise				-				\$0.00 \$0.00 \$0.00	\$0.00	

Travel expense to attend the 5 day advanced training exercise held in RenoTahoe area. Travel to attend 2 Nevada Bomb Squad Association planning meetings RenoLas Vegas (2 techs per squad). See attached worksheet. Training requested to update, enhance and implement current response levels and capabilities. This five day training course will Certified bomb technicians are required to attend 40 hours of advanced training each year. Request is to provide required training to certified bomb technicians aver two year period. Courses will be FEMA approved and include a tactical exercise phase at the conclusion of the training. Training request is for up to 20 bomb technicians. Planning meetings were originally funded using SHOP funds resulting in the

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	2
	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													
17		Strategic Planning and BPG Development	Sustainm ent	Other Federal	1.00	1,500.00		Operational Coordination		None	SHSP	\$1,500.00			
18							-					\$0.00			
19							-					\$0.00			1
20							-					\$0.00			j
21							-					\$0.00			j
	Planning Sub- Total						\$ 1,500.00					\$1,500.00	\$0.00		

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$ -					\$ -		
23							\$ -					\$-		
24							\$ -					\$-		
25							\$ -					\$-		
26							\$ -					\$-		
27							\$ -					\$ -		
	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

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
E	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 AN AEL	J											
28							\$-					\$-		
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30							\$-					\$-		
31							\$ -					\$ -		
32							\$ -					\$ -		
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39							\$-					\$-		
	QUIPMENT						e					s -	_	

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	X
	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					_	-								
40		Contracted Response Exercise - to test the coordinated response of NNBTTF assets to a terrorist incident		Other Federal	YES	NO	1.00	45,000.00			\$ 45,000.00		\$ 45,000.00			
41											\$-		\$-			
42											\$-		\$-			
43											\$-		\$ -			
44											\$-		\$ -			-
45											\$ -		\$-			-
46											\$ -		\$ -			-
47											ş -		\$ -			1
48											ъ -		\$ -			4
49	Training Cub										э -		\$ -			
	Training Sub- Total	/F REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE F									\$ 45,000.00		\$ 45,000.00	-		

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Narrative HERE
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Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type		Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$-		\$-		
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53											\$-		\$-		
54											\$ -		\$-		
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57											\$-		\$-		
	Exercise Sub- Total										\$ -		\$ -	-	
EXERCIS	E COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE I	N DETAIL T	HE POSITIONS	AND DELIVERAE	LES. NARR	ATIVE WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 64,132.00	\$ -	
All bud	aets require an	email approval from the financial and/or grant (manager							



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

NDEM	NDEM					al Year A	2017 - HO	meia	ina se	curity G	rant 1ra	ivel Add	enaum				Χ			
		*	*Required Fields									**	Required F	ields						
Traveler's Name	Title	Funding Source	Purpose (Please note if travel is for training)	Departure City	Destination City	Travel Start Date		No. Days	No. Nights	Airfare	Hotel	Per Diem	Motor Pool Car	Mileage	Reg Fees	Public Trans	Parking	Rental Car	Baggage Fees	Total
6 personnel		SHSP	Planning Meeting	RNO	LAV	TBD	TBD	3	2	\$ 1,140.00	\$ 900.00	\$ 960.00						\$100.00	\$ 150.00	\$ 3,250.00
4 Personnel		SHSP	Planning Meeting	LAV	RNO	TBD	TBD	3	2	\$ 960.00		\$ 640.00						\$100.00	\$ 100.00	\$ 2,400.00
4 Personnel		SHSP		Elko	RNO	TBD	TBD	7	5		\$ 600.00		Yes	\$ 179.00					i i	\$ 2,443.00
16 Personnel		SHSP		RNO	RNO	TBD	TBD					\$ 3,840.00								\$ 3,840.00
4 Personnel		SHSP		Elko	RNO	TBD	TBD	6	3		\$600.00	\$1,280.00	Yes	\$179.00						\$1,859.00
16 Personnel		SHSP	Exercise	RNO	RNO	TBD	TBD					\$ 3,840.00								\$ 3,840.00
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**You must complete the r	equired fields, the	other fields	s are optional							\$ 2,100.00	\$ 2,700.00	\$ 12,224.00							i – – – – – – – – – – – – – – – – – – –	\$ 17,632.00

	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	Y					
	Project Proposal for	FFY17 HSGP Fund	ing Description	Date Submitted	3/28/17					
1)	PROJECT TITLE:	Consolidated Bomb Squa	d							
2)	Proposing/Lead Agency:	Washoe County Sheriff's	/ashoe County Sheriff's Office							
3)	1º Project Manager Name/Title:	Sergant Bowlin	ergant Bowlin							
	1º Project Manager Contact Info:	Phone: (775) 846-5680	hone: (775) 846-5680 Email: RBowlin@washoecounty.us							
4)	2 [°] Project Manager Name/Title:									
	2° Project Manager Contact Info:	Phone:	Email:							
5)	Finance/Grant Contact Name/Title:	Laura Daniels/Grant Coor	dinator							
	Finance/Grant Contact Info:	Phone: (775) 328-3013	Phone: (775) 328-3013 Email: Idaniels@washoecounty.us							
6)	CLASSIFICATION - Check the p	C	Choose one:							

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	\odot
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

To improve operational effectiveness of Operational Coordination by 30% through updated equipment and technology developed over the past 8 years. Additionally this will address safety concerns by replacing worn and outdated equipment currently used by the Consolidated Bomb Squad which encompasses Washoe County Sheriff's Office, Reno Police Department, and Sparks Police Department. Public safety and prosecution will also be enhanced with the ability to record and document incidents involving an improvised explosive device (IED). 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.

To sustain operational coordination relative to emergency response during explosive related responses by providing 100% of the necessary emergency equipment. This will assist with the protection, mitigation, prosecution, and recovery efforts for citizens, property and the environmental concerns in our service area.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Screening, Search, and Detection [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Prevention, Protection Description: Provide timely, accurate, and actionable information resulting from the planning, direction, collection, exploitation, processing, analysis, production, dissemination, evaluation, and feedback of available information concerning physical and cyber 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 by local, state, tribal, territorial, Federal, and other stakeholders. Information sharing is the ability to exchange intelligence, information, data, or knowledge among government or private sector entities, as appropriate.

	Nevada Homeland	Sec	urity Grant Program (HSGP)	PROJECT ID:	Y							
	Project Proposal for	r FFY	17 HSGP Funding Description	Date Submitted	3/28/17							
RO	JECT TITLE REFERENCE:	Cons	olidated Bomb Squad									
0)	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed											
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION	4 - OPERATIONAL COORDINATION								
	Urban Area Strategy Priority		#4 - OPERATIONAL COORDINATION									
	equipment and software. WCSC prosecution will also be enhanced) is pa	rtnered with Reno Police Department, and Sparks	s Police Department. Pub	lic safety ar							
11) PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project will be implement Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, contractor, or ?) will per Project will be implemented by full time members of the Consolidate Bomb Squad. Personnel will procure equipment and software. WCSO is partnered with Reno Police Department, and Sparks Police Department prosecution will also be enhanced with the ability to record and document incidents involving an improvise (IED).												

GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	None	none	none
12(b)			
12(c)			

13) 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, Reno Police Departments and Sparks Department.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID:

Date Submitted 3/28/17

Y

PROJECT TITLE REFERENCE:

Consolidated Bomb Squad

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

s]	LV-UASI	State-wide	SubTotal
e and	\$ 0.00	\$ 0.00	\$ 0.00
	LV-UASI	State-wide	SubTotal
nt of arks and	\$ 0.00	\$ 0.00	\$ 0.00
	LV-UASI	State-wide	SubTotal
es 4 ce	\$ 0.00	\$ 24,308.71	\$ 24,308.7 [,]
t	LV-UASI	State-wide	SubTotal
nced	\$ 0.00	\$ 0.00	\$ 0.00
ł	LV-UASI	State-wide	SubTotal
ds to signing bletops uate , and	\$ 0.00	\$ 0.00	\$ 0.00
y]	LV-UASI	State-wide	SubTotal
the	\$ 0.00	\$ 0.00	\$ 0.00
	LV-UASI	State-wide	TOTAL
		1	
uate , and	os	\$ 0.00	DS \$ 0.00 \$ 0.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	Y
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/28/17

PROJECT TITLE REFERENCE:

Consolidated Bomb Squad

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	10/01/17	12/31/17	3
3	Purchase equipment	01/01/18	06/01/18	6
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.
	Consolidated Bomb Squad attached to FBI
ze	
ox size	
text b	
sible 1	
VIS	b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.
are limitied to visible text box	Consolidated Bomb Squad attached to FBI
ıre lim	
"C"	
and	
"b",	c. Can this project funding request be reduced? Is it scaleable? YES 💽 NO 🔵 Explain below.
"a",	Reduced funding is an option with assistance from local agencies to provide financial assistance.
Fields	
Εi	

	Nevada Homeland	I Security Grant Program (HSGP)	PROJECT ID:	Υ
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/28/17
PRO.	IECT TITLE REFERENCE:	Consolidated Bomb Squad		
	d. Can this project continue w	ithout funding? YES 💽 NO 🔵 Explain below.		
are limitied to visible text box size	With financial impact to all local			
miti	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explai	n below.	
Fields "d" and "e" are li	Consolidated Bomb Squad attac	hed to FBI serving all of Northern Nevada		

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

None

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	Agency Name		Name & Contact #	Sgt. Bowlin	ı / 775-846-5680	Grant Manager Name & Contact #		ls 775-328-3013							
	IJ TITLE:	Conolidated Bomb Squad													
		One Budget Per Funding Stream													
		SHSP													
		010													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$-		
2								\$-					\$ -		
3				L				\$-					\$-		
4	Demonst							\$-					\$-		
	Personnel Sub-Total							\$ -					s -	\$-	
RSON		ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAI	NE IN DETAI	L THE POSITIO	NS AND DELIVER	ABLES. NAR	RATIVE WILL BE	USED TO ENSU	RE ITEMS LISTE	D WILL BE COMPLE	TED IN THE			
ie #	CATEGORY	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from	Purchase Type	Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	Fringe Benefits	Personnel Costs above													
5								\$ - \$ -					\$0.00 \$0.00		
6 7								\$- \$-		1			\$0.00		
								\$ -					\$0.00		
8							-	\$-					+		
8	Fringe Sub-	-					-	s -						\$0.00	
	Total	- E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL TH	E POSITIONS A	ND DELIVERABLE	S. NARRATI	\$ -	D TO ENSURE IT	TEMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00	\$0.00	
	Total		PLAINE IN	DETAIL TH	POSITIONS A	ND DELIVERABLE	ES. NARRATI	\$ -	D TO ENSURE I	TEMS LISTED WIL	L BE COMPLETED	N THE GRAN	\$0.00	\$0.00	
RINGE	Total	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		DETAIL THI Previous Funding Type	E POSITIONS A Category of Each Travel	ND DELIVERABLE Travel Reference # from Addendum		\$ -	D TO ENSURE I	EMS LISTED WIL Primary Core Capability	L BE COMPLETED I Secondary Core Capability	N THE GRAN Funding Source	\$0.00	\$0.00 Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
RINGE (Total COST NARRATIVE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each		Primary Core	Secondary Core	Funding	\$0.00 Total Budget	Line Item	Descriptions on how it will
NGE (Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each		Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00	Line Item	Descriptions on how it will
9 10 11	Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each		Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
9 10 11 12	Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
INGE (ne # 10 11	Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
9 9 10 11 12 13 14 15	Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
9 9 10 11 12 13 14	Total COST NARRATIVE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - VE WILL BE USE Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	1											
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$ -					\$0.00	\$0.00	

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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$-		1
23								\$ -					\$-		ĺ
24								\$					\$-		1
25								\$					\$-		1
26								\$-					\$-		Í
27								\$ -					\$ -		1
	Organization Sub-Total							\$-					\$-	-	
ORGANIZ	VATION COST NAR	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	ASE EXPL	VINE IN DET	All THE POSIT	TIONS AND DELIV	FRABLES N	ARRATIVE WILL	BE USED TO EN	ISURE ITEMS LIS	TED WILL BE COMP	I FTED IN TH			

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Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	т	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Tota	al Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL														
28	Equipment	Updated computer system recording surveillance and long range mast camera	New	Local	1.00	3,420.00	\$	3,420.00	Interdiction and Disruption	On-Scene Security and Protection	14SW-01-VIDA		\$	3,420.00	-	This is one complete system can not be broken down into parts
29	Equipment	4 Robot Batteries	New		4.00	475.00	\$	1,900.00	Used to power robot used during render safe proseadures for explosive devices	other tactical operations as ar observation tool			s	1,900.00	_	robot would be inoperable
30	Equipment	Charger - charges 4 batteries	New		1.00	1,972.11	\$	1,972.11	Charger for batteries listed above		02EX-02-RBTL		\$	1,972.11	-	robot would be inoperable
31	Equipment	Pan Breach assembily	New		2.00	856.25	\$	1,712.50	Safe disruption of suspected explosive devices		02EX-02-TLPB		\$	1,712.50	-	allow for the compleation of the PAN breaching system. Old breaches are incomplete and unable and unsafe to use PAN system is inoperable without this item
32	Equipment	DET Diagnostic Kit	New		4.00	2,803.11	\$	11.212.44	conducting cap diagnostics to asssit in the render safe process of explosive devices		02EX-02-TLPB		s	11.212.44	2.00	4 DET kits would allow for all members to posses there own kit and have the capibility to adress explosive devices without having to retreave a kit from. 2 DET kits would allow us to complete the task but would require an extended response time to retrieve the kit from a centerial location prior to responce.
33	Equipment	Video servallance system for explosive storage area	New		1.00	4,091.66		4,091.66	Allow for the remote observation of explosive storage location	On-Scene Security and Protection	14SW-01-VIDA		\$	4,091.66		This is one complete system can not be broken down into parts

34 35								\$ \$	-					\$ \$	-		
36								\$	-					\$	-		
37								\$	-					\$	-		
38								\$	-					\$	-		
39								\$	-					\$	-		
	EQUIPMENT																
	Sub-Total								24,308.71					\$ 2	24,308.71	2.00	
EQUIPME	NT COST NARRA	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	SE EXPLAIN	IE IN DETAIL	THE POSITIO	NS AND DELIVER.	ABLES. NARI	RATIVE	WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE				
856																	
000																	

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40											\$ -		\$-		
41											\$ -		\$-		
42											\$-		\$ -		
43											\$ -		\$		
44											\$-		\$-		
45											\$ -		\$-		
46											\$ -		\$ -		
47											\$ -		\$ -		
48											\$-		\$ -		
49											\$-		\$-		
	Training Sub- Total										\$ -		\$-	-	

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Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$		\$ -		
52											\$-		\$-		
53											\$-		\$-		
54											\$ -		\$-		
55											\$ -		\$-		
56											\$ -		\$-		
57											\$ -		\$-		

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 24,308.71	\$ 2.00	
All buc	lgets require an	email approval from the financial and/or grant i	manager							

	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	Z								
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	3/29/17								
1)	PROJECT TITLE:												
2)	Proposing/Lead Agency:	Las Vegas Fire & Rescue Bureau of Fire Investigations / Bomb Squad											
3)	1° Project Manager Name/Title:	Steven Poe / Sr. Fire Investigator / Bomb Technician											
	1º Project Manager Contact Info:	Phone: (702) 303-0773	Email: sbpoe@lasvegasnevada.	gov									
4)	2 [°] Project Manager Name/Title:												
	2 ^o Project Manager Contact Info:	Phone:	Email:										
5)	Finance/Grant Contact Name/Title:	Wymon Curry / Finance Analyst											
	Finance/Grant Contact Info:	Phone: (702) 229-6810 Email: wcurry@lasvegasnevada.gov											
6)	CLASSIFICATION - Check the p	primary intention of the P	roposed Project:	C	hoose one:								

NEW New; no grant-funded projects have recently (within 5 years) addressed this capability

INEVV	New, no grant-funded projects have recently (within 5 years) addressed this capability	U
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Las Vegas Fire & Rescue Bomb Squad is the only Federal Bureau of Investigation (FBI) accredited Bomb Squad in Southern Nevada. This squad supports Clark, Esmeralda, Lincoln and Nye Counties. Las Vegas Fire & Rescue also provides support for St George, UT, Bullhead City, AZ and their 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 bomb, improvised explosive, hostage with improvise explosives, large vehicle borne improvised explosives and active shooter incidents with improvised explosives. This equipment would assist the Bomb Technicians by decreasing the mortality rate and increasing the survivability to bomb technicians and civilians during explosive incidents.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Threats and Hazards Identification [Mission Area: MITIGATION]
Secondary Core Capability:	Screening, Search, and Detection [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The proposed equipment is a technological enhancement and new purchase for the Las Vegas Fire & Rescue Bomb Squad. These robots will be used to assist in the detection, identification of suspicious packages, improvised explosive devices, home made explosives (HME) and the render safe operations.

The information gathered will assist in the determination of safe zones and render safe operations. This information will assist incident commanders with critical information needed to protect the public safety personnel, the citizens and guests of Southern Nevada.

	Nevada Homeland	d Security Grant Program (HSGP)	PROJECT ID:	Z
	Project Proposal fo	r FFY17 HSGP Funding Description	Date Submitted	3/29/17
PRO	JECT TITLE REFERENCE:	Las Vegas Bomb Squad EOD Tactical Integration		
10)	PRIORITIES - Identify applicat Objective to be addressed	ble Nevada Commission on Homeland Security (NCHS)	Priority and Urban Area	Strategy
	NCHS FFY17 Priority	#4 - OPERATIONAL COORDINATION		
	Urban Area Strategy Priority	#2 - INTELLIGENCE AND INFORMATION SHA	RING	

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 this award is received and accepted by the City Council, project implementation will be conducted by Steven Poe and consist of procurement, delivering of the equipment to the Las Vegas Fire & Rescue Bomb Squad, training of all assigned personnel. Financial and progress reports will be submitted to NDEM as required by the state grant assurances until project completion.



12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Las Vegas Fire & Rescue	City of Las Vegas	Steven Poe
12(b)			
12(c)			

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

This specialized equipment is not a general budget item, but it is a necessity for Southern Nevada due to the threat level of our community.

Since this project is for the acquisition of equipment only, there are no ongoing sustainment expenses projected after the original purchase. Las Vegas Fire & Rescue general funds will be used for 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. This equipment has an expected useful life of approximately 5 - 7 years.

FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

70	30	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	Ζ
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/29/17

PROJECT TITLE REFERENCE:

Las Vegas Bomb Squad EOD Tactical Integration

15a) Planning [Developme	ent of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTota
				\$ 0.00
15b) Organization (Estab	lishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTota
				\$ 0.00
	ment and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
3 - Mini-CALIBER EOD/S These robots will be use explosive devices, home The information gathered needed to make critical I		\$ 120,670.00	\$ 60,335.00	\$ 181,005
15d) Training [Developme	nt and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
				\$ 0.00
			Chata suide	
15e) Exercise [Developmen	nt and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTota
15e) Exercise [Developmen	nt and execution of exercises to evaluate and improve capabilities]		State-wide	SubTota \$ 0.00
	nt and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00
				\$ 0.00
	contractors) directly implementing project and programmatic capability]			SubTota

Project Proposal for FFY17 HSGP Funding Description Date Submitted 3	3/29/17

PROJECT TITLE REFERENCE:

Las Vegas Bomb Squad EOD Tactical Integration

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	09/01/17	10/01/17	1
3	Purchase Order Received	10/01/17	12/01/17	2
4	Order Equipment	12/01/17	01/01/17	1
5	Receive Equipment	03/01/17	05/01/17	2
6	Closeout Grant	05/01/17	06/01/17	1
7				
8				
9				
10				
11				
12				

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

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

The robots will be used to identify explosives, explosive components, improvised explosive devices and render safe these devices when used day to day response models, weapons of mass destruction, active shooter, and hostage situations.

make critical life and death decisions.

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

The funding requested can be reduced, although reducing the funding level will not only reduce the response but will also greatly reduce the capability of the squad. Knowing that the equipment listed on the quote are for the Tactical Bomb Technicians Operations and Integration for a successful operation. Robot platform configuration and / or reduction of one total robot may be an option.

Operational Coordination cannot be effectively achieved when the threat is an unknown. By enhancing the Las Vegas Fire & Rescues capability to screen, search, detect and identify explosives and their components, the information and intelligence gathered will now allow for unified / incident command to

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	Z
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/29/17
PROJ	ECT TITLE REFERENCE:	Las Vegas Bomb Squad EOD Tactical Integration		
	d. Can this project continue w	thout funding? YES 🜔 NO 💽 Explain below.		
are limitied to visible text box size	Program (HSGP). There is no ot implemention on this program. The bomb squad will continue to it so much better and safer if we the much needed enhancements Southern Nevada.	hly move forward if it has the support and funding from the N her program like this in Southern Nevada and we look forward do what it does, to the best of its ability even if this project have this investment. I think the time is now for Las Vegas s. This would allow for the bomb squad to continue to provide	ard to the opportunity doesn't get funded. E Fire & Rescue Bomb	/ and But, we will do Squad to get
miti	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explain bel	ow.	
Fields "d" and "e" are li	Investigations, Las Vegas Metro provide service and support to a devices, large vehicle borne exp	avor undertaken by the Las Vegas Fire & Rescue Bomb Sq politan Police, North Las Vegas and Henderson SWAT to cr I of Southern Nevada in the event of active shooter, hostag losives with active assailants and chemical, biological, radic es that it will provide are not routine operations, but if the ne spond.	reate a unique asset e with improvised ex ological nuclear devic	that would plosive ces (CBRNE).
18)		indicate the participation level in completing the 2016 T		

VES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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 three 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, Las Vegas Metropolitan Police Department, North Las Vegas and Henderson SWAT allowing the teams to respond to, prevent initial or follow-on terrorist attacks. Conduct simultaneous counter-terrorism operation in up to three separate locations.

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	LINE	ITEM	DETAIL	BUDGET
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					E ITEM D										
	Agency Name		Name & Contact #	Steven Poe 702-303-077	73	Grant Manager Name & Contact #	Wymon C	urry, Finance 702	2-229-6810						
	IJ TITLE:														
	io mille.	One Budget Per Funding Stream		r		r				-					
				-						-					
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$ -					\$ -		
2				ļ				\$-					\$-		
3								\$-					\$ -		
4	Descennel							ş -					\$ -		
	Personnel Sub-Total							\$ -					\$-	\$-	
ERSON	NEL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAI	NE IN DETAIL	THE POSITIC	NS AND DELIVER	ABLES. NA	RRATIVE WILL E	BE USED TO ENS	SURE ITEMS LIST	ED WILL BE COMPL	ETED IN THE			
larrative	HERE														
				Previous										Line Item	Line Item Reductions
ine #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Reductions	Descriptions on how it will affect your program
	CATEGORY Fringe Benefits	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above		Funding	Salary Hourly	% of Effort					AEL Ref #				
ine #	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort					AEL Ref #		Total Budget \$0.00 \$0.00		
5 6 7	Fringe	Positions Require: Fringe to be separate from		Funding	Salary Hourly	% of Effort		Amount \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$			AEL Ref #		\$0.00 \$0.00 \$0.00		
6	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above		Funding	Salary Hourly	% of Effort		Amount \$-			AEL Ref #		\$0.00 \$0.00		
5 6 7 8	Fringe Benefits Fringe Sub- Total	Positions Require: Fringe to be separate from Personnel Costs above	Туре	Funding Type			n (hours)	Amount \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00		
5 6 7 8	Fringe Benefits Fringe Sub- Total	Positions Require: Fringe to be separate from Personnel Costs above	Туре	Funding Type		ND DELIVERABLE	n (hours)	Amount \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 RINGE (Fringe Benefits Fringe Sub- Total	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Type	Funding Type			n (hours)	Amount S - S - S - S - Tive WiLL BE US	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00	Reductions	
5 6 7 8 RINGE (arrative	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE	Positions Require: Fringe to be separate from Personnel Costs above	Type	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 RINGE (Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 RINGE C 8 RINGE C 9 10 11	Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability Capability Total Cost Cost Cost Cost Cost Cost Cost Cost	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 KINGE (VINGE (8 9 10 11 12	Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 8 IINGE C Intrative	Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability Capability Total Cost Cost Cost Cost Cost Cost Cost Cost	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 NINGE C 10 11 12 13 14 15	Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 NINGE C urrative ne # 9 10 11 11 12 13 14	Fringe Benefits Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Type PLAINE IN Purchase Type Select	Funding Type	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount	Capability	Capability	ILL BE COMPLETED	Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	Ζ
	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	2												
17							-					\$0.00			i i
18							-					\$0.00			i i
19							-					\$0.00			i i
20							-					\$0.00			i i
21							-					\$0.00			1
	Planning Sub- Total				2		s -					\$0.00	\$0.00		

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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$-		
23								\$					\$-		
24								\$					\$ -		
25								\$-					\$-		
26								\$-					\$-		
27								\$-					\$-		
	Organization Sub-Total							\$-					\$ -	-	
ORGANIZ	ATION COST NAE	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	All THE POSI	TIONS AND DELIV	FRABLES	NARRATIVE WII	I BE USED TO E	INSURE ITEMS L	STED WILL BE COM	IPI ETED IN			

Narrative HERE

ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	e AEL Ref #	Funding Source	Total Budge	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	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 an AEL												
28	MINI-CALIBER Robot	The Mini-Caliber Robot is a Lightweight, modular and one-man portable robot, the Mini-CALIBER EOD and SWAT Robot is tested and recommended by the National Tactical Officers Association (NTOA). Designed for rapid tactical missions, the robot is simple to operate and quick to deploy for searching rooms, hallways, stairwells and confined spaces. With rubber tracks and articulating front and rear flippers, the Mini- CALIBER effortlessly climbs stairs. It also includes an extendible rotating claw arm that simplifies opening door handles.		Other	1.00	60,335.00	\$ 60,335.00	THREATS AND HAZARD IDENTIFCATION - (MISSION AREA: MITIGATION)	SCREENING, SEARCH, AND DETECTION - V(MISSION AREAS: PREVENTION/F ROTECTION)	03OE-07-ROBT - Robots	SHSP	\$ 60,335.	0	
29							\$ -					\$ -		
30							\$ -					\$ -		
31							\$ -					\$ -		
32							\$ -					\$ -		
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36							\$ -					\$ -		
37							\$ -					\$ -		
38							\$-					\$ -		
							\$ -					\$ -		
39			-											
	EQUIPMENT													

ine #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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					-	-								
40											\$-		\$-			1
41											\$-		\$-			
42											\$-		\$-			
43											\$-		\$-			
44											\$-		\$-			
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46											\$-		\$ -			
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48											\$-		\$-			
49											\$-		\$-			
	Training Sub- Total										\$-		\$ -	-		

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_ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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)												-	
50											\$-		\$-		
51											\$		\$ -		
52											\$-		\$-		
53											\$-		\$-		
54											\$-		\$-		
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57											\$-		\$-		
	Exercise Sub- Total										\$-		\$-	-	
XERCIS	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAR	I FS NARR	ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

Narrative HERE							Total Original Budget	Line Item Reductions Total	
							\$ 60,335.00	\$ -	
All budgets require an	email approval from the financial and/or grant	manager							

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

LI	NE I	ITEM	DET.	AIL	BUD	GET

					E ITEM D										
	Agency Name		Name & Contact #	Steven Poe 702-303-077		Grant Manager Name & Contact #	Wymon Ci	urry, Finance 702	2-229-6810						
	IJ TITLE:					1									
		One Budget Per Funding Stream													
		UASI													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$ -		
2								\$-					\$-		
3								\$ -					\$-		
4	Personnel							\$-					\$-		
	Sub-Total							\$-					\$ -	\$-	
RSON	NEL COST NARRA	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAIN	NE IN DETAIL	. THE POSITIO	NS AND DELIVER	ABLES. NA	RRATIVE WILL B	SE USED TO ENS	URE ITEMS LIST	ED WILL BE COMPL	ETED IN THE			
arrative	HERE														
	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase	Previous			Coloria di s	Personnel Cost	Primary Core	Secondary Core		Funding		Line Item	Line Item Reductions
ine #	CATEGORY		Туре		Salary Hourly	% of Effort	Calculatio n (hours)	Amount	Capability	Capability	AEL Ref #	Source	Total Budget	Reductions	Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above		Funding Type	Salary Hourly	% of Effort		Amount			AEL Ref #			Reductions	Descriptions on how it will affect your program
5	Fringe	Positions Require: Fringe to be separate from			Salary Hourly	% of Effort					AEL Ref #		\$0.00	Reductions	
	Fringe	Positions Require: Fringe to be separate from			Salary Hourly	% of Effort		Amount			AEL Ref #		\$0.00 \$0.00 \$0.00	Reductions	
5 6	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above			Salary Hourly	% of Effort		Amount \$ - \$ -			AEL Ref #		\$0.00 \$0.00	Reductions	
5 6 7	Fringe	Positions Require: Fringe to be separate from Personnel Costs above			Salary Hourly	% of Effort		Amount \$ - \$ - \$ - \$ \$ \$ \$			AEL Ref #		\$0.00 \$0.00 \$0.00	Reductions	
5 6 7 8	Fringe Benefits Fringe Sub- Total	Positions Require: Fringe to be separate from Personnel Costs above	Туре	Type			n (hours)	Amount \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00		
5 6 7 8 RINGE	Fringe Benefits Fringe Sub- Total COST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above	Туре	Type			n (hours)	Amount \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00		
5 6 7 8 RINGE	Fringe Benefits Fringe Sub- Total COST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above	Type	Type			n (hours)	Amount \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00		
6 7 8 RINGE arrative	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE	Positions Require: Fringe to be separate from Personnel Costs above	Type PLAINE IN Purchase	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 RINGE	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 IINGE rrrative ne #	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget <u>\$0.00</u> \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 INGE InGE 9 10 11 12 13 14	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 INGE rrative 9 10 11 11 12 13 14	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program
5 6 7 8 INGE InGE 9 10 11 12 13 14	Fringe Benefits Fringe Sub- Total COST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON	Type PLAINE IN Purchase Type	Type DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABLE Travel Reference # from	n (hours)	Amount S - S - S - S - TIVE WILL BE US Cost for each	Capability	Capability	ILL BE COMPLETED	Source IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	7
	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													
17							-					\$0.00			
18							-					\$0.00			
19							-					\$0.00			
20							-					\$0.00			
21							-					\$0.00			
	Planning Sub- Total						\$-					\$0.00	\$0.00		

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$ -					\$		
23								\$ -					\$-		
24								\$ -					\$		
25								\$ -					\$-		
26								\$ -					\$-		
27								\$ -					\$-		
	Organization Sub-Total							\$ -					\$-	-	
ORGANIZ	ATION COST NAE	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EVDI	AINE IN DET	ALL THE BOSH	TIONS AND DELIV			I BELISED TO E	INCLIDE ITEMS I	STED WILL BE CON	DI ETED IN			

Narrative HERE

ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	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 an AEL												
28	Mini-CALIBER Robot	The Mini-Caliber Robot is a Lightweight, modular and one-man portable robot, the Mini-CALIBER EOD and SWAT Robot is tested and recommended by the National Tactical Officers Association (NTOA). Designed for rapid tactical missions, the robot is simple to operate and quick to deploy for searching rooms, hallways, stairwells and confined spaces. With rubber tracks and articulating front and rear flippers, the Mini- CALIBER effortlessly climbs stairs. It also includes an extendible rotating claw arm that simplifies opening door handles.	Enhance	Other	2.00	60,335.00		THREATS AND HAZARD IDENTIFCATION - (MISSION AREA: MITIGATION)	DETECTION -	03OE-07-ROBT - Robots	UASI	\$ 120,670.00		
29							\$-					\$ -		
30							\$-					\$-		
31							\$ -					\$ -		
32							\$ -					\$-		
33							ş -					\$-		
34							s -					\$ -		
35							\$ - \$ -	ł				\$ - \$ -		
36 37							\$ - \$ -		+					
37					 							ъ •		
38							s -	ł	+			ъ - \$ -		
	EQUIPMENT				 		φ -					φ		
	Sub-Total						\$ 120,670.00					\$ 120,670.00		
	Jub-i Juai													

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	Z
	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					-	-								
40											\$-		\$-			
41											\$-		\$-			
42											\$-		\$-			
43											\$-		\$-			
44											\$-		\$-			
45											\$-		\$-			
46											\$-		\$-			
47											\$ -		\$-			j
48											\$ -		\$-			j
49											\$-		\$ -			1
	Training Sub- Total										\$ -		\$ -	_		

Narrative HERE

_ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$		\$ -		
52											\$		\$-		
53											\$		\$-		
54											\$-		\$-		
55											\$-		\$-		
56											\$-		\$-		
57											\$-		\$-		
	Exercise Sub- Total										\$-		\$-	-	
EXERCIS	E COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL 1	THE POSITIONS	AND DELIVERAR	LES NARE	ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

Narrative HERE	Narrative HERE											Total Original Budget	Line Item Reductions Total		
													\$ 120,670.00	\$ -	
All budgets red	uire an e	mail approval from the financial and/or grant	manager												

	Nevada Homeland	PROJECT ID:	AA							
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	3/14/17					
1)	PROJECT TITLE:	CBRN Monitoring		-	-					
2)	Proposing/Lead Agency:	Las Vegas Fire and Reso	ue							
3)	1° Project Manager Name/Title:	William Grass / Training	Officer							
	1º Project Manager Contact Info:	Phone: (702) 229-0737	Email: wgrass@lasvegasnevada	.gov						
4)	2 [°] Project Manager Name/Title:									
	2 [°] Project Manager Contact Info:	Phone:	Email:							
5)	Finance/Grant Contact Name/Title:	Wymon Curry / Financial	Analyst							
	Finance/Grant Contact Info:	Phone: (702) 229-6810	.gov							
6)	CLASSIFICATION - Check the primary intention of the Proposed Project:									

eck the primary intention of the Proposea Project:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	$\overline{oldsymbol{O}}$

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

The Las Vegas Fire and Rescue HAZMAT Team is the only Type I HAZMAT team in Southern Nevada and supports the following jurisdictions, including but not limited to: the Cities of Las Vegas, North Las Vegas, Henderson, Mesquite, Boulder City and all unincorporated Clark County.

The goal of this project is to sustain the Las Vegas Fire and Rescue HAZMAT Team by supporting the National Priority of: "Strengthen Chemical, Biological, Radiological/Nuclear, and Explosive (CBRNE) Detection, Response, and Decontamination Capabilities" It focuses on the Core Capabilities of: Screening, Search and Detection and the target capabilities of CBRNE Detection.

The focus of this project and the equipment to be purchased will result in the decrease of morbidity and mortality, and the increase of survivability during a HAZMAT incident.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Screening, Search, and Detection [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	Physical Protective Measures [Mission Area: PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The proposed equipment is a technological enhancement and replacement for current equipment that has reached end of life. These monitors will be used to screen, detect and identify unknown liquids, solids and gases. 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.

	Nevada Homeland	Sec	rity Grant Program (HSGP))	PROJECT ID:	AA
	Project Proposal for	FFY	7 HSGP Funding Description	on	Date Submitted	3/14/17
PROJ	ECT TITLE REFERENCE:	CBR	Monitoring			
10)	PRIORITIES - Identify applicable Objective to be addressed	le Nev	da Commission on Homeland Security	y (NCHS) Prio	rity and Urban Area	Strategy
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION	1		
	Urban Area Strategy Priority		#4 - OPERATIONAL COORDINATION	J		
11) YILL TEXT BOX	Describe in rough order the process by v Upon award and acceptance by Requested equipment will requir ensure funds are used most effe Once there is a qualified bidder, Manager will ensure adequate tr	which the City C e an R ctively the Praining	<i>ibe how, and by whom, the Proposed</i> project will be accomplished, identifying who (i uncil, project implementation will be co P (Request for Proposal). This proces ject Manager will proceed with the proc s conducted and equipment distributed s will be submitted to NDEM as require	i.e. staff, contract onducted by P as is time cons curement pro-	tor, or ?) will perform wh roject Manager Willia suming, but a require cess. Upon receipt, units.	am Grass. ment to the Project

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Las Vegas Fire and Rescue	City of Las Vegas	William Grass
12(b)			
12(c)			

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

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.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		-
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP)	
Project Proposal for FFY17 HSGP Funding Description	

PROJECT ID:

Date Submitted 3/14/17

AA

PROJECT TITLE REFERENCE:

CBRN Monitoring

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
			\$ 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 - Thermo Scientific "Gemini" Monitor. used to detect unidentified Liquids and Solids. 2 - M908 S2 chemical ID system (gas) 	\$ 357,000.00		\$ 357,000.00
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
	\$ 357,000.00	\$ 0.00	\$ 357,000.00

Nevada Homeland Security Grant Program (HSGP) PR	ROJECT ID:	AA
Project Proposal for FFY17 HSGP Funding Description Dat	te Submitted	3/14/17

CBRN Monitoring

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

PROJECT TITLE REFERENCE:

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	Bid/Order Equipment	09/01/17	12/01/17	3
3	Receive Equipment	12/01/17	03/01/18	3
4	Conduct User Training	03/01/18	04/01/18	1
5	Distribute Equipment	04/01/18	05/01/18	1
6	Closeout Grant	05/01/18	06/01/18	1
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.

Monitors will be used to identify the presence of chemicals used in weapons of mass destruction (WMD's) in the event of a terrorist attack. Rapid identification is critical for responders to establish proper perimeters and effective use of personal protective equipment (PPE).

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? 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 screen, search, detect and identify chemicals in a WMD, 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, current review of requested quotes shows a range of pricing options. The Project Manager is committed to leveraging the best pricing and can request reductions in pricing by reducing built-in training. The quantity of (2) each is required for each HazMat unit to be fully and properly equipped.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	AA
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/14/17
ROJ	ECT TITLE REFERENCE:	CBRN Monitoring		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	Some equipment has already be eliminated.	for liquids, solids and gases has been in service o en decommissioned due to no longer serviceable		
miti	e. Does this project provide a	measurable "state-wide" benefit? YES 🔵 NO 💽 E	xplain below.	
Fields "d" and "e" are li	the state at any time. The reality	vice all of Clark County, it would be disingenuous to is that it is needed in the Urban Area, therefore, on his year, it is certainly arguable that protecting 70%	nly UASI funds are being requ	uested. In the

P

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

 (\bullet) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

Knowing that existing equipment was beginning to reach end of useful life, Las Vegas Fire and Rescue originally requested this equipment in the FY 2016 HSGP process. The request was withdrawn in order to accommodate other urgent needs in the Urban Area. Although Las Vegas Fire and Rescue "made do" this year, there have been on-scene failures of aged equipment that can no longer be tolerated. This year, "this" is the urgent need.

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP)

	Agency Name		Name & Contact #			Grant Manager Name & Contact #		y (702) 229-681)						
	IJ TITLE:	Project Name: Chemical Biological Radiologi	cal Nucle	ar and Exp	olosives (CB	RNE) Monitorir	ng								
		One Budget Per Funding Stream													
		UASI													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$-					\$-		
2				<u> </u>			<u> </u>	\$ -					\$ -		
3				<u> </u>			+	\$ - \$ -					\$ - \$ -		
4	Personnel							φ -					φ -		
DCON	Sub-Total	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$ -					\$ -	\$ -	
e #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
5	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above						\$.					\$0.00		
6								ş -					\$0.00		
7 8								\$ - \$ -					\$0.00 \$0.00		
0	Fringe Sub-							Ŷ						* •• •••	
	Total COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A		S. NARRATI	\$ /E WILL BE USEI	TO ENSURE IT	MS LISTED WILL	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
INGE (
arrative	HERE			Previous		Travel Reference									Line Item Reductions
arrative	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
arrative	CATEGORY Travel Planning Training Exercise Equipment			Funding	Category of Each Travel	# from			-						Descriptions on how it will
nrative	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from			Total Cost				\$0.00		Descriptions on how it will
9 10 11	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from			-				\$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from							\$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12 13 14	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from							\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12 13 14 15	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from							\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will
9 10 11 12 13 14	CATEGORY Travel Planning Training Exercise Equipment	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	Type Select	Funding	Category of Each Travel	# from							\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		Descriptions on how it will

Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	AA
	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														
17								-					\$0.00			
18								-					\$0.00			
19								-					\$0.00			
20								-					\$0.00			
21								-					\$0.00			1
	Planning Sub-															
	Total							\$-					\$0.00	\$0.00		
PLANNIN	G COST NARRATI	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	S AND DELIVERA	BLES. NARRA	TIVE WILL BE U	SED TO ENSURE	ITEMS LISTED V	VILL BE COMPLETE	D IN THE				-

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TI INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.	0												
22								\$ -					\$ -		
23								\$ -					\$ -		
24								\$-					\$ -		
25								\$ -					\$ -		
26								\$-					\$-		
27								\$ -					\$ -		
	Organization Sub-Total							\$ -					\$ -	-	
		RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	AIL THE POSI	TIONS AND DELIV	ERABLES. N	ARRATIVE WILL	BE USED TO EN	SURE ITEMS LIST	ED WILL BE COMP	LETED IN THE	φ -		

Narrative HERE

ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	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 an AEL	l											
28		Gemini FTIR/Raman Handheld Analyzer	Sustainm ent	Other Federal	2.00	107,000.00			Physical Protective Measures	07CD-01-FTIR	UASI	\$ 214,000.00		
29		M908 High Pressure Mass Spectrometry (HPMS)	Sustainm ent	Other Federal	2.00	71,500.00			Physical Protective Measures	07CD-02-DPGC	UASI	\$ 143,000.00		
30 31							\$ - \$ -					\$- \$-		
32 33							\$ - \$ -					\$ - \$ -		
34 35 36							\$ - \$ -					\$ - \$ -		
37 38							\$ - \$ -					\$ - \$ -		
	EQUIPMENT Sub-Total						\$ - \$ 357,000.00					\$ - \$ 357,000.00		

Gemini handheld Integrated Raman and FTIR for Chemical and Explosives ID is used identify unknown solids and liquids in potential WMD incidents. The M908 High Pressure Mass Spectrometry (HPMS) is used to identify unknown gases and vapors in potential WMD incidents.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	AA
	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	e				-	-								
40											\$-		\$-			
41											\$-		\$-			
42											\$-		\$-			
43											\$-		\$-			
44											\$-		\$-			
45											\$-		\$-			
46											\$-		\$-			
47											\$-		\$-			
48											\$ -		\$ -			
49											\$-		\$-			
	Training Sub- Total										\$ -		\$-	-		
TRAINING	3 COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAB	ILES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	/ILL BE COMPLETE	D IN THE				

Narrative HERE

Line #	CATEGORY		Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$ -		\$ -		
51											<u></u> -		\$ -		
52											\$ -		\$ -		
53 54											\$ -		\$ -		
54											ъ -		ъ - с -		
56											φ - \$.		ş -		
57											\$ -		\$ -		
01	Exercise Sub-										Ŷ		Ŷ		
	Total										\$ -		\$-	-	
EXERCI	SE COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAE	LES. NARRA	TIVE WILL BE US	SED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETE	D IN THE			•

Narrative HERE								Total Original Budget	Line Item Reductions Total	
								\$ 357,000.00	\$ -	
All budgets req	uire an o	email approval from the financial and/or gran	t manager							

	Nevada Homeland	PROJECT ID:	BB					
	Project Proposal for	Date Submitted	4/4/17					
1)	PROJECT TITLE:	Mesquite Swift Water Res	Aesquite Swift Water Rescue					
2)	Proposing/Lead Agency:	Mesquite Fire	Mesquite Fire					
3)	1º Project Manager Name/Title:	Kash Christopher	Kash Christopher					
	1º Project Manager Contact Info:	Phone: (702) 419-5644	hone: (702) 419-5644 Email: kchristopher@mesquitenv.gov					
4)	2 [°] Project Manager Name/Title:	Spencer Lewis						
	2° Project Manager Contact Info:	Phone: (702) 375-0426 Email: slewis@mesquitenv.gov						
5)	Finance/Grant Contact Name/Title:	Dave Empey						
	Finance/Grant Contact Info:	Phone: (702) 346-5295 Email: dempey@mesquitenv.gov						

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\bullet}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The goal is to enhance operational capabilities for response in the areas of swift water rescue, undeveloped land used by off-road enthusiast, and to the many golf courses in Mesquite. Adding a Side by Side vehicle to our fleet will give us access to necessary areas during a swift water rescue that our trucks and and engines can't get to because of the extreme terrain and mud. Mesquite also has over 1000 acres of undeveloped land that off-road enthusiasts use, to include Gold Butte, and access to these areas is impossible with regular vehicles again because of the extreme terrain and soft sand. There are 9 golf courses that our department regularly responds to and many of these courses have narrow bridges that will not accommodate the weight of a regular vehicle therefor a side by side will give us access to those areas we have not been able to reach in the past. The ropes, class 5 personal flotation devices, and gloves will be used for responding to swift water incidents ensuring a safe a quick recovery. This project gives us greater interoperability with neighboring communities including those in a different state. As it has always been the practice to help out our neighbor we would use all aspects of this project to assist those within Bunkerville and the few communities in Arizona that we respond to often and assist.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Planning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX .

This project falls under operation coordination and planning. This project gives a coordinated operational structure to not only our department but to those neighboring communities within our state and in the state of Arizona. With this level of interoperability it requires all stakeholders to plan and develop executable strategic, operational, and tactical level approaches to our areas specific needs that this project addresses. Through this we will establish and maintain a unified and coordinated operational structure that supports the execution of core capabilities.

T TITLE REFERENCE: IORITIES - Identify applicable iective to be addressed HS FFY17 Priority Dan Area Strategy Priority OJECT IMPLEMENTATION cribe in rough order the process by w on approval, equipment will be	which the project will be accomplished, identifying who (i.e. staff, co e ordered within 6 months Thirty days after delivery, eq	t will be implemented. ontractor, or ?) will perform wh quipment will be organize	at work				
IORITIES - Identify applicable fective to be addressed HS FFY17 Priority oan Area Strategy Priority OJECT IMPLEMENTATION cribe in rough order the process by w on approval, equipment will be	 #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION - Describe how, and by whom, the Proposed Project which the project will be accomplished, identifying who (i.e. staff, core ordered within 6 months Thirty days after delivery, each ordered within 6 months Thirty days after delivery, each ordered within 6 months Thirty days after delivery, each ordered within 6 months Thirty days after delivery. 	t will be implemented. ontractor, or ?) will perform wh quipment will be organize	at work				
iective to be addressed HS FFY17 Priority Dan Area Strategy Priority OJECT IMPLEMENTATION cribe in rough order the process by w on approval, equipment will be	#4 - OPERATIONAL COORDINATION #4 - OPERATIONAL COORDINATION - Describe how, and by whom, the Proposed Project which the project will be accomplished, identifying who (i.e. staff, co	t will be implemented. ontractor, or ?) will perform wh quipment will be organize	at work				
oan Area Strategy Priority OJECT IMPLEMENTATION cribe in rough order the process by w on approval, equipment will be	#4 - OPERATIONAL COORDINATION - Describe how, and by whom, the Proposed Project which the project will be accomplished, identifying who (i.e. staff, co	ontractor, or ?) will perform wh quipment will be organize					
OJECT IMPLEMENTATION cribe in rough order the process by w on approval, equipment will be	- Describe how, and by whom, the Proposed Project which the project will be accomplished, identifying who (i.e. staff, co e ordered within 6 months Thirty days after delivery, ea	ontractor, or ?) will perform wh quipment will be organize					
cribe in rough order the process by w on approval, equipment will be	which the project will be accomplished, identifying who (i.e. staff, co e ordered within 6 months Thirty days after delivery, eq	ontractor, or ?) will perform wh quipment will be organize					
			d and placed				
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 approval, equipment will be ordered within 6 months Thirty days after delivery, equipment will be organized and placed on the responding vehicles, to include the side-by-side. Training will be scheduled on availability.							

т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Fire Department/Emergency Management	Mesquite	Will Martinez
12(b)	Police	Mesquite	Kim Otero
12(c)			

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

Updates with equipment and additional training courses will be provided for by the City of Mesquite as needs are identified. FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	
Project Proposal for FFY17 HSGP Funding Description	

Date Submitted

4/4/17

PROJECT TITLE REFERENCE:

Mesquite Swift Water Rescue

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
			\$ 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
Life Vest (PFD),Helmets, 75' Throw Bags,Carabineers, Whistle, Wet Suits, Gloves Wet shoes, Short Fins to be purchased through department vendor. Side by side to be fitted with gurney mounts and seats.	\$ 45,882.00		\$ 45,882.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Six to attend Swift Water Technician class at Specialty Training.	\$ 2,850.00		\$ 2,850.00
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
	\$ 48,732.00	\$ 0.00	\$ 48,732.00

Nevada Homeland Security Grant Program (HSGP) PRO	OJECT ID:	BB
Project Proposal for FFY17 HSGP Funding Description Date	e Submitted	4/4/17

PROJECT TITLE REFERENCE:

Mesquite Swift Water Rescue

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

	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	Order vehicle, equipment	07/19/17	01/30/18	6
3	Disperse equipment en responding vehicles		12/15/17	5
4			02/05/18	2
5	Reimburse Vendors and Training institute	04/02/18		
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.

With a population growing at a rapid pace and an area that has has a water plant located right off the Virgin River, Mesquite would be considered a "soft target" for terrorist, both domestic or international. This project aids in response to the many possible plans that a terrorist could have especially those that isolate groups by using the already existing extreme terrain or pushing groups into the waters of the virgin river. Contaminating the drinking water for the 20K residents and the 1M visitors that go to Mesquite annually is another traditional terrorist plan and accesses to these locations is already limited by extreme terrain and dirt roads; this project would allow us access to these critical areas with ease during such an event.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES • NO Explain below. The project falls under Operational Coordination and Communication.

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

Yes, we can downsize request if needed.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	BB		
	Project Proposal for	Date Submitted	4/4/17			
PROJ	ECT TITLE REFERENCE:	Mesquite Swift Water Rescue				
	d. Can this project continue w	thout funding? YES 💿 NO 🔵 Explain below.				
are limitied to visible text box size	Portions of this project will continue without funding, however some of the large purchases such as the side by side vehicle can not be made from our cities limited budget.					
Fields "d" and "e" are lim	e. Does this project provide a measurable "state-wide" benefit? YES • NO Explain below. As we neighbor many small communities, who we often give mutual aid to, this project gives immediate benefit to them and many of the assets gained in this project can be used state wide through aid agreements.					

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE:</u>

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



	Nevada Homeland Security Grant Program (HSGP) PROJEC					: CC	
	Project Proposal for FFY17 HSGP Funding Description Date Subm					d 4/5/17	
1)	PROJECT TITLE:	Enterp	Enterprise Surveillance System				
2)	Proposing/Lead Agency:	City of	North Las Vegas				
3)	1° Project Manager Name/Title:	Adam	Adam Cohen				
	1º Project Manager Contact Info:	Phone:	(702) 633-1854	Email: cohena@cityofnorthlasve	gas.com		
4)	2 [°] Project Manager Name/Title:	Carlito Rayos					
	2 ^o Project Manager Contact Info:	Phone:	Phone: (702) 633-1069 Email: rayosc@cityofnorthlasvegas.com				
5)	Finance/Grant Contact Name/Title:	George Arting					
	Finance/Grant Contact Info:	Phone: (702) 633-1119 Email: artingg@cityofnorthlasvegas.com					
6)	5) CLASSIFICATION - Check the primary intention of the Proposed Project:					Choose one:	

NEWNew; no grant-funded projects have recently (within 5 years) addressed this capabilityENHANCEWill primarily expand or enhance the capability(s) of prior grant-funded projectsSUSTAINWill primarily sustain capability or continue establishment effort in existing program

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Department of Homeland Security conducted a vulnerability assessment of multiple significant asset and areas (SAA's) within the City of North Las Vegas. During that assessment it was identified that "closed circuit television (CCTV) coverage of facility perimeters was limited. They offered the following recommendation, "North Las Vegas should evaluate closed circuit television coverage of their facility perimeters to determine if it meets the facility's security requirements. North Las Vegas should explore options to increase coverage as necessary." North Las Vegas also participated in the Regional Resiliency Assessment Program in 2015 which focused on water reclamation facilities to which similar findings were made. North Las Vegas conducted an evaluation as recommended; this UASI Proposal is a direct result of that.

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. Through this proposal we look to mitigate findings from formal DHS sponsored assessments and ensure the safety and welfare of North Las Vegas' 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 in light of current intelligence.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Public Information and Warning [Mission Area: ALL]
DEM Recommended Core Capability:	Interdiction and Disruption [Mission Area(s): PREVENTION/PROTECTION]

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Early detection will provide security with the real time data and imagery to provide situational awareness to first responder to mitigate any potential threats. It will also empower the City to conduct timely and credible public information and warning.

Project Proposal for ECT TITLE REFERENCE:	FFY17 HSGP Funding Description	Date Submitted	4/5/17
ECT TITLE REFERENCE:	Enterprise Surveillance System		
PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS)	Priority and Urban Area	Strategy
NCHS FFY17 Priority	#4 - OPERATIONAL COORDINATION		
Urban Area Strategy Priority	#3 - PUBLIC INFORMATION AND WARNING		
North Las Vegas IT Staff will rur	the project including detailed requirements gathering,	system selection, contrac	tor selection
			eillance
F	PROJECT IMPLEMENTATION Describe in rough order the process by v North Las Vegas IT Staff will run and implementation managemen	PROJECT IMPLEMENTATION - Describe how, and by whom, the Proposed Project Describe in rough order the process by which the project will be accomplished, identifying who (i.e. staff, co North Las Vegas IT Staff will run the project including detailed requirements gathering, and implementation management. The contracting company will be responsible for ins	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 North Las Vegas IT Staff will run the project including detailed requirements gathering, system selection, contract and implementation management. The contracting company will be responsible for installing the enterprise surverse system. Testing and training will be done through coordination between the IT Staff and the vendor.

RECIPIEN Identify the participating agency(s) and jurisdiction(s) proposed for awards. T WHO

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	City of North Las Vegas, IT Department	North Las Vegas	Adam Cohen
12(b)			
12(c)			

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

If approved this systems on-going operations and maintenance will be funded by the City of North Las Vegas. FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %
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100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

PROJECT ID:

CCDate Submitted 4/5/17

PROJECT TITLE REFERENCE:

Enterprise Surveillance System

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
Project consultant/project managment/system roll-out	\$ 67,000.00	\$ 0.00	\$ 67,000.00
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
Enterprise Surveillance Equipment to be procured for North Las Vegas Significant Assets and Areas in accordance with DHS RRAP and Vulnerability Assessment findings. This will included training on the new system	\$ 183,000.00	\$ 0.00	\$ 183,000.0
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
N/A 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	\$ 0.00	\$ 0.00 State-wide	\$ 0.00 SubTotal
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			
	LV-UASI	State-wide	SubTotal

Nevada Homeland Security Grant Program (HSGP)PROJECT ID:CCProject Proposal for FFY17 HSGP Funding DescriptionDate Submitted4/5/17

PROJECT TITLE REFERENCE:

Enterprise Surveillance System

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

	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	Begin procurement process	10/01/17	03/31/18	6
3	Installation and Implementation of equipment	04/01/18	10/31/18	6
4	Perform testing and training	09/30/18	12/31/18	4
5				
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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 through this proposal we 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 Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.

It aligns with Operation Coordination and Public information and warning as outline above. It also supports Long Term Vulnerability Reduction, Environmental Response; Health and Safety, Infrastructure Systems, Supply Chain/Logistics Integrity and Security and On Scene Security Protection and Law Enforcement.

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

Yes, this project can be implemented in multiple phases.

		Nevada Homeland	PROJECT ID:	CC	
	P	roject Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PRO	ECT	TITLE REFERENCE:	Enterprise Surveillance System		
	d.	Can this project continue wi	thout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	N/A				
imit	e.	Does this project provide a r	neasurable "state-wide" benefit? YES 🔵 NO 💽 Exp	plain below.	
Fields "d" and "e" are li	N/A				

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

N/A

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



	Nevada Homeland Security Grant Program (HSGP) PROJECT				
	Project Proposal for FFY17 HSGP Funding Description Date Subm				
1)	PROJECT TITLE:	Emergency Management Operational Coordination			
2)	Proposing/Lead Agency:	Clark County Office of En	nergency Management		
3)	1° Project Manager Name/Title:	John Steinbeck			
	1º Project Manager Contact Info:	Phone: (702) 455-5710 Email: John.Steinbeck@ClarkCountyNv.gov			
4)	2 [°] Project Manager Name/Title:				
	2 ^o Project Manager Contact Info:	Phone:	Email:		
5)	Finance/Grant Contact Name/Title:	Karen Taylor			
	Finance/Grant Contact Info:	Phone: (702) 455-5710 Email: Karent@ClarkCountyNv.gov			
6)	6) CLASSIFICATION - Check the primary intention of the Proposed Project: Choose o				
	NEW New; no grant-funded projects have recently (within 5 years) addressed this capability				0

Will primarily expand or enhance the capability(s) of prior grant-funded projects

Will primarily sustain capability or continue establishment effort in existing program

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

ENHANCE

SUSTAIN

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Sustain ability to maintain a cloud base software for the Video Conference Equipment purchased and Clark County's WEBEOC software applications for Mapper Professional, ARC GIS, and Resources Request and Deployment Module which are utilized by multiple organizations within Clark County's Urban Area. These software applications increase the ability to exchange information, and collaborate with the State, Local and Federal partners by providing a central collection point for information on tracking incidents and resources management and deployment and GIS mapping functions in an effort to deter, detect terrorism, and protect citizens and visitors to Clark County.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This request allows the Urban Area to provide timely, accurate information concerning physical threats to local Southern Nevada organizations, which allows for increased ability to coordinate operational responses.

 \square

	Nevada Homeland Security Grant Program (HSGP) PROJECT ID:						
	Project Proposal for	r FFY	17 HSGP Funding Description	n	Date Submitted	3/28/17	
PRO	JECT TITLE REFERENCE:	Eme	gency Management Operational Coordin	ation			
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nev	ada Commission on Homeland Security	(NCHS) Prio	rity and Urban Area	Strategy	
	NCHS FFY17 Priority		#2 - INTELLIGENCE AND INFORMATIO	ON SHARIN	IG		
	Urban Area Strategy Priority		#2 - INTELLIGENCE AND INFORMATION	ON SHARIN	IG		
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	Clark County Office of Emergency Management will get quotes from vendors for cloud based systems for the video conference equipment, and Intermedix for the continued annual maintenance of Resource Request and Deployment Module, Mapper Professional and ArcGIS software programs. which are part of Clark County's WEBEOC.						

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County Office of Emergency Management	County	John Steinbeck
12(b)			
12(c)			

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

Clark County Office of Emergency Management will need to apply for continuing yearly sustainment for these projects annual maintenance changes for the cloud based software for video conference equipment and Resources Manager, Mapper Professional and ArcGIS software for WEBEOC.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

FIELD IS LIMITED TO VISIBLE TEXT BOX

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

	Nevada Homeland	PRC	JECT ID:	DD			
	Project Proposal for	Date	Submitted	3/28/17			
PRO.	ECT TITLE REFERENCE:	-					
15)	15) BUDGET - Describe objectives, acquisitions, and quantities within each category. Be specific. Identify UASI and State cost.						
	15a) Planning [Development of poli	cies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal		
					\$ 0.00		

			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
	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 (\$ 38,000.00) Intermedix maintenance Mapper Professional,Resource Manager, and ARCGIS (22,000)			
	\$ 60,000.00		\$ 60,000.00
15d) Training (D. J.	LV-UASI	State-wide	SubTotal
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			¢ 0.00
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve canabilities]	LV-UASI	State-wide	
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	
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] 15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15e) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
			SubTotal \$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]			SubTotal \$ 0.00 SubTotal
	LV-UASI	State-wide	SubTotal \$ 0.00 SubTotal \$ 0.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	DD
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/28/17

PROJECT TITLE REFERENCE:

Emergency Management Operational Coordination

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

	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	09/01/17	12/01/17	4
3	Purchasing process, vendor selection	12/01/17	04/30/18	4
4	Invoicing process	05/01/18	06/30/18	6
5	Begin process again for new fiscal year	07/01/18	06/30/19	12
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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.

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 Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with Nevada Commission on Homeland Security FY priorities #2 Intelligence and Information Sharing and #4 Operational Coordination. These software applications provide centralized situational awareness to all organizations within Clark County.

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

The costs are to maintain current usage of the Video Conference Equipment and WEBEOC,

Nevada Homeland Security Grant Program (HSGP) PROJECT ID: DD									
Nevada Homeian	a Security Grant Program (HSGP)	PROJECT ID:	עט						
Project Proposal fo	Project Proposal for FFY17 HSGP Funding Description Date Submitted 3/28/17								
ROJECT TITLE REFERENCE: Emergency Management Operational Coordination									
d. Can this project continue v	d. Can this project continue without funding? YES 🔵 NO 💽 Explain below.								
maintain programs that are cur	pment will not work without the cloud based application, The rently in use by Clark County. measurable "state-wide" benefit? YES NO (Explain bel		BEOC will						

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission?



	Nevada Homeland Security Grant Program (HSGP)		PROJECT ID:	EE
	Project Proposal for	Date Submitted	4/5/17	
)	PROJECT TITLE:			
•				

2)	Proposing/Lead Agency:	LVMPD/ARMOR					
3)	1º Project Manager Name/Title:	Roger Haskins					
	1º Project Manager Contact Info:	Phone: (702) 271-2325 Email: r5774h@lvmpd.com					
4)	2 [°] Project Manager Name/Title:	Matt Downing					
	2 ^o Project Manager Contact Info:	Phone: (702) 281-9310	Email: m8260d@lvmpd.com				
5)	Finance/Grant Contact Name/Title:	Shalene Flynn					
	Finance/Grant Contact Info:	Phone: (702) 828-8210	Email: s15264f@lvmpd.com				

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	$\overline{\bullet}$
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The purpose of this grant application to sustain and enhance the ability to rapidly detect and identify chemical hazardous material 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) section of the NV CBRNE Task Force within the Las Vegas Urban Area, Clark County, state of NV, and the surrounding regions of the United States.

The high-quality basis of the technology requested allows for the replacement and enhancement of current capabilities currently employed by NCTF. The efficient and effective determination of threat material in a CBRNE incident provides valuable information and intelligence to responding personnel and agencies allowing for the most informed and prepared response.

Equipment items include: liquid, solid and gaseous Chemical detection, classification and identification equipment; High speed video equipment for investigation and identification of explosive or incendiary material; and low-profile, high pressure SCBA equipment for Tactical response to potentially hazardous CBRN environments. The request is to replace or upgrade capabilities by the LVMPD ARMOR Section (containing officers from LVMPD, NHP, NLVPD, and HPD) in coordination with multiple agencies, disciplines, and partnerships throughout NV at multiple, high-profile, large-capacity and real-time operational CBRNE events.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]		
Secondary Core Capability: Operational Coordination [Mission Area: ALL]			
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION		

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. 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 NV CBRNE Task Force (NCTF) personnel to provide the rapid and accurate detection, identification, and informational dissemination in the response and mitigation of CBRNE threats and terrorism events is crucial to the effective and efficient response from local, state, and federal entities.

As a multi-agency, multi-discipline, state-asset, CBRNE unit, the NCTF provides numerous front-line intelligence collection, exploitation, processing, and analysis capabilities in the area of CBRNE response, identification, and mitigation. This project will enhance the speed and accuracy of intelligence collection and hazard identification in CBRNE events. This will result in greater speed of Analysis and Production of vital intelligence to partner agencies on federal, state, local, tribal, and private levels.

	Nevada Homeland Security Grant Program (HSGP)						ISGP)		PROJECT ID:	EE
	Project Proposal for	FFY	(17 H	SGP Fu	Inding	g Desc	ription		Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	CBRN	RNE Re	sponse an	nd Explo	itation				
10)	LO) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed							a Strategy		
	NCHS FFY17 Priority		#2 - I	NTELLIGE	ENCE A	ND INFO	ORMATIO	N SHARIN	IG	
	Urban Area Strategy Priority		#4 - 0	OPERATIO	ONAL C	OORDIN	IATION			
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 procurement of 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	LVMPD/ARMOR section will def performance and specifications. ARMOR project managers. Upo proceed with purchasing equipm purchasing policy.	Bids f n sele	from co ection o	ompeting v of vendor v	vendors with mos	will be re t accepta	eceived ar able bid fo	nd evaluate r pricing a	ed by the LVMPD puncture determined by the LVMPD puncture determined by the second sec	irchasing and delines, we will

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	ARMOR Task Force LVMPD	Las Vegas Metropolitan Police Department	Roger Haskins
12(b)			
12(c)			

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

× [None.	The consumables utilized by the equipment under consideration will be handled by NCTF.
) VISIBLE		
IELD (
μ.		

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

55	45	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID: EE

4/5/17

Date Submitted

PROJECT TITLE REFERENCE:

CBRNE Response and Exploitation

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
			\$ 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
Procure equipment for chemical identification including GCMS and FTIR technology platforms based upon successful bidding by vendors meeting the criteria desired. High-speed video equipment will be procured after a multi-agency board evaluates and determines specifications desired for both material identification and investigation requirements. The low-profile, high presure SCBA will require a joint tactical/technical collaboration for determination and implementation with tactical units from around the valley. As we are both sustaining and enhancing current capabilities, the resources will be phased into use based upon availability and implementation of training for personnel.	\$ 298,000.00	\$ 240,000.00	\$ 538,000.00
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
	LV-UASI	State-wide	TOTAL
15g) PROJECT TOTALS	EV OADI	otate mae	

Nevada Hoi	meland Security	Grant Progra	am (HSGP)
Project Prop	osal for FFY17 H	SGP Funding	Description

PROJECT ID:

Date Submitted 4/5/17

PROJECT TITLE REFERENCE:

CBRNE Response and Exploitation

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	09/01/17	03/01/18	6
3	Vendor and Equipment selection based upon response	03/02/18	06/01/18	3
4	Purchasing contract with vendor	06/01/18	12/01/18	6
5	Receive and Implementation	12/01/18	02/01/19	3
6				
7				
8				
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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.

As the multi-agency Law Enforcement section for the NV CBRNE Task Force, 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 and response in the state of NV.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

As a multi-agency, multi-discipline, state-response entity, the furtherance of quick and accurate CBRNE material identification and detection 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 ensure Operational Coordination of the diverse and multi-disciplined response in concerted effort for the mitigation of hazards identified in a timely manner.

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

The securing of equipment can be scaled within the proportional realism that reduced expenditure and acquisition may result in reduced capability or availability.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	EE
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	CBRNE Response and Exploitation		
	d. Can this project continue w	thout funding? YES 💿 NO 🔵 Explain below.		
are limitied to visible text box size	investigations by multiple entities approaching end of service and	nancements would assist in the speed and accuracy of infor s, there exists a current ability. The current ability employs may result in slower and less accurate results dependent up measurable "state-wide" benefit? YES (•) NO (•) Explain bel	older equipment that	
Fields "d" and "e" are lim	The ARMOR Section of the NV (responded to the VBIED in Linco	CBRNE Task Force is a long-recognized state-wide CBRNE In County (Panaca) and has a history of assisting multiple j area of CBRNE response and investigations.	asset. In 2016, AR	

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

			Anamager	-		I DETAIL BUI	JOLI								
	Agency Name		Name & Contact #	Roger Haski Downing 70 2325/702-28	2-271-	Grant Manager Name & Contact #	Shalene Flynn 70	2.828.8210							
	LETTE	CDDNC Deenenee and Evaluation									[
	IJ IIILE:	CBRNE Response and Exploitation One Budget Per Funding Stream													
		SHSP													
¥	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
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	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will
			21	Туре											affect your program
	Esimon	Desitions Demuiner, Educe to be semante from													affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													anect your program
	Fringe Benefits							s -					\$0.00		
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	Benefits	Personnel Costs above						\$-							
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EC	Benefits Fringe Sub- Total OST NARRATIVE	Personnel Costs above	PLAINE IN		POSITIONS A	ND DELIVERABLE	S. NARRATIVE W	s - s - s -	ENSURE ITEMS		COMPLETED IN TH	E GRANT	\$0.00 \$0.00 \$0.00	\$0.00	
EC	Benefits Fringe Sub- Total	Personnel Costs above	PLAINE IN		POSITIONS A	ND DELIVERABLE	S. NARRATIVE W	s - s - s -	ENSURE ITEMS	LISTED WILL BE	COMPLETED IN TH	E GRANT	\$0.00 \$0.00 \$0.00	\$0.00	
E C	Benefits Fringe Sub- Total OST NARRATIVE	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN			POSITIONS A Category of Each Travel	ND DELIVERABLE Travel Reference # from Addendum	S. NARRATIVE W	s - s - s -	ENSURE ITEMS	LISTED WILL BE	COMPLETED IN TH Secondary Core Capability	E GRANT Funding Source	\$0.00 \$0.00 \$0.00	\$0.00 Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Benefits Fringe Sub- Total OST NARRATIVE	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	DETAIL THE Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
E C	Benefits Fringe Sub- Total OSTINARRATIVE IERE CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	DETAIL THE Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
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E C	Benefits Fringe Sub- Total OSTINARRATIVE IERE CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	DETAIL THE Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget 50.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
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ve i	Benefits Fringe Sub- Total OST NARRATIVE IERE CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub- Travel Sub-	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	S - S - S - ILL BE USED TO Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will

ne #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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													
17								-					\$0.00		
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19 20								-					\$0.00 \$0.00		
21								-					\$0.00		
	Planning Sub-							·					\$0.00	\$0.00	
	Total G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	S AND DELIVERA	BLES. NARRATIVE	WILL BE USED	TO ENSURE ITE	IS LISTED WILL	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
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ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase	Previous Funding		QUANTITY	UNIT COST	TOTAL		Secondary Core	AEL Ref #	Funding	Total Budget	Line Item	Line Item Reductions Descriptions on how it will
	OATEOORT		Туре	Туре		QUANTIT		IOTAL	Capability	Capability		Source	Total Duuget	Reductions	affect your program
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO													
	Organization	IS THICALLE FOR FOSION CENTER ACTIVITIES TO INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.													
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				Previous											Line Item Reductions
ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	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 an AEL													
28								ş -					\$ -		
29			Quatala	Other				ş -					\$-		
30		GCMS Chemical Identifier	Sustainm ent	Other Federal		1.00	140.000.00	\$ 140.000.00			07CD-02-DPGC	SHSP	\$ 140.000.00		
30			Enhance			1.00	100,000.00				14MD-01-VCAM	SHSP	\$ 140,000.00 \$ 100.000.00		
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Procure equipment for chemical identification utilizing GCMS technology platforms based upon successful bidding by vendors meeting the criteria desired. High-speed video equipment will be procured after a multi-agency board evaluates and determines specifications desired for both material identification and investigation requirements.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		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	9				_								
40											\$ -		\$ -		
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	Training Sub- Total										\$ -		\$ -	-	
TRAINING	G COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAB	IES NARRATIVE	WILL BE USED	TO ENSURE ITEM	AS LISTED WILL	BE COMPLETED IN .	THE GRANT			

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
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51											\$ -		\$ -		l
52											\$ -		\$ -		l
53											\$-		\$-		1
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55											\$ -		\$-		1
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	Exercise Sub- Total										s -		\$-	-	
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Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 240,000.00	\$ -	
All bud	dets require an	email approval from the financial and/or grant n	nanager							

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HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

							DGET								
	Agency Name		Name & Contact #)2-271-	Grant Manager Name & Contact #	Shalene Flynn 70	2.828.8210							
	II TITLE.	CBRNE Response and Exploitation													
	IJ IIILE:	One Budget Per Funding Stream	-			1									
		UASI													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
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ie #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will
			Type	Туре			(nours)	Amount	Capability	Capability		Source		Reductions	affect your program
	Fringe	Positions Require: Fringe to be separate from Personnel Costs above													
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5 6	Benefits							\$ -					\$0.00 \$0.00		
6 7	Benefits							\$ - \$ -					\$0.00 \$0.00		
6	Fringe Sub-						-	\$ -					\$0.00 \$0.00 \$0.00		
6 7 8	Fringe Sub-	-						s - s - s -					\$0.00 \$0.00	\$0.00	
6 7 8	Fringe Sub- Total COST NARRATIVE		PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	- ES. NARRATIVE W	s - s - s -	ENSURE ITEMS	LISTED WILL BE	COMPLETED IN TH	E GRANT	\$0.00 \$0.00 \$0.00	\$0.00	
6 7 8	Fringe Sub- Total COST NARRATIVE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		DETAIL THE Previous Funding Type	E POSITIONS A Category of Each Travel	Travel Reference		s - s - s -	ENSURE ITEMS	LISTED WILL BE Primary Core Capability	COMPLETED IN TH Secondary Core Capability	E GRANT Funding Source	\$0.00 \$0.00 \$0.00	\$0.00 Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
6 7 8 RINGE C arrative I	Fringe Sub- Total OST NARRATIVE	EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	Purchase	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 INGE C	Fringe Sub Total OST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 INGE C Inge C Inge #	Fringe Sub Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 INGE C rrrative 9 10 11 11	Fringe Sub Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
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6 7 8 NGE C rative I e # 9 10 11 12 13 14 15	Fringe Sub Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 INGE C rrative I ne # 9 10 11 11 12 13 14	Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Equipment Organization	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - \$ - ILL BE USED TO Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item Reductions	Descriptions on how it will
6 7 8 NINGE C Intrative I 10 11 12 13 14 15 16	Fringe Sub- Total OST NARRATIVE HERE CATEGORY Travel Planning Training Exercise Equipment Organization	PURPOSE OF EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	S - S - S - ILL BE USED TO Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will

	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program
	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													
17								-					\$0.00		
18								-					\$0.00		
19 20							-	-					\$0.00 \$0.00		
21								-					\$0.00		
	Planning Sub-							¢					\$0.00	\$0.00	
ANNIN	Total G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERA	BLES. NARRATIVI	WILL BE USED	TO ENSURE ITE	MS LISTED WILL	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
rative I	HERE														
			Purchase	Previous					Brimany Cara	Secondary Care		Funding		Line Item	Line Item Reductions
ne #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Type	Funding		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Reductions	Descriptions on how it will
		DESCRIPTION OF ORGANIZATION ACTIVITES MUST		Туре											affect your program
		BE DETAILED OUT, SEE YOUR GUIDANCE FOR													
		DESCRIPTION OF ORGANIZATION. THIS CATEGORY													
	Organization	IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TO													
		INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS													
		IS NOT A SUPPLY CATEGORY.													
22								\$ -					\$ -		
23 24								\$ - \$ -					<u>\$</u> - \$-		
24								\$ - \$ -					s -		
													Ŷ		
26								\$-					\$-		
								\$ - \$ -					\$ - \$ -		
26	Organization														
26 27	Sub-Total	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	EASE EXPL	AINE IN DET	AIL THE POSI	TIONS AND DELIV		\$ - \$ -	JSED TO ENSUR	E ITEMS LISTED	WILL BE COMPLET	ED IN THE		-	
26 27 RGANIZ	Sub-Total ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	EASE EXPL	AINE IN DET	AIL THE POSIT	TIONS AND DELIV		\$ - \$ -	JSED TO ENSUR	E ITEMS LISTED V	WILL BE COMPLETI	ED IN THE		-	
26 27 RGANIZ	Sub-Total ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	EASE EXPL	AINE IN DET	AIL THE POSIT	TIONS AND DELIV		\$ - \$ -	JSED TO ENSUR	E ITEMS LISTED	WILL BE COMPLETI	ED IN THE		•	
26 27	Sub-Total ATION COST NAI HERE			AINE IN DET	AIL THE POSIT		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U						-	Line Item Reductions
26 27 RGANIZ	Sub-Total ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	Purchase	Previous Funding	AIL THE POSIT	TIONS AND DELIV		\$ - \$ -	Primary Core	Secondary Core	WILL BE COMPLET	Funding		Line Item Reductions	Descriptions on how it will
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26 27 RGANIZ	Sub-Total ATION COST NAI HERE	EQUIPMENT DETAIL DESCRIPTION DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE	Purchase Type	Previous Funding	AIL THE POSIT		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 RGANIZ arrative I	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION	Purchase Type	Previous Funding	AIL THE POSIT		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 RGANIZ arrative I	Sub-Total ATION COST NAI HERE	EQUIPMENT DETAIL DESCRIPTION DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR	Purchase Type	Previous Funding	AIL THE POSIT		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 RGANIZ arrative I	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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	Purchase Type	Previous Funding	AIL THE POSI		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 RGANIZ arrative I	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE DETAILED OUT (GENERAL TERMS AND INFORMATION WILL NOT BE ACCEPTED BASED UPON NON- COMPLIANCE) SEE YOUR GUIDANCE FOR	Purchase Type	Previous Funding	AIL THE POSI		ERABLES. NARR	\$- <mark>\$-</mark> ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 RGANIZ arrative I ne # 28	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL	Purchase Type	Previous Funding Type Other	AIL THE POSIT	QUANTITY	UNIT COST	\$ - \$ - ATIVE WILL BE U TOTAL \$ -	Primary Core	Secondary Core	AEL Ref #	Funding Source	\$ - \$ - Total Budget \$ -		Descriptions on how it will
26 27 RGANIZ arrative I	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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	Purchase Type	Previous Funding Type Other Federal	AIL THE POSI		UNIT COST	S - S - ATIVE WILL BE U	Primary Core	Secondary Core		Funding	\$ - \$ -		Descriptions on how it will
26 27 GANIZ rrative l e # 28 29	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA	Purchase Type Enhance Sustainm	Previous Funding Type Other Federal Other	AIL THE POSIT	QUANTITY	UNIT COST	\$ - \$ - ATIVE WILL BE (TOTAL \$ 101,000.00	Primary Core	Secondary Core	AEL Ref #	Funding Source	\$ - \$ - Total Budget \$ - \$ 101,000.00		Descriptions on how it will
26 27 GANIZ rative l e # 28 29	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL	Purchase Type	Previous Funding Type Other Federal		QUANTITY	UNIT COST	\$ - \$ - ATIVE WILL BE (TOTAL \$ 101,000.00	Primary Core	Secondary Core	AEL Ref #	Funding Source	\$ - \$ - Total Budget \$ -		Descriptions on how it will
26 27 GANIZ rative I e # 28 29 30	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA	Purchase Type Enhance Sustainm ent	Previous Funding Type Other Federal Other Federal Other Federal		QUANTITY	ERABLES. NARR UNIT COST 16,833.33 50,000.00	\$ - \$ - ATIVE WILL BE (TOTAL \$ 101,000.00	Primary Core	Secondary Core Capability	AEL Ref #	Funding Source	\$ - \$ - Total Budget \$ - \$ 101,000.00		Descriptions on how it will
26 27 GANIZ rative l e # 28 29 30 31	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA Warranties FTIR Chemical Identifier	Purchase Type Enhance Sustainm ent Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other		QUANTITY 6.00 1.00 2.00	ERABLES. NARR UNIT COST 16,833.33 50,000.00 70,000.00	\$ - \$ - ATIVE WILL BE U TOTAL \$ 101,000.00 \$ 50,000.00 \$ 140,000.00	Primary Core	Secondary Core Capability	AEL Ref # 19GN-00-COMP 21GN-00-MAIN 07CD-01-FTIR	Funding Source UASI UASI UASI	\$ - \$ - Total Budget \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00		Descriptions on how it will
26 27 GANIZ rative l e # 28 29 30 31 32	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA Warranties	Purchase Type Enhance Sustainm ent Sustainm ent	Previous Funding Type Other Federal Other Federal Other Federal	AIL THE POSIT	QUANTITY 6.00 1.00	ERABLES. NARR UNIT COST 16,833.33 50,000.00 70,000.00	\$ - \$ - ATIVE WILL BE U TOTAL \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00 \$ 7,000.00	Primary Core	Secondary Core Capability	AEL Ref # 19GN-00-COMP 21GN-00-MAIN	Funding Source	\$ - \$ - Total Budget \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00 \$ 7,000.00		Descriptions on how it will
26 27 GANIZ rrative I e # 28	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA Warranties FTIR Chemical Identifier	Purchase Type Enhance Sustainm ent Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other		QUANTITY 6.00 1.00 2.00	ERABLES. NARR UNIT COST 16,833.33 50,000.00 70,000.00	\$ - \$ - ATIVE WILL BE U TOTAL \$ 101,000.00 \$ 50,000.00 \$ 140,000.00	Primary Core	Secondary Core Capability	AEL Ref # 19GN-00-COMP 21GN-00-MAIN 07CD-01-FTIR	Funding Source UASI UASI UASI	\$ - \$ - Total Budget \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00		Descriptions on how it will
26 27 GANIZ rative I 28 29 30 31 32 33 33 34 35	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA Warranties FTIR Chemical Identifier	Purchase Type Enhance Sustainm ent Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other		QUANTITY 6.00 1.00 2.00	ERABLES. NARR	\$ - \$ - ATIVE WILL BE (TOTAL \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00 \$ 7,000.00 \$ 7,000.00 \$ - \$ - \$ - \$ -	Primary Core	Secondary Core Capability	AEL Ref # 19GN-00-COMP 21GN-00-MAIN 07CD-01-FTIR	Funding Source UASI UASI UASI	\$ - \$ - Total Budget \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00 \$ 7,000.00 \$ 7,000.00 \$ - \$ - \$ - \$ -		Descriptions on how it will
26 27 GANIZ rative l e # 28 29 30 31 32 33	Sub-Total ATION COST NAI HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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 an AEL Low Profile, High Pressure SCBA Warranties FTIR Chemical Identifier	Purchase Type Enhance Sustainm ent Sustainm Sustainm	Previous Funding Type Other Federal Other Federal Other		QUANTITY 6.00 1.00 2.00	ERABLES. NARR	\$ - \$ - ATIVE WILL BE U TOTAL \$ - \$ 101,000.00 \$ 50,000.00 \$ 140,000.00 \$ 7,000.00 \$ 7,000.00 \$ - \$ -	Primary Core	Secondary Core Capability	AEL Ref # 19GN-00-COMP 21GN-00-MAIN 07CD-01-FTIR	Funding Source UASI UASI UASI	\$ - \$ - Total Budget \$ - \$ 101,000,00 \$ 50,000,00 \$ 140,000,00 \$ 7,000,00 \$ - \$ -		Descriptions on how it will

298,000.00

EQUIPMENT Sub-Total Sub-To

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		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						-							
40											\$-		\$-		
41											\$ -		\$ -		
42											\$ -		\$ -		
43											\$ -		\$ -		
44											\$-		\$ -		
45											\$ -		\$ -		
46											\$-		\$ -		
47											\$ -		\$ -		
48											\$ -		\$-		
49											\$ -		\$ -		
	Training Sub- Total										\$-		\$-	-	
TRAINING	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I	EXPLAINE I	N DETAIL T	HE POSITIONS	AND DELIVERAB	LES. NARRATIVE	WILL BE USED	TO ENSURE ITEM	AS LISTED WILL	BE COMPLETED IN	THE GRANT			

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$ -		
51											\$-		\$ -		
52											\$-		\$-		
53											\$-		\$-		
54											\$-		\$ -		
55											\$-		\$-		
56											\$-		\$-		
57											\$ -		\$ -		
	Exercise Sub-														
	Total										\$-		\$-	-	
EXER	CISE COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL 1	THE POSITIONS	SAND DELIVERAB	LES. NARRATIVE	WILL BE USED	TO ENSURE ITEN	NS LISTED WILL	BE COMPLETED IN	THE GRANT			
Narrat	ve HERE												Total Original	Line Item	

Narrative	Narrative HERE										Total Original Budget	Line Item Reductions Total		
												\$ 298,000.00	\$ -	
All buc	ante roquiro an	email approval from the financial and/or	arant managor											

All budgets require an email approval from the financial and/or grant manager

Nevada Homeland Security Grant Program (HSGP) **PROJECT ID: Project Proposal for FFY17 HSGP Funding Description** Date Submitted 3/28/17 **PROJECT TITLE:** Metropolitan Medical Response System 1) 2) **Proposing/Lead Agency:** City of Las Vegas - Department of Fire & Rescue 3) 1º Project Manager Name/Title: Chris Sproule, Chief MMRS Coordinator 1º Project Manager Contact Info: Phone: (702) 303-0968 Email: csproule@lasvegasnevada.gov Will Grass, Fire Training Officer 4) 2[°] Project Manager Name/Title: 2° Project Manager Contact Info: (702) 271-0480 Email: wgrass@lasvegasnevada.gov Phone: 5) Finance/Grant Contact Name/Title Priscilla Wdowial

Finance/Grant Contact Info: Phone: (702) 229-6045 Email: pwdowiak@lasvegasnevada.gov

CLASSIFICATION - Check the primary intention of the Proposed Project:

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	$\overline{\bullet}$

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The goal of this project is to sustain the Metropolitan Medical Response System (MMRS), support the 2017 Nevada Commission on Homeland Security Approved Priorities of Operational Coordination and Intelligence and Information Sharing, and strengthen the core capabilities of Operational Communications and Public Health and Medical 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)

6)

PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

MMRS supports Operational Coordination and serves 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. 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.

MMRS also supports Intelligence and Information Sharing through the use of FirstWatch. The FirstWatch Syndromic Surveillance and Early Warning System provides early warnings and automated alerts for incidents such as bomb threats, hazardous material incidents, structural fires, multi-casualty incidents, and possible terrorist attacks.

	Nevada Homeland	Security Grant Program (H	SGP)	PROJECT ID:	FF							
	Project Proposal for	FFY17 HSGP Funding Desci	ription	Date Submitted	3/28/17							
PRO.	JECT TITLE REFERENCE:	Metropolitan Medical Response System										
10)	PRIORITIES - Identify applicab Objective to be addressed	e Nevada Commission on Homeland S	ecurity (NCHS) Pric	ority and Urban Area	Strategy							
	NCHS FFY17 Priority	#4 - OPERATIONAL COORDIN	ATION									
	Urban Area Strategy Priority	#4 - OPERATIONAL COORDIN	ATION									
11)	Describe in rough order the process by v	- Describe how, and by whom, the Pro- hich the project will be accomplished, identifyin	g who (i.e. staff, contra	ctor, or ?) will perform wha								
FIELD IS LIMITED TO VISIBLE TEXT BOX	of planning, organizing, equippir will work closely with the City of	or is the Project Manager and will be re g, training, and conducting exercises, a .as Vegas Office of Emergency Manag ntegrity and appropriate accountability	s it pertains to this ement and Finance	project. The MMRS C Department to ensure	coordinator							

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Las Vegas Fire & Rescue	City of Las Vegas	Chris Sproule
12(b)			
12(c)			

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

Sustainment activities for recurring costs will include transferring these costs from MMRS program funding to the jurisdictions/agencies that are currently benefiting from the services.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID: FF

3/28/17

Date Submitted

PROJECT TITLE REFERENCE:

Metropolitan Medical Response System

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
Phone			
	\$ 900.00		\$ 900.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
156) Organization [Establishment of organization, structure, leadership, and operation]			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
FirstWatch Real Time Early Warning System Annual Maintenance	\$ 45,000.00		\$ 45,000.00
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
MMRS Coordinator Salary and Benefits (12 months)			
	\$ 80,000.00		\$ 80,000.00
Salary: 50% of \$93,000.00=\$46,500 Benefits: 50% \$67,000.00=33,500 15g) PROJECT TOTALS	\$ 80,000.00	State-wide	\$ 80,000.00 TOTAL

Nevada Homeland	Nevada Homeland Security Grant Program (HSGP) Project Proposal for EEV17 HSGP Funding Description						
Project Proposal for	Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description						
PROJECT TITLE REFERENCE:	Metropolitan Medical Response 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	Procure and Schedule Training (IMT, NIMS/ICS, etc.)	01/01/18	02/01/18	1
3	Maintain MMRS Capabilities	01/01/18	10/01/18	10
4	Strengthen IMT Capabilities	01/01/18	10/01/18	10
5	Strengthen Public Health, Fire, EMS, and Law Enforcement Integration	01/01/18	10/01/18	10
6	Conduct Training (IMT, NIMS/ICS, etc.)	02/01/18	10/01/18	9
7	Update Plans, Policies, and Procedures as Appropriate	07/01/18	10/01/18	3
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.

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 Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This program is in direct alignment with 2017 Nevada Commission on Homeland Security Approved Priority #4, Operational Coordination, and serves 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.

It is also in direct alignment with 2017 Nevada Commission on Homeland Security Approved Priority #2, Intelligence and Information Sharing, through the use of the FirstWatch. The FirstWatch Syndromic Surveillance and Early Warning System provides early warnings and automated alerts for incidents such as bomb threats, hazardous material incidents, structural fires, multi-casualty incidents, and possible terrorist attacks.

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

Funding for this project is reduced as low as it can go.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	FF								
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/28/17								
PROJ	ECT TITLE REFERENCE:	Metropolitan Medical Response System										
	d. Can this project continue wi	thout funding? YES 🔵 NO 💿 Explain below.										
"d" and "e" are limitied to visible text box size	Elimination of the few remaining	down to bare bones in proportion to reductions in homelan vital components would be detrimental to the program. neasurable "state-wide" benefit? YES (•) NO () Explain be		ığ.								
Fields "d" and "e" are li		loyable resources including three (3) mass casualty incide orts the continued development, training, and deployment r eam.										

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

"Although the Citizen Corps Program (CCP) and Metropolitan Medical Response System (MMRS) are no longer funded as discrete grant programs within HSGP, SAAs may include IJs funding to support CCP and MMRS activities/programs. Activities funded under these projects must meet the allowability requirements of the SHSP and UASI programs. The following coordination requirements will remain in place for proposed activities that support mass casualty incident preparedness, as well as citizen preparedness."

The Department of Homeland Security (DHS), Notice of Funding Opportunity (NOFO), Fiscal Year 2016 Homeland Security Grant Program (HSGP), Appendix C – Funding Guidelines, Page 57 of 86.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

			manager		NE ITEM D	ETAIL BUDG						1	1		
	Agency Name		Name & Contact #		ıle 702-303-	Grant Manager Name & Contact #		ule 702-303-096	18						
	IJ TITLE:	Metropolitan Medical Response System													
		One Budget Per Funding Stream													
		UASI													
e #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
			Sustainm ent	Other					Operational	Intelligence and Information					
1		Salary for MMRS Coordinator - 12 Months	ent	Federal	46500	50%	b	\$ 46,500.00 \$ -	Coordination	Sharing		UASI	\$ 46,500.00 \$ -		
3								s -					\$ - \$ -		
4				1	1		1	\$-					\$-		İ
	Personnel Sub-Total							\$ 46,500,00					\$ 46,500,00	\$-	
RSONN	IEL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAI	NE IN DETAI	L THE POSITIO	NS AND DELIVER	ABLES. NA		BE USED TO EN	SURE ITEMS LIST	ED WILL BE COMPL	ETED IN THE		Ψ -	
• #	CATEGORY	a large-scale incident. FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													ancor you program
5	Fringe Benefits		Sustainm ent	¹ Other Federal	33500	50%		\$ 33,500.00	Operational Coordination	Intelligence and Information Sharing		UASI	\$33,500.00		
5		Personnel Costs above		Outer	33500	50%		\$ 33,500.00 \$ - \$ -		Information		UASI	\$33,500.00 \$0.00 \$0.00		
5 6 7	Benefits	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months		Outer	33500	50%	- -	\$ -		Information		UASI	\$0.00		
5 6 7 8	Benefits Fringe Sub- Total	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months	ent	Federal			-	\$ - \$ - \$ - \$ 33,500.00	Coordination	Information Sharing			\$0.00 \$0.00	\$0.00	
5 6 7 8	Benefits Fringe Sub- Total OST NARRATIVE	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp	ent PLAINE IN loyees (Me	DETAIL THE	POSITIONS A	ND DELIVERABL	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing		D IN THE	\$0.00 \$0.00 \$0.00	••••	Line Item Reductions
5 6 7 8 INGE C	Benefits Fringe Sub- Total OST NARRATIVE	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	ent PLAINE IN loyees (Me	DETAIL THE	POSITIONS A		ES. NARRA	\$ - \$ - \$ 33,500.00 TIVE WILL BE U:	Coordination	Information Sharing	ILL BE COMPLETED		\$0.00 \$0.00 \$0.00	\$0.00	
5 6 7 8	Benefits Fringe Sub- Total OST NARRATIVE se of this line item	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	PLAINE IN loyees (Me	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 \$33,500.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 Purpos	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$0.00 \$33,500.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 9 9 10 11	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 Total Budget \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 NGE C purpos e # 9 10 11 11	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 8 9 10 11 11 12 13 14	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 \$33,500.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 8 NGE C e # 9 10 10 11 11 12 13 14 15	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 \$33,500.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will
5 6 7 8 NGE C purpos # 9 10 11 12 13 14 15 16	Benefits Fringe Sub- Total OST NARRATIVE se of this line item CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above Fringe Benefits for MMRS Coordinator - 12 Months REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX is to cover fringe benefits provided to City of Las Vegas emp 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	ent PLAINE IN loyees (Me Purchase Type Select	DETAIL THE dical, dental, Previous Funding	E POSITIONS A vision, etc.).	ND DELIVERABLI Travel Reference # from	ES. NARRA	\$ - \$ - \$ - \$ 33,500.00 TIVE WILL BE U	Coordination	Information Sharing TTEMS LISTED W	Secondary Core	DIN THE	\$0.00 \$0.00 \$33,500.00 \$33,500.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Line Item Reductions Descriptions on how it will

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	FF
	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	l													
17		Phone	Sustainm ent	Other Federal		900.00	1.00	900.00	Operational Coordination	Intelligence and Information Sharing		UASI	\$900.00			
18 19								-					\$0.00			_
20 21								-					\$0.00 \$0.00			-
	Planning Sub- Total							\$ 900.00					\$900.00	\$0.00		
PLANNIN		IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERA	BLES. NARI		USED TO ENSU	RE ITEMS LISTE	D WILL BE COMPLE	TED IN THE	\$900.00	40.00		_
The purpo	se of this line item	is to cover planning costs associated with the MMRS Coordi	nator positic	n. These inc	lude computer, p	phone, and other lil	ke costs nee	ded for the MMRS	to carry out their	duties.	_					_
Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.						<u>^</u>								-
22								\$- \$-					\$ - \$ -			-
24								\$ -					\$ -			
25 26								\$ - \$ -					\$ - \$ -			
27	Organization							\$-					\$ -			
	Sub-Total							\$-					\$ -	-		
ORGANIZ		RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	AIL THE POSIT	TIONS AND DELIV	ERABLES.	NARRATIVE WI	L BE USED TO E	INSURE ITEMS L	ISTED WILL BE CON	APLETED IN				
																-
Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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 an AEL	1													
28		FirstWatch Annual Maintenance	Sustainm ent	Other Federal		1.00	45,000.00	\$ 45,000.00	Operational Coordination	Intelligence and Information Sharing	04AP-06-CBRN	UASI	\$ 45,000.00			
29 30								\$ - \$ -					ъ - \$ -			-
31 32								\$ -					\$ - \$ -			
33								\$- \$-					\$ - \$ -			
34 35								s - s -					\$ - \$			-
36								\$ -					ş - \$ -			
37 38								\$- \$-					\$ - \$ -			4
39								\$ -					\$ -			1
	EQUIPMENT Sub-Total							\$ 45,000.00					\$ 45,000.00	_		
EQUIPME		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAIN	E IN DETAIL	THE POSITION	IS AND DELIVER	ABLES. NA		E USED TO ENS	URE ITEMS LIST	ED WILL BE COMPL	ETED IN THE				-

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	FF
	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					-	-								
40											\$-		\$-			i
41											\$ -		\$-			I
42											\$-		\$-			i
43											\$ -		\$-			1
44											\$ -		\$-			1
45											\$-		\$-			4
46											\$-		\$-			4
47											\$ -		\$-			ł
48											\$ -		\$ -			1
49											\$ -		\$-			i
	Training Sub- Total										\$-		\$-	-		

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.ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type		Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		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)												-	
50											\$-		\$-		
51											\$-		\$ -		
52											\$-		\$ -		
53											\$-		\$ -		
54											\$-		\$ -		
55											\$-		\$ -		
56											\$-		\$ -		
57											\$-		\$ -		
	Exercise Sub- Total										\$-		\$-	-	
XERCIS	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERAR	RIES NARE	ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED	WILL BE COMPLE	ED IN THE			

	Narrative HI	IERE						Total Original Budget	Line Item Reductions Total	
\$ 125,900.00 \$ -								\$ 125,900.00	s -	

All budgets require an email approval from the financial and/or grant manager

	Nevada Homeland Security Grant Program (HSGP) PROJECT							
	Project Proposal for	pject Proposal for FFY17 HSGP Funding Description Date Subm						
1)	PROJECT TITLE:	North	rth Las Vegas EOC Sustainment					
2)	Proposing/Lead Agency:	City of	ty of North Las Vegas					
3)	1º Project Manager Name/Title:	Solom	Solome Barton					
	1º Project Manager Contact Info:	Phone:	(702) 633-1125	Email: bartons@cityofnorthlasve	gas.com			
4)	2 [°] Project Manager Name/Title:	Carlito	Rayos					
	2 ^o Project Manager Contact Info:	Phone:	(702) 633-1069	Email: rayosc@cityofnorthlasveg	as.com			
5)	Finance/Grant Contact Name/Title:	George	e Arting					
	Finance/Grant Contact Info:	Phone:	(702) 633-1119	Email: artingg@cityofnorthlasveg	gas.com			
6)	CLASSIFICATION - Check the p	rimary	intention of the P	roposed Project:		Choose one:		

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

North Las Vegas' (NLV) Emergency Operations Center (EOC) is a central command and control facility where the City provides emergency preparedness and conducts emergency management functions at a strategic level in an emergency situation. The current EOC was built in 2009 and the equipment is outdated and has surpassed useful life for efficiency. Replacement of the equipment and operating systems will enhance and maintain capability for EOC preparations, response, in support of high profile events including but not limited to NASCAR, Electric Daisy Carnival, and Aviation Nation. It will also help us respond to incidents involving the I-15/215 beltway transportation corridors, Union Pacific Rail Line, inter-modal transfer stations and commodity pipelines which make North Las Vegas among the busiest and most economically viable regions in Nevada. The Nevada Field Office for the Department of Energy and several high hazard facilities are also located in NLV. The State of Nevada and the Greater Las Vegas Valley have a vested interested in protecting this area. Although the Speedway itself is in unincorporated Clark County, NLVFD would certainly be first in scene and certainly a member of the unified command. This proposal will make North Las Vegas better prepared and equipped to respond to and stabilize a terrorist attack on any and all of these key resources, critical infrastructures and symbolic venues/events. This proposal will also allow us to come in to compatibility with the state-wide Public Information and Warning Plan, the 211 Strategic Plan and become an Integrated Public Alert and Warning (iPAWS) compliant Collaborative Operating Group.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Public Information and Warning [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Enhance Operational Coordination by establishing and maintaining a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities. This project will increase public Information and warning as appropriate by establishing a COG, in accordance with the Statewide Public Warning/Public Information Plan and the 2-11 Strategic Plan. Replacement of the equipment and operating systems will enhance and maintain maximum capabilities for EOC preparations, response in addition to supporting high profile events in and around the North Las Vegas area to include Nellis Air Force Base and the Las Vegas Motor Speedway. Materialize resiliency with all these processes by replacing outdated and unsupported technology currently in place and building more equitable redundancy at secondary EOC.

	Nevada Homeland	l Sec	Irity Grant Program (HSGP)		PROJECT ID:	GG
	Project Proposal for	· FFY	7 HSGP Funding Description	n	Date Submitted	4/5/17
PRO.	IECT TITLE REFERENCE:	North	Las Vegas EOC Sustainment			
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nev	da Commission on Homeland Security	(NCHS) Prio	rity and Urban Area	Strategy
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION			
	Urban Area Strategy Priority		#3 - PUBLIC INFORMATION AND WAR	RNING		
FIELD IS LIMITED TO VISIBLE TEXT BOX			e old equipment in order to achieve IPA tallation and maintenance agreements w			

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	MHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	City of North Las Vegas Office of Emergency Management	North Las Vegas, NV	Carlito Rayos
12(b)			
12(c)			

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

x	NLV will support operations and maintenance through the general fund.
KT BOX	
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LIMITED	
FIELD IS	
Н	

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

EV OASI / State Mac / TOTAE /	LV-UASI %	State-wide %	TOTAL %
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100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) **Project Proposal for FFY17 HSGP Funding Description**

PROJECT ID: GG

Date Submitted 4/5/17

PROJECT TITLE REFERENCE:

North Las Vegas EOC Sustainment

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
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
Procurement of North Las Vegas Emergency Operations Center (EOC) equipment to include upgrade for iPAWS compliance.	\$ 125,000.00	\$ 0.00	\$ 125,000.0
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
	\$ 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] N/A		State-wide \$ 0.00	SubTotal \$ 0.00
	LV-UASI		

3

Nevada Homeland Security Grant Program (HSGP)
Project Proposal for FFY17 HSGP Funding Description

PROJECT ID:

Date Submitted 4/5/17

PROJECT TITLE REFERENCE:

North Las Vegas EOC Sustainment

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	Begin procurement processes	10/01/17	03/31/18	6
3	Receipt of equipment	03/01/18	03/31/17	1
4	Installation & testing of equipment	04/01/18	08/31/18	4
5	Training/Table-top Exercises/Seminars	08/01/18	10/31/18	2
6	Pursue IPAWS/COG Designation and Implementation of State-Wide Public Information and Warning Plan as well as 2-11 Strategic Plan	10/15/18	03/31/19	6
7				
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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 I-15, 215 beltway transportation corridors, rail line, inter-modal transfer stations and commodity pipelines make NLV among the busiest and most economically viable regions in Nevada. When coupled with the Las Vegas Motor Speedway, Nellis Air Force Base and their on-going special events, this region makes up a significant amount of travel and tourism. We also have the Nevada Field Office for the Department of Energy within our jurisdiction and multiple high hazard facilities. The State of Nevada and the Greater Las Vegas Valley have a vested interested in protecting this area. Although the Speedway itself is in unincorporated Clark County, NLVFD would certainly be first on scene and certainly a member of the unified command. This proposal will make North Las Vegas better prepared and equipped to respond to and stabilize a terrorist attack on any and all of these key resources, critical infrastructures and symbolic venues/events. It will also serve to augment and enhance existing projects such at iPAWS, 2-11 and the State-Wide Public Info and Warning Plan.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with the Operational Coordination as well as the Public Information and Warning priorities for the Nevada Commission on Homeland Security Grant.

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

If necessary, the project funding can be reduced or phased however every day that we do not execute a technology refresh we run the risk of rendering our EOC completely useless whereas the hardware is extremely outdated.

		Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	GG
	P	roject Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PRO	ECT	TITLE REFERENCE:	North Las Vegas EOC Sustainment		
	d.	Can this project continue wi	thout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	N/A				
imit	e.	Does this project provide a r	neasurable "state-wide" benefit? YES 🔵 NO 💽 Explain	below.	
Fields "d" and "e" are li	N/A				

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

N/A

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project

				DDO IS CT ID.		
	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID:	HH	
	Project Proposal for	FFY17 HSGP Fund	ling Description	Date Submitted	4/5/17	
1)	PROJECT TITLE:	Statewide Interoperability	Coordinator (SWIC)			
2)	Proposing/Lead Agency:	DPS Division Of Emerger	S Division Of Emergency Management			
3)	1° Project Manager Name/Title:	Caleb Cage	Caleb Cage			
	1º Project Manager Contact Info:	Phone: (775) 687-0300	Email: cscage@dps.state.nv.us			
4)	2 [°] Project Manager Name/Title:	Kelli Anderson	Kelli Anderson			
	2 ^o Project Manager Contact Info:	Phone: (775) 687-0321	Email: kanderson@dps.state.nv.	us		
5)	Finance/Grant Contact Name/Title:	Justin Luna	Justin Luna			
	Finance/Grant Contact Info:	Phone: (775) 687-0304	Email: justin.luna@dps.state.nv.	us		
6)	CLASSIFICATION - Check the p	primary intention of the Pi	roposed Project:	C	hoose one:	

New; no grant-funded projects have recently (within 5 years) addressed this capability		0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

This project provides sustainment for the contract services of the Statewide Interoperability Coordinator (SWIC). The position is responsible for statewide communications governance, coordination, outreach, and support. They maintain the State Communications Interoperability Plan (SCIP), maintain involvement with many local, state, regional, and national committees and working groups, share information with tribes, counties, and special districts, monitor grant performance, and continually evaluate communications plans and training throughout the state.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The SWIC position manages all operational communication projects in the State of Nevada under NTIA and DHS/FEMA

	Nevada Homeland	Security Grant	Program (HSGP)	PROJECT ID:	HH	
	Project Proposal for	FFY17 HSGP Fu	Inding Description	Date Submitted	4/5/17	
PRO.	JECT TITLE REFERENCE:	Statewide Interoperal	oility Coordinator (SWIC)			
10)	PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commissio	n on Homeland Security (NCHS)	Priority and Urban Area	Strategy	
	NCHS FFY17 Priority	#5 - OPERATI	ONAL COMMUNICATION			
	Urban Area Strategy Priority	#5 - OPERATI	ONAL COMMUNICATIONS			
FIELD IS LIMITED TO VISIBLE TEXT BOX	SCIP. They organize and manage the annual Nevada Communications Interoperability Summit (NCIS), represent the state on the Regional Emergency Communications Coordination Working Group (RECCWG) and the National Council of Statewide Interoperability Coordinators (NCSWIC). The SWIC coordinates between Nevada governance structures along with the Nevada Core Systems (NCORE) Executive Committee, and the Nevada Commission on Homeland Security (NCHS), the Office of the Governor, and other interested bodies.					
EIELD						

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

т	MHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	DPS Division of Emergency Management	State	Caleb Cage/KelliAnderson
12(b)			
12(c)			

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

This program is currently in place and has historically been funded with 100% SHSP funds. The SWIC has never been funded through state or local budgets. DEM has leveraged NTIA grants for the past several years to fund 50% of the position. Nevada has requested a full time equivalent position. This position will be funded 50% HSGP, 25% State & 25% EMPG

Future sustainment is required to continue the program mission and to achieve the goal of these services in support of the NECP. SWIC travel.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP) **PROJECT ID: Project Proposal for FFY17 HSGP Funding Description** Date Submitted

HH

4/5/17

PROJECT TITLE REFERENCE:

Statewide Interoperability Coordinator (SWIC)

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
4 state coordination travel meeting with the various State of Nevada communication/radio stakeholders.4@ 750.00=\$3,000	\$ 0.00	\$ 3,000.00	\$ 3,000.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTota
Notebook Computer = 1,500 Printer = 300.00 Cell Phone = 500.00	\$ 0.00	\$ 2,300.00	\$ 2,300.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTota
	\$ 0.00	\$ 0.00	\$ 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 \$ 0.00	State-wide \$ 0.00	SubTota
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	\$ 0.00	\$ 0.00
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 50% 1 FTE Personnel for the SWIC Position = \$83,603 + Fringe \$25,080 = \$108,683	\$ 0.00	\$ 0.00 State-wide	\$ 0.00 SubTota

Fields are limitied to visible text box size

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	HH
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Statewide Interoperability Coordinator (SWIC)

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	Receive Authority to Spend Funding	09/01/17	12/31/17	3
3	Governance, Project Mgmt, Training, Outreach, update SCIP, TA with OEC	01/01/18	02/01/19	
4	Plan and Participate with first responders regarding improving communications	01/01/18	07/31/19	
5	Travel to meet with Stakeholders	01/01/18	07/31/19	
6	Track and Report on financial and programmatic activities	10/01/17	07/31/19	
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.

This project oversees all the communication projects in Nevada and has a direct connection to all of Nevada Communication Stakeholders. Communications is a priority in the Homeland Security 911 act as well as Nevada Homeland Security Commission 2017 priorities. Without the SWIC Nevada is unable to manage current and future communication programs and projects.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Communications is a priority in the Homeland Security 911 act as well as Nevada Homeland Security Commission 2017 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 🔵 Explain below.

The salary is 50% of the salary amount, if necessary we can cut equipment and 50% of the travel.

	Nevada Homeland	I Security Grant Program (HSGP)	PROJECT ID:	HH
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
ROJ	ECT TITLE REFERENCE:	Statewide Interoperability Coordinator (SWIC)		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
"e" are limitied to visible text box size		nt to have a SWIC to manage the communication projects. measurable "state-wide" benefit? YES • NO Explain bel	ow.	
Fields "d" and "e" are li		ire State of Nevada, completes state wide plans, training ar sment, review and planning of statewide communication sys		nunication.

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

			manager			ETAIL BUDO									
	Agency Name		Name & Contact #	Caleb Cage	775-687-0300	Grant Manager Name & Contact #		rson 775-687-03	21						F
	IJ TITLE:	Statewide Interoperability Coordinator													
		One Budget Per Funding Stream													
		SHSP													
e #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1		50% 1 FTE Statewide Interoperability Coordinator				50%		\$ 41,801.00					\$ 41,801.00		
2								\$ - \$ -		-			\$ - \$ -		
3				1	<u> </u>		<u> </u>	s -		1			\$ - \$ -		
	Personnel													¢	
SON	Sub-Total EL COST NARR	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	EEXPLAIN	NE IN DETAI	L THE POSITIO	NS AND DELIVER	ABLES. NA	\$ 41,801.00 RRATIVE WILL E	E USED TO ENS	SURE ITEMS LIST	ED WILL BE COMPL	ETED IN THE	\$ 41,801.00	\$-	
ative I	IERE														
	0.1750.05%	FRINGE DETAIL DESCRIPTION	Purchase	Previous			Calculatio	-	Primary Core	Secondary Core		Funding		Line Item	Line Item Reductions
e #	CATEGORY	FRINGE DETAIL DESCRIPTION	Туре	Funding Type	Salary Hourly	% of Effort	n (hours)	Personnel Cost Amount	Capability	Capability	AEL Ref #	Source	Total Budget	Reductions	Descriptions on how it will affect your program
e #	Fringe	Positions Require: Fringe to be separate from			Salary Hourly	% of Effort					AEL Ref #		Total Budget		
5					Salary Hourly	% of Effort	n (hours)				AEL Ref #		\$12,540.00		
5	Fringe	Positions Require: Fringe to be separate from Personnel Costs above			Salary Hourly		n (hours)	Amount			AEL Ref #		\$12,540.00 \$0.00		
5 6 7	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator			Salary Hourly		n (hours)	Amount \$ 12,540.00 \$ -			AEL Ref #		\$12,540.00		
5 6 7 8	Fringe Benefits Fringe Sub Total	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator	Туре	Type		50%	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ - \$ - \$ - \$ 12,540.00	Capability	Capability		Source	\$12,540.00 \$0.00 \$0.00		
5 6 7 8 NGE C	Fringe Benefits Fringe Sub Total OST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator	Type	Type	E POSITIONS A	50%	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ - \$ - \$ 12,540.00 TVE WILL BE US	Capability	Capability	ILL BE COMPLETED	Source	\$12,540.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 NGE C	Fringe Benefits Fringe Sub Total OST NARRATIVE	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Type	Type		50%	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each	Capability	Capability		Source	\$12,540.00 \$0.00 \$0.00 \$0.00	Reductions	
6 7 8	Fringe Benefits Fringe Sub Total OST NARRATIVE IERE	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 ALL DETAILS ARE REQUIRED. THIS CATEGORY IS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Type	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Reference # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each	Capability	Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$0.00 \$12,540.00	Reductions	affect your program
5 6 7 8 NGE C ative H	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator = REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Reference # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each Trip	Capability	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$0.00 \$12,540.00	Reductions	affect your program
5 6 7 8 IGE C # #	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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 ALL DIS FOR TRAVEL ONLY (INFORMATION NOT PROVIDED WILL NOT BE FUNDED BASED ON NON-COMPLIANCE)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Reference # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each	Capability ED TO ENSURE Total Cost	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$12,540.00 \$12,540.00 Total Budget \$3,000.00 \$0.00	Reductions	affect your program
5 6 7 8 8 NGE C ative F ative F 9 10	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator = REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Referencc # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each Trip	Capability ED TO ENSURE Total Cost	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$12,540.00 \$12,540.00 Total Budget \$3,000.00	Reductions	affect your program
5 6 7 8 NGE C ative H # 9 10 11 12 13	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator = REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Referencc # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each Trip	Capability ED TO ENSURE Total Cost	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$12,540.00 \$12,540.00 Total Budget \$3,000.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program
5 6 7 8 NGE C ative F 2 9 10 11 11 12 13 13	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator = REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Referencc # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each Trip	Capability ED TO ENSURE Total Cost	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$3,000.00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 \$0,00\$0,00 \$0,00\$0,00 \$0,00	Reductions	affect your program
5 6 7 8 NGE C	Fringe Benefits Fringe Sub Total OST NARRATIVE ERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above 50% 1 FTE Statewide Interoperability Coordinator = REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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)	Type PLAINE IN Purchase Type Select	Type DETAIL THE Previous Funding	POSITIONS A	50% ND DELIVERABL Travel Referencc # from	n (hours)	Amount \$ 12,540.00 \$ - \$ - \$ 12,540.00 TVE WILL BE US Cost for each Trip	Capability ED TO ENSURE Total Cost	Capability Capability	ILL BE COMPLETED	Source IN THE Funding	\$12,540.00 \$0.00 \$0.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$12,540.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	affect your program

ne #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	H
	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														
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18 19								-					\$0.00 \$0.00			-
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	Planning Sub-							¢					¢0.00	¢0.00		
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ne #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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.														
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RGANIZ	ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	AIL THE POSIT	IONS AND DELIV	ERABLES.	NARRATIVE WIL	L BE USED TO E	NSURE ITEMS LI	STED WILL BE CON	IPLETED IN				
arrative I	HERE															_
				Previous			UNIT								Line Item Reductions	
ne #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Funding Type		QUANTITY	COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it will affect your program	
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28 29 30 31 32 33		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 an AEL Notebook computer Printer	Туре	Funding		<u>1.00</u> 1.00	COST 1,500.00 300.00	\$ 1,500.00 \$ 300.00 \$ 500.00 \$ - \$ - \$ - \$ -			AEL Ref #		\$ 1,500.00 \$ 300.00 \$ 500.00 \$ - \$ - \$ - \$ -		Descriptions on how it will	
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28 29 30 31 32 33 34 35 36 37		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 an AEL Notebook computer Printer	Туре	Funding		<u>1.00</u> 1.00	COST 1,500.00 300.00	\$ 1,500.00 \$ 300.00 \$ 500.00 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -			AEL Ref #	Source	\$ 1,500.00 \$ 300.00 \$ 500.00 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Descriptions on how it will	
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Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	HH
	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 Cours # in Description	e				-	-								
40											\$-		\$-			
41											\$-		\$-			
42											\$-		\$-			
43											\$-		\$-			
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48											\$ -		\$ -			
49											\$-		\$-			
	Training Sub- Total										\$-		\$-	-		
TRAININ	G COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE I	N DETAIL T	HE POSITIONS	AND DELIVERAB	LES. NARR	ATIVE WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE				

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$ -		
51											\$ -		\$ -		
52											\$ -		\$ -		
53											\$ -		\$ -		
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XERCISE	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	THE POSITIONS	AND DELIVERAE	LES. NARF	RATIVE WILL BE	USED TO ENSU	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE			

Budget Reductions Total	
All budgets require an email approval from the financial and/or grant manager	

	Nevada Homeland	l Secu	irity Grant Pr	ogram (HSGP)	PROJECT ID:					
	Project Proposal for	Date Submitted	4/5/17							
1)	PROJECT TITLE:	Tahoe	Douglas Fire Distr	ict 2017 Radio Program						
2)	Proposing/Lead Agency:	Tahoe	ahoe Douglas Fire Protection District							
3)	1º Project Manager Name/Title:	B/C Ra	3/C Ralph M Jones							
	1º Project Manager Contact Info:	Phone:	(775) 450-2042	Email: rjones@tahoefire.com						
4)	2° Project Manager Name/Title:	Jim Ar	ntti / Assistant Chie	f						
	2 ^o Project Manager Contact Info:	Phone:	(775) 721-8635	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	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\bullet}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Program Objective- To improve and enhance radio communications within and outside of their main area of response. Currently we have an economical version of a radio which got us through the narrow band requirement the FCC imposed on all Public Safety Agencies when all Public Service Budgets were being diminished from the recession. Current radios do not meet all the communication capabilities the Fire District requires in all areas. We have a difficult main geographic area of response and we look to improve these communications. One of these capabilities is the Voter Scan option in these radios. Tahoe Douglas Fire, East Fork Fire and Douglas County Sheriff all use a Voter Repeater System. With responding to mutual and automatic aid within our neighboring districts of Carson City, East Fork Fork Fire, North Lake Tahoe and South Lake Tahoe we help provide Fire suppression, Hazardous Material response, EOD response and EMS services and this will expand and improve our capabilities in communications. These radios are for career highly trained First Responder use to provide services. All Public Safety entities in Douglas County are looking at and have started moving to these radios for capability, compatibility, durability and the maintenance of equipment. This style of radio can be paired to SCBA masks through blue-tooth capability where they can be used in all aspects of First Response on all types of scenes.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Situational Assessment [Mission Area: RESPONSE]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX .

Communications is the number one Safety Item listed on all Line of Duty death investigations by OSHA. With the geographical challenges Tahoe Douglas has these radios will aid in our scene mission and operations. Communications would be enhanced and allow for no missed radio traffic while on scenes and assessing scenes. Missed radio traffic due to poor transmissions capabilities would be reduced where correct situational assessments would create a better response and resource allocation.

Nevada Homelan	PROJECT ID:							
Project Proposal fo	Project Proposal for FFY17 HSGP Funding Description							
PROJECT TITLE REFERENCE:								
 PROJECT TITLE REFERENCE: Tahoe Douglas Fire District 2017 Radio Program PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed 								

NCHS FFY17 Priority Urban Area Strategy Priority #5 - OPERATIONAL COMMUNICATION #5 - OPERATIONAL COMMUNICATIONS

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

As soon as Finances become available we would begin implementataion. Purchasing of equipment, programming and training will be done immediately and units would be put into service.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Tahoe Douglas Fire Protection District	Douglas County, Nevada	Ralph M Jones
12(b)			
12(c)			

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

These radios are expensive. We are looking for funding sources from all angles without recent success. We will need to keep purchasing efforts enforced for the future. We will need to provide for additional radios beyond this request. The maintenance of the radios and implementation is already funded through the district and there are no further on going needs through the grant for this request.

FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %
LV OASI /0	State Wide /	I O I ALE /U

0	100	100	
Enter your %	Enter your %		
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Tahoe Douglas Fire District 2017 Radio Program

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
N/A			
			\$ 0.00
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	SubTot
15-Motorola APX 6000 Hand held Radios, batteries, antennae, chargers, Intrinsica			
Safe and Vote Scan @ \$4115 each, Total \$61,725			
15- Hand Microphones XE-RSM for APX 6000 radio, Intrinsically Safe, Blue-tooth capable @ \$400 each, Total \$6,000	1		
15- Scott SCBA Blue-tooth/Radio Interface amplifiers for SCBA masks. @\$709.5		\$ 78,367.50	\$ 78,367
each Total \$10,642.50			
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTot
Provide District training on new radios with on-line personnel			
			\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
Provide for at least one exercise to implement new equipment			200100
			\$ 0.00
		State wid-	C
15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTot
15 daily line staff x 3 shifts 1 Battalion Chief	LV-UASI	State-wide	SubTot
15 daily line staff x 3 shifts 1 Battalion Chief 4 Captains	LV-UASI	State-wide	SubTot \$ 0.00
15 daily line staff x 3 shifts 1 Battalion Chief	LV-UASI	State-wide	
15 daily line staff x 3 shifts 1 Battalion Chief 4 Captains 4 Engineers			\$ 0.00
15 daily line staff x 3 shifts 1 Battalion Chief 4 Captains 4 Engineers 6 Fire Fighters	LV-UASI	State-wide State-wide	

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

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

Tahoe Douglas Fire District 2017 Radio Program

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

	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	Purchase Equipment	09/01/17	10/01/17	1
3	Programming of Equipment	10/01/17	12/01/17	2
4	Training	12/01/17	01/01/18	1
5	Radios in service	01/01/18	02/01/17	1
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.
Department personnel, in their normal course of response, respond to terrorist activities in a first responder role.
b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.
Enhances Operational Communications and Situational Assessment
c. Can this project funding request be reduced? Is it scaleable? YES 🔵 NO 💽 Explain below.
This funding is what is needed to get our front line units up to the standard which we are implementing. We can not put into service a reduced amount of equipment with out having this minimum quantity,

4

_	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
ROJ	ECT TITLE REFERENCE:	Tahoe Douglas Fire District 2017 Radio Program		
	d. Can this project continue w	ithout funding? YES 💽 NO 🔵 Explain below.		
are limitied to visible text box size		enhance our communications at this time. We may be be ent will start our enhancement of the existing current radi		al aid in the
mitie	e. Does this project provide a	measurable "state-wide" benefit? YES 💿 NO 🔵 Explain b	elow.	
Fields "d" and "e" are li	communications while wearing S	subjective in some areas as in quality. This would give a SCBA's in all hazardous environments which occur from re anal response team, while the Hazardous Material Technio n.	esponse in all areas of	the state we
8)	\sim	indicate the participation level in completing the 2016 ated in the 2016 Threats and Hazards Identification Risk		

NO - Agency has not participated in the 2016 Threats and Hazards 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

N/A

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended

HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

			manager	LIN	E ITEM D	ETAIL BUDG	ET							[_
	Agency Name		Name & Contact #	B/C Ralph J 2042	ones (775) 450-	Grant Manager Name & Contact #		Chief Jim Antti ('	775) 721-8635						
	IJ TITLE:	Tahoe Douglas Fire Protection District F	Radio P	rogram 2	017										
		One Budget Per Funding Stream		r -											
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
1								\$ -					\$-		
2								\$ - \$ -					\$ - \$ -		
3								s -					s -		
	Personnel							v					Ψ.	•	
REONIN	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$ -					\$ -	\$-	
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ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
5	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above						s -					\$0.00		
6								\$-					\$0.00		
7								\$ -					\$0.00		
8							-						\$0.00		
8	Fringe Sub	•					-						\$0.00	00.0 2	
RINGE C	Total OST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABL	ES. NARRA	\$ - \$ -	ED TO ENSURE	ITEMS LISTED W	ILL BE COMPLETED	D IN THE	\$0.00 \$0.00	\$0.00	
RINGE C	Total OST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		DETAIL THE Previous Funding Type	POSITIONS A Category of Each Travel	ND DELIVERABL Travel Reference # from Addendum		\$ - \$ - TIVE WILL BE US	ED TO ENSURE Total Cost	ITEMS LISTED W Primary Core Capability	ILL BE COMPLETED Secondary Core Capability	Funding Source		\$0.00 Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
RINGE C	Total OST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	Purchase	Previous Funding	Category of	Travel Reference # from	•	\$ - \$ - TIVE WILL BE US Cost for each		Primary Core	Secondary Core	Funding	\$0.00 Total Budget	Line Item	Descriptions on how it will
ne #	Total OST NARRATIVE IERE CATEGORY Travel Planning Training Exercise Equipment	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from	•	\$ - \$ - TIVE WILL BE US Cost for each	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 Total Budget \$0.00 \$0.00	Line Item	Descriptions on how it will
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e #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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	u										<u> </u>		
17 18								-					\$0.00 \$0.00		
19								-					\$0.00		
20 21								-					\$0.00 \$0.00		
21	Planning Sub-														
	Total	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE			HE POSITIONS		RIES NARI	\$ - ATIVE WILL BE	USED TO ENSUE				\$0.00	\$0.00	
arrative															
ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.	þ												
22								\$ ·					\$-		
23 24								<u> </u>					\$ - \$ -		
25								\$ -					\$ -		
26								\$ - ¢					\$ - ¢		
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27 RGANIZ arrative	Sub-Total ATION COST NA HERE		Purchase Type	Previous	AIL THE POSIT		UNIT	\$- S- NARRATIVE WIL	Primary Core	Secondary Core		Funding	\$ \$		
27 RGANIZ arrative	Sub-Total ATION COST NA HERE CATEGORY	EQUIPMENT DETAIL DESCRIPTION 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	Purchase Type	Previous Funding	AIL THE POSIT		UNIT COST	\$ S NARRATIVE WIL TOTAL	Primary Core	Secondary Core		Funding	\$ \$		Descriptions on how it will
27 RGANIZ arrative	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant	Purchase Type	Previous Funding Type	AIL THE POSIT	QUANTITY	UNIT COST	\$ - \$ - NARRATIVE WIL TOTAL \$ 61,725.00	Primary Core Capability Operational	Secondary Core	AEL Ref #	Funding Source	\$ - \$ -		Descriptions on how it will
27 RGANIE arrative ine # 28 29 30	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant	Purchase Type	Previous Funding Type		QUANTITY 15.00	UNIT COST 4,115.00	\$ - \$ - NARRATIVE WIL TOTAL \$ 61,725.00 \$ 6,000.00 \$ 10,642.50	Primary Core Capability Operational Communications Operational	Secondary Core	AEL Ref # 06CP-01-PORT	Funding Source	\$ - \$ - Total Budget \$ 61,725.00 \$ 6,000.00 \$ 10,642.50		Descriptions on how it will
27 RGANIE arrative ine # 28 29	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant APX 6000 Radio Microphones Scott SCBA amplifiers/Blu-tooth Radio Interface-Epic 3	Purchase Type	Previous Funding Type		QUANTITY 15.00 15.00	UNIT COST 4,115.00 400.00	\$ - \$ - NARRATIVE WIL TOTAL \$ 61,725.00 \$ 6,000.00	Primary Core Capability Operational Communications Operational Operational	Secondary Core	AEL Ref # 06CP-01-PORT 06CP-03-PRAC	Funding Source SHSP SHSP	\$ - \$ - Total Budget \$ 61,725.00 \$ 6,000.00		Descriptions on how it will
27 RGANI/ arrative ne # 28 29 30 31 32 33	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant APX 6000 Radio Microphones Scott SCBA amplifiers/Blu-tooth Radio Interface-Epic 3	Purchase Type	Previous Funding Type		QUANTITY 15.00 15.00	UNIT COST 4,115.00 400.00 709.50	\$ - \$ - NARRATIVE WIL TOTAL \$ 61,725.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Operational Communications Operational Operational	Secondary Core	AEL Ref # 06CP-01-PORT 06CP-03-PRAC	Funding Source SHSP SHSP	\$ - \$ - Total Budget \$ 61,725.00 \$ 6,000.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ -		Descriptions on how it will
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27 RGANIA arrative ne # 28 29 30 31 32 33 34 35 36	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant APX 6000 Radio Microphones Scott SCBA amplifiers/Blu-tooth Radio Interface-Epic 3	Purchase Type	Previous Funding Type		QUANTITY 15.00 15.00	UNIT COST 4,115.00 400.00 709.50	\$ - \$ - NARRATIVE WIL TOTAL \$ 61,725.00 \$ 6,000.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Operational Communications Operational Operational	Secondary Core	AEL Ref # 06CP-01-PORT 06CP-03-PRAC	Funding Source SHSP SHSP	\$ - \$ - Total Budget \$ 61,725.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Descriptions on how it will
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27 RGANI arrative ne # 28 29 30 31 32 33 34 35 36 37 38	Sub-Total ATION COST NA IERE CATEGORY Equipment 06CP-01-PORT 06CP-03-PRAC	EQUIPMENT DETAIL DESCRIPTION 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 an AEL APX 6000 Radios- Motorola, Batt, Charg,Ant APX 6000 Radio Microphones Scott SCBA amplifiers/Blu-tooth Radio Interface-Epic 3	Purchase Type	Previous Funding Type		QUANTITY 15.00 15.00	UNIT COST 4,115.00 400.00 709.50	\$ - NARRATIVE WIL TOTAL \$ 61,725.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Primary Core Capability Operational Communications Operational Operational	Secondary Core	AEL Ref # 06CP-01-PORT 06CP-03-PRAC	Funding Source SHSP SHSP	\$ - \$ - Total Budget \$ 61,725.00 \$ 6,000.00 \$ 6,000.00 \$ 10,642.50 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		Descriptions on how it will

28-APX 6000 High Impact Green, P25 compliant radios with Key Pad, Voting capabilities, Tone select, Blue-tooth, Charger, Battery, antennae with Multy zone and 500 channel capability. 29- Microphones Moroloa XE-RSM High Impact Green for APX 6 radios . 30- SCBA amplifier Epic 3 with Blue-tooth Radio Interface and brackets for mounting.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	I
	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					-	-								
40											\$-		\$-			
41											\$ -		\$-			1
42											\$ -		\$-			
43											\$ -		\$-			1
44											\$ -		\$-			1
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47											\$ -		\$-			1
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49											\$ -		\$ -			i
	Training Sub- Total										\$ -		\$ -	-		1

Narrative HERE

_ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$ -		\$ -		
52											\$ -		\$-		
53											\$-		\$ -		
54											\$-		\$ -		
55											\$ -		\$ -		
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57											\$ -		\$ -		
	Exercise Sub- Total										\$-		\$-	-	
EXERCIS	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE		IN DETAIL 1	THE DOGITIONS	AND DELIVEDAD	LEC NADE	ATIVE WILL DE	LICED TO ENGLIS	DE ITEMO I JOTED	WILL BE COMPLET	ED IN THE			

Narrative HERE							Total Original Budget	Line Item Reductions Total	
	an email approval from the fina						\$ 78,367.50	\$ -	

All budgets require an email approval from the financial and/or grant manager

	Nevada Homeland	PROJECT ID:	JJ									
	Project Proposal for	Date Submitted	4/5/17									
1)	PROJECT TITLE:	ispatch	-									
2)	Proposing/Lead Agency:											
3)	1° Project Manager Name/Title:	Mike Allen/Sheriff	ike Allen/Sheriff									
	1º Project Manager Contact Info:	Phone: (775) 623-6419	Email: mallen@hcsonv.com									
4)	2 [°] Project Manager Name/Title:											
	2° Project Manager Contact Info:	Phone:	Email:									
5)	Finance/Grant Contact Name/Title:	Rachelle Piquet/ Admin C	Clerk IV									
	Finance/Grant Contact Info:											
6) CLASSIFICATION - Check the primary intention of the Proposed Project:												

NEW New; no grant-funded projects have recently (within 5 years) addressed this capability Image: Constraint of the capability of prior grant-funded projects ENHANCE Will primarily expand or enhance the capability(s) of prior grant-funded projects Image: Constraint of the capability of prior grant-funded projects SUSTAIN Will primarily sustain capability or continue establishment effort in existing program Image: Constraint of the capability of the

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Humboldt County Sheriff's Office goal is to equip a mobile command vehicle (MCV) to be able to serve as an emergency operation center and as an redundant dispatch center. The MCV will establish the ability to prepare, plan, prevent and mitigate terrorism-related and emergency incidents and ensure the capacity to communicate and coordinate with the emergency response agencies, and the community.

These capabilities would benefit the Humboldt County Sheriff's Office, Winnemucca Police Department, Winnemucca Fire, Humboldt County Fire, Nevada Highway Patrol, Nevada Department of Public Safety Investigation Division, Lander County Sheriff's Office, Pershing County Sheriff's Office, Lovelock Police Department, Bureau of Indian Affairs, and Humboldt General Hospital EMS Rescue.

Humboldt County encompasses nearly 9,658 square miles of territory with six communities outside of the county seat of Winnemucca, which is located 170 miles east of Reno, and 125 miles west of Elko, Nevada. Lander and Pershing counties encompass over 11,500 square miles making the total North Central Nevada area covered over 21,000 square miles. The area is susceptible for numerous types of emergency responses where a mobile command vehicle is necessary. The dual functionality of the mobile command vehicle addresses issues of availability of resources due to our remote location and coverage territory. Currently, there are no redundant communication capabilities available in our county or the surrounding areas as recommended by Emergency Management Standards.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* 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

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Operational Communications [Mission Area: RESPONSE]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The HCSO will replace out-dated and obsolete equipment to update a 12-year-old Mobile Command Vehicle to create a multi-functional and multi-agency unified command center to mobilize critical resources and establish command, control, and operational coordination to recover from terrorism-related and catastrophic events. Emergency Response leaders will use the Mobile Command Vehicle during these events throughout three Nevada counties due to multi-jurisdictional agreements to provide emergency management, and emergency law enforcement services, to neighboring Lander and Pershing Counties.

In addition, the Mobile Command Vehicle would be used as a redundant emergency dispatch platform for county-wide communications if necessary. Humboldt County has experienced multiple incidents where communications were severely impacted. Current agreements are in place with Lander and Pershing Counties to assist with emergency dispatch services when requested in their respective areas as well. Currently, Humboldt County does not have a mobile incident command center or any form of alternate dispatch platform. First responders are often tasked to work out of their patrol vehicles and do not have workstations or areas to prepare, plan, and develop emergency operational plans.

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	JJ
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJECT TITLE REFERENCE:	North Central Nevada Mobile Command Vehicle/Mobile D	ispatch	
10) PRIORITIES - Identify applicab	le Nevada Commission on Homeland Security (NCHS) Prio	rity and Urban Arec	strategy

LO)	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy	
	Objective to be addressed	

NCHS FFY17 Priority	#4 - OPE
Urban Area Strategy Priority	NO URE

ERATIONAL COORDINATION AN AREA STRATEGY PRIORITY

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 Humboldt County Communications Manager and Technician will be in charge of procurement of the appropriate equipment and systems to outfit the mobile command vehicle. Installation of the equipment and systems will be completed by the Manager and Technician unless time or staffing constraints make the installation impossible. If necessary, the Communications Manager will contract the installation of the equipment to complete the project.

SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. 12)

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	N/A	N/A	N/A
12(b)	N/A	N/A	N/A
12(c)	N/A	N/A	N/A

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

Humboldt County Sheriff's Office will be financially obligated for routine maintenance and fuel related costs of the mobile command vehicle.

FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

0	100	100	
Enter your %	Enter your %		1
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	JJ
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

North Central Nevada Mobile Command Vehicle/Mobile Dispatch

BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spe	cific. Identify l	JASI 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
Procure equipment, systems and services to make Mobile Command Vehicle / Alternate Dispatch Vehicle Operational		\$ 163,081.00	\$ 163,081.0
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)	PROJECT ID:	JJ
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

North Central Nevada Mobile Command Vehicle/Mobile Dispatch

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	Complete RFP Process	10/01/17	01/01/18	3
3	Order Equipment/Systems	01/01/18	02/01/18	1
4	Payment for Equipment/Systems	02/01/18	04/01/18	2
5	Installation of Equipment/Systems	04/01/18	10/01/18	6
6	Training of Personnel	10/01/18	11/01/18	1
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.

In the event of terrorism-related incident the primary facilities may become inoperable. The mobile command vehicle/auxiliary dispatch provides the necessary tools to establish an emergency operation command and communications center that can be located on-scene or relocated if necessary for continuity of communications and coordination on a multi-agency and jurisdictional level. This communication, enables efficient protection, response, and prevention of imminent or follow-up terrorist attacks. It will allow our agency the ability to share and disseminate relevant, actionable, timely, unclassified information and intelligence to the appropriate stakeholder, whether at the State, Local, and Tribal levels of government, the private sector, and the citizens. In addition, uninterrupted dispatch communication capabilities provide a means to share public awareness information to inform the general public on how to identify and provide terrorism-related information to law enforcement authorities to further coordinate efforts.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💿 NO 🔵 Explain below.

The mobile command and dispatch vehicle aligns with the top five priorities by being fully equipped to operate as an alternate Emergency Operation Center and Dispatch Center. In the event either or both functions need to be activated, Humboldt County can ensure the security, reliability, and availability of critical information, records, and communications systems and services. This ability enables us to anticipate and identify emerging and imminent threats through the intelligence cycle and allows effective communication and reporting of terrorism-related information with Federal, state, local, private sector, and international partners. If our primary dispatch is inoperable the mobile command vehicle will allow us to continue to disseminate public information, alerts/warnings and notifications to the public and coordinating officials, as well as continuing operational communications and coordination with incident management and responders across all jurisdictions and disciplines.

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

The project funding cannot be reduced without severely impacting the functionality of the mobile command vehicle as an Emergency Operations Center or Mobile Dispatch Center. All systems and equipment are required elements to access information and communicate to all stakeholders, both internally and externally, in the event of a terrorism-related incident. If the primary dispatch center became inoperable, any reduction of the equipment would leave the mobile command vehicle unable to provide adequate communication services and would impede the ability to respond to or recover from a terrorism-related incident.

	Nevada Homeland	l Security Grant Program (HSGP)	PROJECT ID:	JJ
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PRO.	ECT TITLE REFERENCE:	North Central Nevada Mobile Command Vehicle/Mobile	e Dispatch	
	d. Can this project continue w	ithout funding? YES 🜔 NO 💽 Explain below.		
and "e" are limitied to visible text box size	updates will ensure the continuit preserve interoperable commun	dated and would need to be replaced simultaneously to a y of communications in the event of damage or destructi ication capabilities to manage emergency response. measurable "state-wide" benefit? YES (•) NO () Explain	on at the primary dispate	
Fields "d" and "e" are lii	capabilities; cybersecurity, intelli operation communications, to be manage a terrorism-related incid	Id mobile dispatch center will have a great impact for Nor gence and information sharing, public information and w e on a mobile platform for strategic placement. Humbold lent, but will also have the ability to efficiently assist neig ssibly nonexistent capabilities due to a terrorism-related i	arning, operational coord t County will be better pr hboring counties and No	lination and epared to

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

) NO - Agency has not participated in the 2016 Threats and Hazards 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

Humboldt County has two major highway routes, which are Interstate 80 which runs east and west, and US Highway 95 which runs north and south. Humboldt County also has two railroad systems running through the area, Union Pacific Railways and South Pacific Railways with a rail car station holding area within Winnemucca. The railways include Am-Track, Freight, Chemical and Nuclear Services. Nuclear waste, explosives, and chemicals are transported through Humboldt County on a regular basis on these railways and highways.

The primary industry in the region is gold mining and Humboldt County is home to the largest gold mine in the United States. As with any mine, explosives and chemicals are transported and used frequently. There are currently two explosive storage bunkers located in Humboldt County as a result. Consequently, there are two sodium cyanide plants less than eight miles from the city of Winnemucca that can produce over 150 million pounds of chemical annually to support the mining industry. Also located within the jurisdictional boundaries of Humboldt County is a major power plant. The Valmy Power plant provides power to numerous communities in Nevada and Utah; with a new phase planned to increase their output of electricity and expand their territory.

As with any community, there are numerous elementary schools, middle schools, and high schools in the region. Humboldt County experiences an increase in tourism throughout the year during a variety of conventions and activities. Our region is also one of two major egress routes in the event of a terrorism-related incident for Burning Man, one of the largest festivals in the U.S., attracting over 70,000 participants. There are also two State Prisons in the area; Lovelock Correctional Center is in Pershing County, and the Winnemucca Conservation Camp is in Humboldt County. The Humboldt County Sheriff's Office has been called to assist the Nevada Department of Corrections on security issues within both of their facilities. These potential targets leave Humboldt County and other rural communities at risk for terrorism-related incidents.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

						I DETAIL BU									
	Agency Name		Project Manager Name & Contact #	Sheriff Mi		Grant Manager Name & Contact #		iquet (775) 623-	6419						
	IJ TITLE:	North Central Nevada Mobile Command	Vehicle/	Mobile I	Dispate	ch									
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e #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type		% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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							\$-					\$-	\$-	
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e #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
-	CATEGORY Fringe Benefits	FRINGE DETAIL DESCRIPTION Positions Require: Fringe to be separate from Personnel Costs above		Funding	Salary	% of Effort					AEL Ref #				Descriptions on how it will
5	Fringe	Positions Require: Fringe to be separate from		Funding	Salary	% of Effort					AEL Ref #		Total Budget \$0.00 \$0.00		Descriptions on how it will
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5 6 7 8 NGE (Fringe Benefits Fringe Sub-Total COST NARRATIV	Positions Require: Fringe to be separate from Personnel Costs above EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Type	Funding Type	E POSITI Categor		n (hours)	Amount \$ \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Capability	Capability		Source	\$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it will
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5 6 7 8 s rative e # 9 10 11	Fringe Benefits Fringe Sub-Total OST NARRATIV HERE CATEGORY Travel Planning Training Exercise Equipment	Positions Require: Fringe to be separate from Personnel Costs above EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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-	Type PLAINE IN Purchase Type	Funding Type	E POSITI	ONS AND DELIVE	n (hours)	Amount S - S - S - S - S ARRATIVE WILL	Capability	Capability	ED WILL BE COMPL	Source ETED IN THE Funding	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Reductions	Descriptions on how it will affect your program
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Narrative HERE

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	II
	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														
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ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$-					\$-		
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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	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL												
28		Firewall	New		1.00	1,350.00	\$ 1,350.00	Cybersecurity	Intelligence anc Information Sharing	05NP-00-IDPS	SHSP	\$ 1,350.00		
29		Satellite Uplink Transmit System: Antenna, Transmitter and supporting equipment	New		1.00	52,000.00	\$ 52,000.00	Operational Communication	Intelligence anc Information Sharing	06CC-04-EQSD	SHSP	\$ 52,000.00		
30		8 Port VoIP Gateway with RJ-11 Interface	New		1.00	1,430.00	\$ 1,430.00	Operational Communication	Public Information and Warning	06CP-02-BRDG	SHSP	\$ 1,430.00		
31		TCP Acceleration/Encryption	New		1.00	1,350.00	\$ 1,350.00	Operational Coordination	Operational Communication	05EN-00-ETRN	SHSP	\$ 1,350.00		
32		Network Setup	New		1.00	1,000.00	\$ 1,000.00	Operational Communication	Operational Communication	21GN-00-INST	SHSP	\$ 1,000.00		
33		Dispatch Software	New		2.00			Operational Communication	Operational Communication	13IT-00-DEXC	SHSP	\$ 9.750.00		
34		Advanced Audio Interface	New		2.00		\$ 4,992.00	Operational	Operational Coordination	06CP-02-BRDG	SHSP	\$ 4,992,00		
35		IP-224 Adaptor w/ Mounting Equipment	New		3.00		\$ 9.600.00	Operational Communication	Operational Coordination	06CP-02-BRDG	SHSP	\$ 9.600.00		
36		Licensing for Radios	New		3.00		\$ 3,201.00	Operational Communication	Operational Coordination	0001-02-0100	SHSP	\$ 3,201.00		
37		Control Cables for Radios	New		6.00	213.00		Operational Communication	Operational	06CP-02-BRDG	SHSP	\$ 1,278.00		
38		Radio Sets to Communicate with the State	New		3.00	1.775.00	\$ 5.325.00	Information	Operational Communication	06CP-02-BRDG	SHSP	\$ 5.325.00		
		Programming Software & Cable for P25 Radios	New		3.00	450.00	\$ 5,325.00 \$ 450.00	Operational	Operational Coordination	06CP-01-BASE	SHSP	\$ 5,325.00 \$ 450.00		
39		VHF Radios to Communicate with Local Agencies	New					Communication Operational	Operational	06CP-02-BRDG				
40		Computers and Monitors	New		4.00		\$ 6,400.00	Coordination Operational	Operational		SHSP	\$ 6,400.00		
41		Wireless Router	New		2.00		\$ 3,600.00	Communication Operational	Coordination Operational	04HW-01-INHW	SHSP	\$ 3,600.00		
42		Satellite Data Service per Day Usage Fee	New		2.00	920.00	\$ 1,840.00	Communication Operational	Coordination Operational	04HW-01-INHW		\$ 1,840.00		
43		Satellite Data Service Per Day Usage Fee Satellite Data Service Monthly Access/Continuity of Service	New		 45.00	565.00	\$ 25,425.00	Communication Operational	Coordination Operational	06CC-04-SADS	SHSP	\$ 25,425.00		
44		, ,	INEW		 24.00	295.00	\$ 7,080.00	Communication Operational	Coordination Information	06CC-04-SADS	SHSP	\$ 7,080.00		
45		Cellular Service Fees/ Dedicated Dispatch & WiFi	New		24.00	40.00	\$ 960.00	Communication	Sharing	06CC-05-PRTY	SHSP	\$ 960.00		
46		RIMS Software, Install, Training, Support	New		1.00	26,050.00	\$ 26,050.00	Operational Coordination	Operational Communication	04AP-01-CADS	SHSP	\$ 26,050.00		

EQUIPMENT Sub-Total		\$ 163,081.00			\$	163,081.00
EQUIPMENT COST NARRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EXPLAINE IN DETAI THE GRANT CYCLE - ITEMS MAY NOT BE PURCHASED OUTSIDE THE ITEMS LISTED ABOVE WITHOUT			O ENSURE ITEMS LIS		IN	
The project funding cannot be reduced without severely impacting the operational functions of the mobile comma	and vehicle as an Emergency Operations Ce	enter or Mobile Dispatch Center. E	ach line item is listed wi	ith its associated functions.		
 Firevall- To establish VPN and encrypt traffic. Statellite Transmit System- Antenna, Transmitter, and supporting equipment to uplink mobile dispatch to satel 30: Gateway Interface- Part of Satellite Transmit System. TCP Acceleration/Encryption - part of Satellite Transmit System. Network Setup - part of Tadio network. Control Cables for Radios - Part of radio network. Control Cables for Radios - Part of radio network. Programming Software & Cable for P25 Radios - Necessary for programming radios VHF Radios (Communicate with Local Agencies) - Physical radios necessary for communication. Computers & Monitors - Necessary to operate and run the dispatch software and equipment. Wreless Router - Redundant transmission system if satellite system fails. Satellite Data Service (per day usage fee) - Recurring costs to provider for access to service. Cellular Service (monthly access fee) - Recurring costs to provider for access to service. RitMs Mobile Software, Install, Support - Needed to use CAD/Dispatch Software on the computers. If the equipment and systems are installed as proposed the mobile command vehicle will provide a mobile redun in the event of failure or destruction at the primary dispatch center and p	e e e e e e e e e e e e e e e e e e e	rgency operation center within the			cations	

Line #	CATEGORY		Purchase Type		Coordin ated with the State Training Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	J
	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					-	-								
40											\$-		\$ -			1
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49											\$-		\$ -			1
	Training Sub-Total										\$ -		\$ -	-		

Narrative HERE

ine #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordin ated with the State Exercis e Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wi affect your program
	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)												-	
50											\$-		\$-		
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56 57											<u>\$</u> -		\$ -		
	Exercise Sub-										\$ -		ş -		
	Total										•		۰.	_	

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 163,081.00	\$ -	
All bud	note require a	n email approval from the financial and/or grant	manager							

	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	KK
	Project Proposal for	FFY17 HSGP Fund	ing Description	Date Submitted	4/5/17
1)	PROJECT TITLE:	Communications Enhanc	ement Project		
2)	Proposing/Lead Agency:	Clark County Information	Technology		
3)	1° Project Manager Name/Title:	Lester Lewis, DCIO			
	1º Project Manager Contact Info:	Phone: (702) 455-6813	Email: LLewis@ClarkCountyNV.	gov	
4)	2° Project Manager Name/Title:	Jared Hansen, Superviso	ry Network Analyst		
	2 [°] Project Manager Contact Info:	Phone: (702) 455-0873	Email: JaredH@ClarkCountyNV	.gov	
5)	Finance/Grant Contact Name/Title:	Julie Black, Sr. Business	System Analyst		
	Finance/Grant Contact Info:	Phone: (702) 455-6491	Email: juliel@clarkcountynv.gov		
6)	CLASSIEICATION Chack the	rimary intention of the D	range of Brainste	0	hoose one

U) CLASSIFICATION - Check the primary intention of the Proposed Project:

Lnoose one

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	\odot
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

The project outcome focuses on the sustainment of equipment previously funded by Homeland Security Grant Program funds and supports the interoperability and communication of a Homeland Security Grant Program companion project. This project supports operational communications and operational coordination for public safety agencies' voice communications in the Las Vegas Urban Area by enhancing the redundancy and interoperability of the end-of-useful-life voice communications systems that transmit information between fixed locations. Enhancing and sustaining the voice communication systems will mitigate the risk of possible system and security failure.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

In order to ensure the capacity for timely communications in support of security, situational awareness, and operations among and between affected communities in the Las Vegas Urban Area and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities, the voice network communications system must be enhanced to ensure that the overarching architecture that links the network components does not fail. A system failure would result in the loss of integration and interoperability of voice communications that are crucial to public safety agencies.

Project Proposal for TITLE REFERENCE: DRITIES - Identify applicate active to be addressed S FFY17 Priority an Area Strategy Priority DJECT IMPLEMENTATION ibe in rough order the process by k County Information Tech	Commun ble Nevada #5 #4 N - Describ	nications Enhar Commission o - OPERATION - OPERATION - OPERATION - OPERATION	ncement Projec on Homeland S NAL COMMUN NAL COORDIN	tecurity (NCHS)	Date Submitted Priority and Urban Area	4/5/17 Strategy				
DRITIES - Identify applica active to be addressed S FFY17 Priority an Area Strategy Priority DJECT IMPLEMENTATION	ble Nevada #5 #4 N - Describ	5 - OPERATION 4 - OPERATION 4 - OPERATION 9 - how, and by	on Homeland S NAL COMMUN	ecurity (NCHS)	Priority and Urban Area .	Strategy				
ective to be addressed S FFY17 Priority an Area Strategy Priority DJECT IMPLEMENTATION	#5 #4 N - Describ	5 - OPERATION 4 - OPERATION 9 how, and by	NAL COMMUN NAL COORDIN	ICATION	Priority and Urban Area .	Strategy				
an Area Strategy Priority DJECT IMPLEMENTATION ibe in rough order the process by	#4 N - Describ	4 - OPERATION	NAL COORDIN							
JECT IMPLEMENTATIO	N - Describ	e how, and by		ATION						
ibe in rough order the process by			whom, the Pro		#4 - OPERATIONAL COORDINATION					
	sfactorily accomplished.	factorily accomplished.	factorily accomplished.	factorily accomplished.	factorily accomplished.	factorily accomplished.				

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County Information Technology	Clark County NV	Lester Lewis
12(b)			
12(c)			

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

The proposed equipment purchased will have a standard life expectancy with normal use, and would need to be replaced and funding pursued when it has reached the end of its operational functionality.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

FIELD IS LIMITED TO VISIBLE TEXT BOX

LV-UASI % State-w	ide % TOTAL %
-------------------	---------------

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID: KK

4/5/17

Date Submitted

PROJECT TITLE REFERENCE:

Communications Enhancement Project

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
	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Two extra high power transmit communication systems and accompanying radio components, T1/Ethernet interfaces, antennae, waveguide systems, project implementation, installation and testing.	\$ 342,000.00	\$ 0.00	\$ 342,000.0
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Development and provision of training by the vendor who implements project.	\$ 14,000.00	\$ 0.00	\$ 14,000.00
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]	\$ 0.00	State-wide	SubTotal \$ 0.00
	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15e) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS	\$ 0.00	\$ 0.00 State-wide	\$ 0.00 SubTotal

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	KK
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17

Communications Enhancement Project

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

	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	Procure equipment per purchasing process	11/01/17	03/31/18	5
3	Installation of Equipment	04/01/18	09/30/18	6
4	Testing and ongoing maintenance	10/01/18	11/30/18	2
5	Complete project implementation and staff training	12/01/18	05/31/19	6
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.

This project has a nexus to terrorism. Public safety agencies rely on rapid communication between dispatch and incident command during potential terrorist events. Timely and accurate transmission of critical incident information must be available at all time to protect residents, visitors, and public safety personnel.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with Nevada Commission on Homeland Security FY17 Priorities Operational Communication and Operational Coordination. Public safety agencies' communications are carried over the communication systems. Equipment failure would impact the ability of public safety agencies ability to receive and transmit voice communications.

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

This equipment must be purchased and installed as one unit in order to be fully functional.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	KK
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	Communications Enhancement Project		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	No other funding sources are av			
miti	e. Does this project provide a	measurable "state-wide" benefit? YES 🔵 NO 💽 Explair	n below.	
Fields "d" and "e" are li	This project is focused on servic	ing the Las Vegas Urban Area.		

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

			manager		INE ITEM I										
			Name &			Grant Manager									
	Agency		Contact	Lester Lewi			Julie Black								
	Name	Clark County Information Technology	#	702-455-68	13	Contact #	702-455-6491								
									1	1					
	IJ TITLE:	Communications Enhancement Project													
		One Budget Per Funding Stream													
		UASI													
1	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
								\$ -					\$ -		
								\$-					\$ -		
					ļ			\$-					\$-		
	Personnel							\$-					\$-		
	Sub-Total							s -					s -	\$-	
ONI	NEL COST NARR.	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS	E EXPLAIN	IE IN DETAI	L THE POSITIO	NS AND DELIVER	ABLES. NARR.	ATIVE WILL BE U	ISED TO ENSUR	E ITEMS LISTED	WILL BE COMPLETE	D IN THE			
ive I	HERE														
	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe	Positions Require: Fringe to be separate from Personnel Costs above													
	Benefits	Personnel Costs above						s -					\$0.00		
								\$ -					\$0.00		
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	Fringe Sub												\$0.00		
E C														* 0.00	
	Total		PI AINE IN		POSITIONS A			\$ WILL BE USED	TO ENSURE ITE	MS LISTED WILL	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
		EREQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLE	S. NARRATIVE	<mark>\$-</mark> WILL BE USED	TO ENSURE ITE	MS LISTED WILL	BE COMPLETED IN	THE GRANT	\$0.00	\$0.00	
	COST NARRATIVE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN		DETAIL THE Previous Funding Type	POSITIONS A Category of Each Travel	ND DELIVERABLE Travel Reference # from Addendum		\$ EWILL BE USED Cost for each Trip	TO ENSURE ITE	MS LISTED WILL Primary Core Capability	BE COMPLETED IN Secondary Core Capability	THE GRANT Funding Source	\$0.00 Total Budget	\$0.00	Line Item Reductions Descriptions on how it will affect your program
	COST NARRATIVE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY	Purchase	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget	Line Item	Descriptions on how it will
re I	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each		Primary Core	Secondary Core	Funding		Line Item	Descriptions on how it will
ve I	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
vel	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
/e l	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
ve l	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
/e l	COST NARRATIVE HERE 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	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		Cost for each	Total Cost	Primary Core	Secondary Core	Funding	Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item Reductions	Descriptions on how it will
vel	CATEGORY CATEGORY Travel Planning Training Exercise Equipment Organization Travel Sub- Total	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	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	S0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will

ne #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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													
17 18								-					\$0.00 \$0.00		
19								-					\$0.00		
20 21													\$0.00 \$0.00		
	Planning Sub- Total							s -					\$0.00	\$0.00	
	COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERA	BLES. NARRAT	IVE WILL BE US	ED TO ENSURE I	TEMS LISTED W	LL BE COMPLETED	IN THE			
#	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.													
22 23								\$ - \$ -					s -		
24								\$ - \$					\$ -		
25 26								<u>\$</u> - \$-					\$ - \$ -		
27	Organization							\$ -					\$-		
:	Sub-Total	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE						\$-					\$-	-	
rative H			Purchase	Previous					Primary Core	Secondary Core		Funding		Line Item	Line Item Reductions
rative H	ERE	EQUIPMENT DETAIL DESCRIPTION DESCRIPTION OF EQUIPMENT ACTIVITES MUST BE	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
rative H			Туре	Funding		QUANTITY	UNIT COST	TOTAL			AEL Ref #		Total Budget		Descriptions on how it will
e #	CATEGORY	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	Туре	Funding		QUANTITY	UNIT COST 37,500.00			Capability	AEL Ref # 06CP-03-MWAV		Total Budget		Descriptions on how it will
e #	CATEGORY	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 an AEL	Туре	Funding Type Other				\$ 150,000.00	Capability	Capability Operational Coordination Operational		Source			Descriptions on how it will affect your program
28 29	CATEGORY	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 an AEL All-Indoor Radio	Type	Funding Type Other Federal Other		4.00	37,500.00	\$ 150,000.00 \$ 18,000.00	Capability Operation Communications Operation	Capability Operational Coordination Operational Coordination Operational Operational	06CP-03-MWAV	Source UASI	\$ 150,000.00		Descriptions on how it will affect your program
28 29 30	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrator	Type New New New New	Funding Type Other Federal Other Federal Other Federal Other Federal		4.00	37,500.00	\$ 150,000.00 \$ 18,000.00	Capability Operation Communications Operation Communications Operation Operation	Capability Operational Coordination Operational Coordination Operational Coordination Operational Coordination	06CP-03-MWAV	UASI UASI	\$ 150,000.00 \$ 18,000.00		Critical unable to cut - if reduced project is unable to cut - if reduced project is unable to move forward Critical unable to cut - if reduced project is unable to move forward Critical unable to cut - if reduced project is unable to cut - if reduced
rrative H	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrator Radio Spare	Type New New New New New	Funding Type Other Federal		4.00	37,500.00 18,000.00 22,000.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications	Capability Operational Coordination Operational Coordination Operational Coordination Operational Coordination Operational Coordination	06CP-03-MWAV 06CP-03-MWAV	UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00		Descriptions on how it will affect your program
28 29 30 31	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrator Radio Spare Frequency Coordination & Licensing Factory Integration and Test Engineering and Documentation	Type New New New New New New	Funding Type Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal		4.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications	Capability Operational Coordination Operational Coordination Operational Coordination Operational Coordination Operational Coordination	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV	UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00		Descriptions on how it will affect your program
28 29 30 31 32	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrators Radio Spare Frequency Coordination & Licensing Factory Integration and Test	Type New New New New New New New	Funding Type Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal Other Federal		4.00 1.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00 4,000.00 3,800.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications	Capability Capability Operational Coordination	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV	UASI UASI UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00	Reductions	Descriptions on how it will affect your program
28 29 30 31 32 33 34	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrators Radio Spare Frequency Coordination & Licensing Factory Integration and Test Engineering and Documentation Project Management, Project Engineering, Radio Intall &	Type New	Funding Type Other Federal Other		4.00 1.00 1.00 1.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00 4,000.00 3,800.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications	Capability Capability Operational Coordination	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV	UASI UASI UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00	Reductions	Descriptions on how it will affect your program
rative H e # 28 29 30 31 32 33	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrator Radio Spare Frequency Coordination & Licensing Factory Integration and Test Engineering and Documentation Project Management, Project Engineering, Radio Intall & Test, Aritenna Install	Type New New New New New New New	Funding Type		4.00 1.00 1.00 1.00 1.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00 4,000.00 3,800.00 98,000.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00 \$ 98,000.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation	Capability Capability Operational Coordination Operational	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 21GN-00-CNST	UASI UASI UASI UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00 \$ 98,000.00	Reductions	Descriptions on how it will affect your program
rative H e # 28 29 30 31 32 33 34 35 36 37	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrator Radio Spare Frequency Coordination & Licensing Factory Integration and Test Engineering and Documentation Project Management, Project Engineering, Radio Intall & Test, Antenna Install Provision NMS	Type New New	Funding Type Other Federal Other		4.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00 4,000.00 3,800.00 98,000.00 30,000.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00 \$ 30,000.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation	Capability Capability Operational Coordination	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 21GN-00-CNST 06CP-03-MWAV	UASI UASI UASI UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 4,000.00 \$ 3,800.00 \$ 98,000.00 \$ 30,000.00	Reductions	Descriptions on how it will affect your program
rative H e # 28 29 30 31 32 33 34 35 36 37 38 39	CATEGORY	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 an AEL All-Indoor Radio Antenna & Waveguide System (4 Antennas & 3 Dehydrators Radio Spare Frequency Coordination & Licensing Factory Integration and Test Engineering and Documentation Project Management, Project Engineering, Radio Intall & Test, Antenna Install Provision NMS Warranty	Type New New	Funding Type Other Federal Other		4.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	37,500.00 18,000.00 22,000.00 5,000.00 4,000.00 3,800.00 98,000.00 30,000.00 1,900.00	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 5,000.00 \$ 3,800.00 \$ 38,000.00 \$ 38,000.00 \$ 30,000.00 \$ 30,000.00 \$ 3,800.00	Capability Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation Communications Operation	Capability Capability Operational Coordination	06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 06CP-03-MWAV 21GN-00-CNST 06CP-03-MWAV 06CP-03-MWAV	UASI UASI UASI UASI UASI UASI UASI UASI	\$ 150,000.00 \$ 18,000.00 \$ 22,000.00 \$ 5,000.00 \$ 3,800.00 \$ 30,000.00 \$ 3,800.00 \$ 3,800.00	Reductions	Descriptions on how it will affect your program

All-Indoor Radio operates at 11GHz with 200 Mpbs. These radios are the terminal equipment for the communication system. Standard Antenna & Waveguide System - These are the required 11 GHz antenna and waveguides for the communication system. Radio Spare - A spare11 GHz with 200 Mpbs radio for the communication system which is required in the event of a failure of the operating radio. Frequency Coordination & Licensing - The lawfully required frequency coordination and FCC frequency licer sing of the communication system. Factory Integration and Test - This is the manufacturer's factory acceptance testing prior to the delivery of the communication system. Engineering & Documentation - This is the communication system path engineering and

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type			Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	KK
	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					-	-								
40		Onsite class for communication system provisioning training		Other Federal	NO	NO	1.00		Operation Communications	Operational Coordination	\$ 14,000.00	21GN-00- TRNG	\$ 14,000.00		Critical unable to cut - if reduced project is unable to move forward	
41											\$-		\$ -]
42											\$ -		\$ -		+	-
43											\$ -		\$ -			-
44											\$-		\$-			_
45											\$ -		\$ -			-
46											\$ -		\$ -			-
47											\$-		\$ -			_
48											\$ -		\$ -			
49											\$ -		\$ -			1
	Training Sub- Total										\$ 14,000.00		\$ 14,000.00	_		

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 GRAN Onsite class for communication system provisioning training is a class which will be held over multiple days for up to five employees to be trained on the new communication system. Training will cover the operational and maintenance aspects of the new communication system.

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$ -		\$ -		
51											\$ -		\$ -		
52											\$ -		\$-		
53											\$ -		\$ -	L	
54											\$ -		\$ -	L	
55											\$ -		\$ -	L	
56											\$ -		\$ -		+
57											\$-		\$ -		
	Exercise Sub- Total										\$ -		s -	-	
EXERCIS	E COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	THE POSITIONS	AND DELIVERAB	LES. NARRAT	IVE WILL BE USE	ED TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED	IN THE GRAN			

Narra	ative H	ERE							Total Original Budget	Line Item Reductions Total	
									\$ 356,000.00	\$ -	
All	buda	ets require an	email approval from the financial and/or grant	manager							

	Nevada Homeland	PROJECT ID:	LL								
	Project Proposal for	Date Submitted	4/4/17								
1)	PROJECT TITLE:	Mesquite Emergency Mu	esquite Emergency Multi Agency Radio Project								
2)	Proposing/Lead Agency:	Mesquite Fire									
3)	1° Project Manager Name/Title:	Rick Resnick	lick Resnick								
	1º Project Manager Contact Info:	Phone: (702) 346-5004	Email: rresnick@mesquitenv.gov	,							
4)	2 [°] Project Manager Name/Title:	Kim Otero									
	2° Project Manager Contact Info:	Phone: (702) 346-5262	Email: kotero@mesquitenv.gov								
5)	Finance/Grant Contact Name/Title:	Dave Empey	ave Empey								
	Finance/Grant Contact Info:	Phone: (702) 346-5295	Email: dempey@mesquitenv.go	V							
6)	CLASSIFICATION - Check the	C	noose one:								

Check the primary intention of the Proposea Project:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	0
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	\odot

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.

Sustainment of encrypted radio communications between the City of Mesquite and the Las Vegas Metro Police Department is essential. It is necessary that emergency personnel have the ability to communicate from Laughlin through the Las Vegas Valley and as far north as St. George, Utah. The system in-place is currently being utilized by Mesquite PD, Las Vegas Metro and Mesquite Fire. This project will add radios to Mesquite Fire to ensure that personnel have a handheld radio when they are on a call as well as put radios in all emergency vehicles making it possible to communicate necedssary information regarding all hazards immediately.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

Mesquite Fire Rescue has been authorized seven additional firefighters, but lacks funding to meet the need to supply them with portable radios. Despite the city growth, Mesquite is still operating at a deficit budget. Also, five of our response vehicles did not get fitted for mobile radios. By addressing these issues, Mesquite Fire and PD is ensuring that timely communications in support of security, situational awareness, and operations budget are being met.

Nevada Homeland	PROJECT ID:	LL				
Project Proposal for	Project Proposal for FFY17 HSGP Funding Description					
PROJECT TITLE REFERENCE:						

10)	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy
	Objective to be addressed

NCHS FFY17 Priority

Urban Area Strategy Priority

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 approval, radios will be purchased within 3 months. Thirty days after purchase, programming and installation will be accomplished. Project completion is expected within 6 months.

Radio project fall under Rick Resnick and Kim Otero. Programming will be done by Las Vegas Metro. Installation will be done by the City of Mesquite.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Fire Department	Mesquite	Rick Resnick
12(b)	Police Department	Mesquite	Kim Otero
12(c)			

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

×	None
XT BOX	
BLE TEX	
o VISIBLI	
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IN LIMI	
FIELD	

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homelar	nd Security Grant Program (HSGP)	PRO	JECT ID:	11
	or FFY17 HSGP Funding Description		Submitted	<u> </u>
		Date	Jubilitteu	
IECT TITLE REFERENCE:	Mesquite Emergency Multi Agency Radio Project			
BUDGET - Describe objectives,	acquisitions, and quantities within each category. Be spe	cific. Identify l	UASI and State	cost.
15a) Planning [Development of p	olicies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Continue planning under previ	ous agreement in 2015.			
				\$ 0.00
	nt of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
Kim Otero, responsibility and 1 Troy Tanner, final approval au				
Rick Resnick, Fire Departmen	t Technical Advisor			
				\$ 0.00
15c) Equipment (Procurement a	nd installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
8 Dualband P25 encryption ca	pable handheld radios			
6 Dualband P25 encryption ca	pable mobile radios			
		\$ 90,000.00		\$ 90,000.00
	delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
None				
				\$ 0.00
1Eo) Exorcico (Development and	execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
None	execution of exercises to evaluate and improve capabilities	LV-UASI	State-wide	Subiotal
				\$ 0.00
15f) Personnel [Staff (not contract	tors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
None				
				¢ 0 00
				\$ 0.00

15g) PROJECT TOTALS

3

TOTAL

\$ 90,000.00

LV-UASI

\$ 90,000.00

State-wide

\$ 0.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	LL
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

Mesquite Emergency Multi Agency Radio 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	Order Radios	07/03/17	10/30/17	3
3	Installment	11/01/17	12/01/17	1
4	Troubleshooting	12/01/17	01/01/17	1
5				
6				
7				
8				
9				
10				
11				
12				

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.

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

As identified in the THIRA, Operational Communications and Coordination.

Interoperability between all responding agencies within Clark County falls under Operational Communications and is vital to success especially during acts of terror. Clark County has been mentioned in ISIL/ISIS communications as potential targets. Mesquite will respond to aid in emergency operations and encrypted communications is essential during acts of terror.

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

Less quantity can be accomplished if need be.

	Nevada Homeland	d Security Grant Program (HSGP)	PROJECT ID:	
	Project Proposal fo	r FFY17 HSGP Funding Description	Date Submitted	4/4/17
RO.	ECT TITLE REFERENCE:	Mesquite Emergency Multi Agency Radio Project		
	d. Can this project continue w	/ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size		population growth, Mesquite is still operating in a deficit b	Judget.	
ed to v				
imitied to v	e. Does this project provide a	measurable "state-wide" benefit? YES 💿 NO 🔘 Explain b	pelow.	

- (•) YES Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
 - **NO** Agency has not participated in the 2016 Threats and Hazards 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*

None



Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended

	Nevada Homeland	l Secu	rity Grant Pr	ogram (HSGP)	PROJECT ID	MM
	Project Proposal for	r FFY1	7 HSGP Fund	ling Description	Date Submitted	4/4/17
1)	PROJECT TITLE:	Clark C	County Emergency	Communication Project		
2)	Proposing/Lead Agency:	Clark C	County Fire Depart	ment/Clark County Office of Eme	rgency Manageme	ent
3)	1º Project Manager Name/Title:	Larry H	laydu			
	1º Project Manager Contact Info:	Phone:	(702) 455-5710	Email: LHaydu@ClarkCountyNv.	gov	
4)	2 [°] Project Manager Name/Title:					
	2 ^o Project Manager Contact Info:	Phone:		Email:		
5)	Finance/Grant Contact Name/Title:	Karen 7	Faylor			
	Finance/Grant Contact Info:	Phone:	(702) 455-6183	Email: Karent@ClarkCountyNv.g	gov	
6)	CLASSIFICATION - Check the p	primary	intention of the P	roposed Project:	(Choose one:
	NEW New; no grant	t-funded	projects have recen	tly (within 5 years) addressed this ca	pability	0

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

ENHANCE

SUSTAIN

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Will primarily expand or enhance the capability(s) of prior grant-funded projects

Will primarily sustain capability or continue establishment effort in existing program

This project sustains and strenghtens the resiliency of operational communication and ensures enhanced public safety for the rural urban area. It addresses gaps in operational communications capabilities which leave our communities vulnerable should terrorism or other emergency incidents occur in our area. Specifically the sixteen remote fire departments that provide service to generally underserved areas of our community, These users provide critically important public warning, first response to the rural communities during a disaster.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project will strenghten the rural communities in Clark County ability to provide public information and warning and operational communications during a emergency incidents to deter, detect, protect citizens in the rural urban area.

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	Nevada Homelan	d Security Grant Program (HSGP)	PROJECT ID:	MM
	Project Proposal fo	r FFY17 HSGP Funding Description	Date Submitted	4/4/17
RO.	IECT TITLE REFERENCE:	Clark County Emergency Communication Project		
0)	PRIORITIES - Identify applical Objective to be addressed	ble Nevada Commission on Homeland Security (NCHS,) Priority and Urban Area	Strategy
	NCHS FFY17 Priority	#5 - OPERATIONAL COMMUNICATION		
	Urban Area Strategy Priority	#4 - OPERATIONAL COORDINATION		
	This project will be implemented	which the project will be accomplished, identifying who (i.e. staff, c d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
	This project will be implemented Management. Clark County Fir		ounty Office of Emergency	/
X	This project will be implemented	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
XT BOX	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
E TEXT BOX	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
'ISIBLE TEXT BOX	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
TO VISIBLE TEXT BOX	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
iited to visible text box	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/
FIELD IS LIMITED TO VISIBLE TEXT BOX	This project will be implemented Management. Clark County Fir	d by the Clark County Fire Department and the Clark C	ounty Office of Emergency	/

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County Fire Department	Clark County, Nv	Larry Haydu
12(b)			
12(c)			

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

The proposed equipment purchased will have a standard life expectancy with normal use, and would need to be replaced and funding pursued when it reached the end of its operational functionality.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

FIELD IS LIMITED TO VISIBLE TEXT BOX

LV-UASI % State-wide % IUIAL 7	LV-UASI %	State-wide %	TOTAL %
--------------------------------	-----------	--------------	----------------

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		_
for UASI	for Statewide		

		d Security Grant Program (HSGP)		DJECT ID:	MM
Project Pro	posal fo	or FFY17 HSGP Funding Description	Date	Submitted	4/4/17
JECT TITLE REFER	ENCE:	Clark County Emergency Communication Proje	ct		
	-	acquisitions, and quantities within each category. Be vlicies, plans, procedures, mutual aid agreements, strategies]	specific. Identify LV-UASI	UASI and State State-wide	<i>cost.</i> SubTotal
					\$ 0.00
15b) Organization	[Establishmen	t of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15c) Equipment (P	rocurement an	d installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
Motorola King Radi	os,pager, ba	atteries, microphones	\$ 40,000.00		\$ 40,000.00
15d) Training [Deve	lopment and a	lelivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15e) Exercise [Deve	lopment and e	xecution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
					\$ 0.00
15f) Personnel [Sta	iff (not contract	ors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubTotal
					\$ 0.00
			LV-UASI	State-wide	TOTAL
15g) PROJECT TO				June-wide	IUTAL

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	MM
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

Clark County Emergency Communication 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	10/01/17	12/31/17	3
3	Purchasing Process, vendor selection	01/01/18	06/30/18	
4	Delivery and Invoicing Process	07/01/18	09/30/18	
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.

During a terrorist or other emergency event the ability to communciate 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 Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with Nevada Commission on Homeland Security FY 17 priorities # 5 Operational Communications and #4 Operational Coordination. These radio will increase the rural fire department ability to manage an event and provide additional assistance to citizens.

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

Clark County Fire Department has 16 rural fire stations to provide this equipment.

	Nevada Homeland	Security Grant Program	(HSGP)	PROJECT ID:	MM
	Project Proposal for	FFY17 HSGP Funding De	scription	Date Submitted	4/4/17
PROJ	ECT TITLE REFERENCE:	Clark County Emergency Commun	ication Project		
	d. Can this project continue w	thout funding? YES 🔵 NO 💽 Exp	plain below.		
"e" are limitied to visible text box size	This project was not part of Clar				
imit	e. Does this project provide a	neasurable "state-wide" benefit? YES	🔘 NO 💽 Explain bel	ow.	
Fields "d" and "e" are l	N/A				

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

N/A

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



Nevada Homeland Security Grant Program (HSGP) **PROJECT ID:** ΝN **Project Proposal for FFY17 HSGP Funding Description Date Submitted** 4/5/17 **PROJECT TITLE:** School Radio Interoperable Communications 1) 2) **Proposing/Lead Agency:** Clark County School District Police Department Office of Emergency Management 3) 1º Project Manager Name/Title: Michael F Wilson, Director of Office of Emergency Management 1º Project Manager Contact Info: Email: helitack@interact.ccsd.net Phone: (702) 799-7830 Dimitri Theodorou, Manager Emergency Management 4) 2[°] Project Manager Name/Title: 2[°] Project Manager Contact Info: Phone: (702) 513-7711 Email: djtheodorou@interact.ccsd.net 5) Finance/Grant Contact Name/Title Richard P. Easter, Grants Writer & Coordinator Phone: (702) 799-5425 Email: reaster@interact.ccsd.net Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	\bigcirc
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Clark County School District (CCSD) is the 5th largest school district in the nation, with current growth, by 2018 the district is projected to have 350,000 students, 40,000 employees, and 370 schools. A Communications GAP analysis conducted in 2010 for CCSD identified communications gaps that concerned both the district and local agencies; CCSDPD and CCSDPD OEM comm. system is on SNACC (Southern Nevada Area Communications Council) shared along with all local police and fire response agencies, thus having inter agency comm. capability bur not intra district. The District's Transportation Department is currently operating on 16 channel, 4 watt, digital radios, UHF 450 MHz with no intra district or inter agency operable comm. capability. The district's schools currently utilize analog two watt radios to communicate within each schools' staff, thus allowing ONLY school comm. amongst school personnel, with neither intra district nor inter agency operable comm. capabilities. The inability to communicate efficiently & effectively across all schools and departments is a pronounced vulnerability and this concern brought district & local response agencies together in finding communications solutions without the infliction of high budgetary costs. Although new technologies, testing, and exercises met both intra & inter operable communications expectations, the high costs of purchasing equipment and the lack of school funding appropriations for the security and safety of students and staff, put a "HALT" on the district's communication interoperability program. CCSDP OEM came up with a less expensive solution that will allow both intra & intra operable communication goals be achieved by [a] purchasing at least one 16 Channel, 4 watt, digital radio per school, total of 370 Radios with programmed channels divide into 4 zones; and [b] 4 IP Gateways, with patching mechanism, switch, and turn key solution, one for each zone which will allow to talk to CCSDPD Dispatch and with a switch to first responders.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]	
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]	
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION	

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The following meet both Operational Communications and Operational Coordination Core Capability Criteria. The ability for intra and inter operable communications is critical to the safety and security of students and staff and meets prevention, protection, and response mission areas during emergencies. The ability for schools to have direct intra and inter operable communication with CCSD Emergency Operations Center, CCSDPD Dispatch, and local response agencies via CCSDPD Dispatch patching mechanism/switch will ensure the capacity of timely communications in support of security, situational awareness, and operational logistics support needs by all means available. It would establish and maintain a unified and coordinated operational structure and process that involves all stakeholders. Furthermore, the ability for direct school communications and operational coordination with the District's Emergency Operations Center and Office of Emergency Management will allows for critical, essential, and/or vital logistics resources, such as transportation, nursing, food, police, facility maintenance, psychologists, building inspectors, and other, meet each school's needs and objectives during emergencies.

	Nevada Homeland	Sec	urity Grant P	rogram (HSGP)		PROJECT ID:	NN
	Project Proposal for	FFY	17 HSGP Fun	ding Description		Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	Scho	ol Radio Interopera	able Communications			
10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strateg Objective to be addressed					Strategy		
	NCHS FFY17 Priority		#5 - OPERATION	IAL COMMUNICATION			
	Urban Area Strategy Priority		#5 - OPERATION	IAL COMMUNICATIONS	S		
FIELD IS LIMITED TO VISIBLE TEXT BOX	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 Both CCSD Intra and Inter Operability capability will be achieved as follows: [A] CCSDPD OEM will coordinate the purchase of 370 16 channel Digital Radios and programming [B] CCSDPD OEM will coordinate the purchase of 4 IP Gateways patching mechanism and turnkey solutions, applicable software, equipment, including installation [C] CCSDPD Dispatch will update consoles using software that incorporate Transportation's UHF 450 MHz communications capabilities and provide a switch to allow direct communication between schools, district's police officers, and first responders						
FIE							

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	CCSDPD Office of Emergency Management	District	Michael F Wilson, Director Office of Emergency Management
12(b)			
12(c)			

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

The request for Homeland Security Grant (UASI) funding is for the purchase of 370 digital radios (radios, antennas, batteries, belt clips, and power chargers) 1 radio per school, radio programming, and 4 IP Gateways, software and installation for 4 area coverage within the Clark County Area, to allow intra and inter operable communications capability. Sustainment will be the responsibility of each school as they will have to replace their remaining existing analog radios with new identical or better digital radios based on school funding availability each year. Purchase of these radios will include programing required for the designated intra and inter operable channel(s) and already installed IP Gateways zone the each school is located. Sustainability includes maintenance of these radios, including the radios under this grant. Training, exercises, and communications operation manual will be provided on continuous basis, as part of the sustainment, by CCSDPD OEM and first responder partners at no additional costs.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

100	0	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

TEXT BOX

VISIBLE

5

FIELD IS LIMITED

Nevada Homeland Security Grant Program (HSGP)	PRO	JECT ID:	NN
Project Proposal for FFY17 HSGP Funding Description	Date	Submitted	4/5/17
ECT TITLE REFERENCE: School Radio Interoperable Communications	-		
BUDGET - Describe objectives, acquisitions, and quantities within each category. Be spec	cific. Identify L	JASI 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
and programming, priced at \$510/Radio (\$510 per radio X 370 radios = \$188,700) 4 IP Gateways with patching mechanism and turnkey solution, software, equipment, cables, antennas, ground kit, other parts, and installation (4 IPGs X10000 =\$40,000) 15d) Training [Development and delivery of training to perform assigned missions and tasks]	\$ 228,700.00	State-wide	\$ 228,700.00 SubTotal \$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
		State-wide	\$ 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
	\$ 228,700.00	\$ 0.00	\$ 228,700.00

	Nev	ada Homeland	Security Grant Program (HSGP)	PRO	JECT ID:	NN
	Proje	ct Proposal fo	r FFY17 HSGP Funding Description	Date	Submitted	4/5/17
RO	JECT TITLE	REFERENCE:	School Radio Interoperable Communications	-		
6)	TASKS & S	CHEDULE - Identify	the necessary tasks/steps, and time needed.	_		
	-	LIMITED TO TEXT BOX S		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	10/01/17	03/31/18	6
	3	Vendor Selection		04/01/18	06/30/18	3
	4	Order all Equipment		07/01/18	09/30/18	3
	5	Install 4 IP Gateways	, patching, turnkey, and software	10/01/18	12/31/18	3
	6	Program 370 Radios		01/01/19	03/31/19	3
	7	Conduct Equipment	Radio) Tests	04/01/19	05/31/19	2
	8	Develop District's Int	a and Inter Operable Communications Plan	06/01/19	09/30/19	4
	9					
	10					
	11					
	12			1		

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.

Based on nationwide school shootings and global school terrorism events post 9-1-1, schools are vulnerable and easy targets, and the threats of school shootings and terrorism are imminent. When schools are in "Hard Lock Down" due to an attack, any knowledge coming from inside the school facilities will be very vital to first responders for planning counter attack. With hardened security building and police personnel limitations and radio communications deficiencies our security posture is compromised and therefore, radio communications between school personnel and first responders and district EOC will expand our capacity and will support prevention and response to mass casualty event. This project will also enable instant communication to all schools over 8,000 sq miles related to safety protocols, needs assessment, and resource mobilization. Keeping our students and staff informed and safe through transmission of real-time voice is instrumental to support ongoing life-sustaining activities, provide basic human needs, and transition to recovery.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Yes it aligns with FY2017 Priorities and Core Capabilities of Operational Communication and Operational Coordination. It also aligns with prevention, protection, and response mission areas. It is essential for responders to have direct intra and inter operable communication with schools in the event of Natural, Technological, and especially Adversarial/Human Caused emergencies (active assailant/active shooter, bomb threats, etc.). In emergency situations in which every second matters and every life counts, the ability for both intra and inter operable communications is vital to response, protection and prevention.

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

This project can be split into phases in which only segments of schools receive radios, however this diminishes the goal of networking all 370+ schools into a single intra and inter operable communication system. Schools not included would remain vulnerable, until future phases are approved and completed.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	NN
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJ	ECT TITLE REFERENCE:	School Radio Interoperable Communications		
	d. Can this project continue wi	thout funding? YES 💽 NO 🔵 Explain below.		
"e" are limitied to visible text box size	streams, but that process could t through this program will provide funding can be used as seed fun radios, enhancing the safety and		ve priorities. Funding gent need. The hope ture for the purchase	the project is that HSGP
imit	e. Does this project provide a r	neasurable "state-wide" benefit? YES 💽 NO 🔵 Explain bel	ow.	
Fields "d" and "e" are l		project will serve as a model case study for school districts ant a low-cost intra/inter operable communication system.	throughout Nevada (and especially

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

After the 2010 Communications GAP Analysis for the School District, CCSD and other local response agencies have investigated multiple system implementations that enable it to meet both intra and inter operable communications capabilities. The majority of available solutions require a large investment in equipment and installation, and are frankly cost prohibitive. The plan proposed for HSGP funding provides high quality communications integration at a fraction of the cost, enhancing intra-school communication and establishing an inter-district network that connects schools, CCSDPD dispatch, CCSDPD OEM, and first responders. By providing a radio to every school in our district, we anticipate school administrators will see the benefits of streamlined, cohesive emergency communication and use local funds to build their site's capabilities.

Date that you are submitting your Original or Amended Project



	Nevada Homeland	l Security Grant Pr	ogram (HSGP)	PROJECT ID:	00
	Project Proposal for	FFY17 HSGP Func	ling Description	Date Submitted	4/5/17
1)	PROJECT TITLE:	Southern Nevada Health	District Infrastructure Security		
2)	Proposing/Lead Agency:	Southern Nevada Health	District (SNHD)		
3)	1º Project Manager Name/Title:	Steven Kramer/Supervise	or		
	1º Project Manager Contact Info:	Phone: (702) 759-1658	Email: kramer@snhdmail.org		
4)	2 [°] Project Manager Name/Title:	Forrest Hasselbauer/Sec	urity Supervisor		
	2° Project Manager Contact Info:	Phone: (702) 759-1130	Email: hasselbauer@snhdmail.c	org	
5)	Finance/Grant Contact Name/Title:	Lynda Zielinski/Account I	l		
	Finance/Grant Contact Info:	Phone: (702) 759-1245	Email: zielinski@snhdmail.org		
- 1					

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

During a recent survey conducted by the DHS, the need was identified to enhance the current camera and recording system currently in operation at the SNHD Main campus. The recommendation within the survey report identified the need to enhance the current system with additional cameras to monitor the Front, Back and North side to the SNHD building. This integrated camera and recording system will provide operational coordination between SNHD security and LVMPD along with SNHD EOC during an event or crisis. This will ensure the safety and welfare of not only the infrastructure, data, personnel, but also the clients within the building during business hours. The system will be monitored during business hours by Security Staff along with an off site monitoring company both during and after normal operating hours.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project directly aligns with the physical on scene security of the SNHD physical building. The enhancements to the camera and recording system will provide SNHD the ability to identify, detect, and provide early mitigation to any potential threat to the building, staff, or clients within the structure. Early detection will provide security with the information to work with Law Enforcement to mitigate any potential threats.

Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	00
Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/5/17
PROJECT TITLE REFERENCE:	Southern Nevada Health District Infrastructure Security		
10) PRIORITIES - Identify applicab Objective to be addressed	le Nevada Commission on Homeland Security (NCHS) Prio	rity and Urban Area	ı Strategy

NCHS FFY17 Priority	#2 - INTELLIGENCE AND INFORMATION SHARING
Urban Area Strategy Priority	#2 - INTELLIGENCE AND INFORMATION SHARING

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

This project will begin upon the awarding of funding to the District through DEM. The identified vendor to provide the equipment and the installation for the enhancement to the system will be North American Video (NAV). The company will work closely with Forrest, `the Security Supervisor, and staff from SNHD Facilities during the installation. Once the contractor has completed the work within the project, SNHD will have the current monitoring service provide the support for the additional cameras and monitor on a 24/7 365 day schedule.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Southern Nevada Health District	County-Special District	Steven Kramer
12(b)			
12(c)			

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

This project is identified for the additional camera and recording system to be purchased and installed as recommended by the Infrastructure Survey conducted by Homeland Security. The cost associated for continued monitoring for the 24/7 365 will be funded by the District through current contracts.

FIELD IS LIMITED TO VISIBLE TEXT BOX

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		2
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	00
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

Southern Nevada Health District Infrastructure Security

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	SubTot
			\$ 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
Digital Recorder, Cameras, Switch, Monitor, Support Plate, Injectors, and AC unit to be installed in the recommended area as outlined within the DHS Site Survey. NAV will provide all identified equipment, materials and labor to install equipment.			
	\$ 76,650.00		\$ 76,650
	LV-UASI	State wide	CubTol
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTot
			\$ 0.00
			\$ 0.00
			\$ 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	
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	
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTot
	LV-UASI	State-wide	SubTot \$ 0.00
			\$ 0.00 SubTot \$ 0.00 SubTot
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			SubTot \$ 0.00
			SubTot \$ 0.00

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	00
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

Southern Nevada Health District Infrastructure Security

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	Provide NAV with PO to begin project to order equipment	10/20/17	12/20/17	2
3	Installation of purchased equipment	01/20/18	02/20/18	1
4	Project Final Financial Reimbursement	02/20/18	03/20/18	1
5	Project Close Out	03/20/18	04/20/18	1
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.

SNHD is the lead agency for a potential Public Health event, and should an event occur that is related to a Bio-Terrorism type of incident, the SNHD could become a target to block any mitigation to the event. This would include the coordination of countermeasures that may be utilized to be distributed to the public. The SNHD main facility is the location for the SNHD-DOC that would support the response efforts. As seen during the past year, Public Health Departments have been targeted for calculated, organized attacks as acts of terrorism.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.

The ability to ensure the timely communications in support for security, situational awareness, and operations by any and all means. The ability to provide the enhanced security cameras and recording equipment as identified by the DHS Security Assessment, will assist SNHD security to quickly identify any potential threats during an incident response.

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

Should SNHD have to reduce funding for this project, the district would review the most critical access points identified within the Security Assessment and focus on those areas first.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	00		
	Project Proposal for FFY17 HSGP Funding Description Date Submitted 4/5/17					
PROJ	ROJECT TITLE REFERENCE: Southern Nevada Health District Infrastructure Security					
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.				
"e" are limitied to visible text box size	No budgeted funding for the enh	ancements.				
miti	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explair	n below.			
Fields "d" and "e" are li		r a Public Health Response during an event. As such, c te agencies is critical to the event response.	oordination between loca	al partners		

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

The SNHD has taken initial measures to ensure the security and safety to the workforce and the clients that are within the structure. The District has requested and participated in the DHS Infrastructure Survey Security & Resilience Report. This project is intended to respond to one of the suggestions that was identified within the report to enhance the security and the tools available for mitigation by security staff on a daily basis.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



Nevada Homeland Security Grant Program (HSGP) **PROJECT ID:** PP **Project Proposal for FFY17 HSGP Funding Description Date Submitted** 4/4/17 **PROJECT TITLE:** Enhanced Communications for Emergency/Call Center Activities 1) 2) **Proposing/Lead Agency:** Dignity Health - St. Rose Dominican 1º Project Manager Name/Title: Daniel Lake / Director of Security & Emergency Management 3) 1º Project Manager Contact Info: Phone: (702) 630-1137 Email: daniel.lake@dignityhealth.org James Lassiter / Security Supervisor 4) 2° Project Manager Name/Title: 2[°] Project Manager Contact Info: Phone: (702) 483-7353 Email: james.lassiter@dignityhealth.org 5) Finance/Grant Contact Name/Title Polly Bates / Grant Officer Phone: (702) 616-5764 Email: polly.bates@dignityhealth.org Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	\odot
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The goal of the proposed project is to improve the communications capability of the Dignity Health - St. Rose Dominican (St. Rose) Safety and Security Department by replacing its obsolete analog radio system with a digital system. The current system does not have the capacity to broadcast effectively from one hospital campus to another, particularly during inclement weather. We are using the highest wattage (50 watts) allowed under our current Federal Communications Commission license. The new system would enable clear communication for emergency dispatch/call center activities, including:

--Requesting security, police or EMT services through the call center

--Responding to assaults or requests for assistance by staff, visitors, and patients

--Managing the Behavioral Health Unit

--Coordinating and managing communication during Hospital Incident Command System disasters or events such as loss of utilities, earthquake, fire, flood, and mass casualty

--Serving as backup communications for internal emergencies for clinical and security staff

--Responding to an active shooter event promptly and safely, and communicating with Command Center activities in collaboration with local public safety responders.

This request aligns with the NCHS FFY17 priority of Operational Communications for St. Rose security staff (users) and patients and staff (beneficiaries) in our three acute care hospitals: Siena, 3001 St. Rose Pkwy., Henderson; Rose De Lima, 102 E. Lake Mead Pkwy., Henderson; and San Martin, 8280 West Warm Springs Rd., Las Vegas.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability: Operational Communications [Mission Area: RESPONSE]	
Secondary Core Capability:	Operational Coordination [Mission Area: ALL]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project aligns with the Operational Communications capability by allowing the Security team to communicate clearly and provide situational awareness to the Southern Nevada Hospital Coalition in the event of an emergency. Infrastructure changes in the community, particularly increased development around the Rose de Lima campus, have caused noticeable challenges in receiving and transmitting clear information on the current equipment, which is more than 12 years old. By replacing the equipment with a digital system, we will ensure the capacity for timely communications among and between affected communities in the impact area and all response forces.

The project also aligns with the Operational Coordination capability as we will use the radio system to connect the Security teams of all three hospital campuses, as well as connecting to critical community stakeholders. St. Rose manages emergency preparedness with a whole community approach through strong partnerships with other area hospitals, emergency management personnel, and local law enforcement. Our goal is to provide a safe environment for visitors to Las Vegas, our patients, and our staff. This project will enhance connectivity between local and inter-agency organizations to coordinate CBRNE response. Clear and reliable communication is essential for maintaining a unified and coordinated security operation.

	Nevada Homeland	l Security Grant Program (HSGP)	PROJECT ID:	PP	
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/4/17	
PRO	PROJECT TITLE REFERENCE: Enhanced Communications for Emergency/Call Center Activities				
10)	O) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed				
	NCHS FFY17 Priority	#5 - OPERATIONAL COMMUNICATION			
	Urban Area Strategy Priority	#4 - OPERATIONAL COORDINATION			
11)					

arrive. The company is also contracted to install and set up the equipment, ensuring proper functionality, which will take approximately 1 week, with at least a day of installation at each of our three campuses. After installation and testing, BearCom will conduct a day of training of all Security supervisors on the new equipment. Security Supervisor James Lassiter will then train the rest of the Security staff, which will take a day and a half. Daniel Lake will provide the three local Emergency Medical Services/Fire Department primary command stations with the new portable digital radios so that in the event of a CBRNE or terrorist attack, St. Rose will be able to effectively coordinate a response.

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Dignity Health - St. Rose Dominican	Henderson and Las Vegas	Daniel Lake, Director of Safety and Security
12(b)			
12(c)			

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

The main continuing financial obligation of the equipment purchase is a \$900 annual license fee. This fee will be incorporated into the St. Rose Security Department's future operational budgets.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

100	0	100	
Enter your % from 0 to 100	Enter your % from 0 to 100		2
for UASI	for Statewide		

FIELD IS LIMITED TO VISIBLE TEXT BOX

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	PP
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

Enhanced Communications for Emergency/Call Center Activities

	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
			State wide	CubTotal
	15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
DOX SIZE				\$ 0.00
X	15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
ittied to visible te	The following equipment will be purchased from BearCom: 3 - SL5700 Digital Repeaters; 3 - Link Capacity Plus Link Keys; 3 - HP Pro Curve Switch; 3 - Property Configuration and set up of Repeaters programming; 37 - XPR 7550 Portable Digital Radios; 37 - Spare Batteries; 37-Spare Clips; 37 - Speaker Microphones to be utilized across the three St. Rose Dominican campuses.	\$ 64,709.63	\$ 0.00	\$ 64,709.63
	15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Fields are limitied to visible text box size				
Т.				\$ 0.00
F.K	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	\$ 0.00 SubTotal
P16	15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	
P16	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]	LV-UASI LV-UASI	State-wide	SubTotal
FIG.				SubTotal \$ 0.00
				SubTotal \$ 0.00 SubTotal

3

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	PP
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/4/17

Enhanced Communications for Emergency/Call Center Activities

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	Create purchase order	05/01/17	05/01/17	0
3	Purchase equipment	05/02/17	05/23/17	1
4	Install and test equipment: Siena Campus	05/24/17	05/25/17	0
5	Install and test equipment: San Martin Campus	05/26/17	05/29/17	0
6	Install and test equipment: Rose de Lima Campus	05/30/17	05/31/17	0
7	Train Security supervisors on use of equipment	06/01/17	06/02/17	0
8	Train Security staff on use of equipment	06/05/17	06/06/17	0
9	Provide portable digital radio to local EMS/Fire Department commands	06/06/17	06/07/17	0
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.

In case of a terrorist threat, this project allows for reliable, clear communications, as recent events have demonstrated. A week ago, the Rose de Lima Campus received a bomb threat, followed a few days later by a bomb threat at the Siena Campus. In such an emergency situation, it is imperative that we be able to communicate immediately among our three campuses. But due to the poor functioning of the analog system, the Security staff had to use phones to communicate, slowing down the process of coordination and preparation. An up-to-date, comprehensive digital radio system will allow us to respond to urgent situations immediately and coordinate among our campuses and with local EMS/Fire Departments and other hospitals.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project aligns with the Operational Communications and Operational Coordination capabilities, allowing the Security team to communicate clearly and promptly between our hospitals and with other hospitals and relevant entities to provide situational awareness and support the safety and security of our community in the event of an emergency.

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

To install this digital radio system, all equipment is required.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	PP					
	Project Proposal for	r FFY17 HSGP Funding Description	Date Submitted	4/4/17					
RO1	ECT TITLE REFERENCE:	Enhanced Communications for Emergency/Call Center	r Activities						
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.							
ole text box size	changing environment. One of o								
ed to visit									
are limitied to visible text box	e. Does this project provide a	measurable "state-wide" benefit? YES 💿 NO 🔵 Explain	below.						

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP) FFY 2017

			manager	L	INE ITEM I	DETAIL BUD	GET								
	Agency Name		Name & Contact #	Damer Lake	Security 702-	Grant Manager Name & Contact #		s, Grant Officer	702-616-5764						
	LI TITLE:	Enhanced Communications for Emerge	ncv/Cal	Center	Activities										
	IO IIIEE.	One Budget Per Funding Stream													
		SHSP													
#	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.		Type											affect your program
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tive	HERE														
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	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above											.		
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								\$- \$-					\$0.00		
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9	CATEGORY Travel Planning Training Exercise Equipment Organization	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)	Type Select Type		Each Travel			Trip	-	Capability	Саралиту	Source	£0.00		affect your program
)	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	Select		Each Travel			Trip		Capability	Саралну		\$0.00 \$0.00		affect your program
)	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	Select		Each Travel			Trip		Capability			\$0.00 \$0.00		affect your program
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) 2 3	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	Select		Each Travel					Capability			\$0.00 \$0.00 \$0.00 \$0.00		affect your program
	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	Select		Each Travel					Capability			\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	affect your program

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	PP
	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	2													
17								-					\$0.00			
18								-					\$0.00			
19								-					\$0.00			
20								-					\$0.00			
21								-					\$0.00			
	Planning Sub- Total							\$ -					\$0.00	\$0.00		
PLANNIN	G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	S AND DELIVERA	BLES. NAR	RATIVE WILL BE	USED TO ENSURE	ITEMS LISTED V	VILL BE COMPLETE	D IN THE GRAM	N			
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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$-					\$-		
23							\$ -					\$ -		
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ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 an AEL	7											
28		SLR 5700 Digital Repeater Two-Way Radio Infrastructure; link capacity plus 50 watt UHF	New		3.00	3,495.00	\$ 10,485.00	Operational Communications		06CP-01-REPT	SHSP	\$ 10,485.0)	
29		Linked capacity plus new deployment; multi-site Link keys	New		3.00	4,500.00	\$ 13,500.00	Operational Communications		06CP-01-REPT	SHSP	\$ 13,500.0)	
30		HP Pro curve switch	New		3.00	325.00	\$ 975.00	Operational Communications	Operational Coordination	06CP-01-REPT	SHSP	\$ 975.0)	
31		Property configuration and set up of Repeaters on network; includes all reprogramming of portables and Base Stations	New		3.00	2,150.00		Operational Communications	Operational Coordination	06CP-01-REPT	SHSP	\$ 6,450.0	,	
32		XPR 7550 portable digital radios; includes battery, antenna, and clip	New		37.00	749.99	\$ 27,749.63	Operational Communications		06CP-01-PORT	SHSP	\$ 27,749.6	3	
33		Spare batteries	New		37.00	75.00	\$ 2,775.00	Operational Communications	Operational Coordination	06CP-03-PRAC	SHSP	\$ 2,775.0)	
34		Spare clips	New		37.00	10.00	\$ 370.00	Operational Communications		06CP-03-PRAC	SHSP	\$ 370.0)	
35		Speaker mics	New		37.00	65.00	\$ 2,405.00	Operational Communications	Operational Coordination	06CP-03-PRAC	SHSP	\$ 2,405.0)	
36							\$ -					\$ -		
37 38							<u>\$</u> -					\$ -	+	
38							<u>\$</u> -					\$ - \$ -		
	EQUIPMENT Sub-Total						\$ 64.709.63					\$ 64,709,6	3 -	

SLR 5700 Digital Repeater: increased coverage of radio system. One for each campus--Siena, Rose de Lima, and San Martin. Linked capacity and multi-site link keys: allows access to digital channels, further increasing capability; one for each campus. HP Pro curve switch: allows system to link, allowing for reduced interference; one for each campus. Property configuration: professional installation of these products ensuring proper operation; retach campus. XPR 7550 portable digital two-way radio: allows each officer on the floor to communicate; 34 Security staff at 3 campuses plus 3 for local EMS/Fire Department command statienters: allows to freakened operational period.

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	PP
	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					_	-								
40											\$-		\$-			
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	Training Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE F									\$-		\$-	-		

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
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	Exercise Sub- Total										¢ .		e	-	
EXERC		VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE			HE POSITIONS				USED TO ENSURE	ITEMS LISTED W		IN THE GRAN	Ŷ		J
-A-RO	SE COST NARRAII	VE REQUIRED FOR EACHEINE ITEM ABOVE • PLEASE			HE POSITIONS		JELS. NARI		OSED TO ENSURE			O IN THE GRAN	i		
Narrativ															

Nari	ative H	IERE								Total Original Budget	Line Item Reductions Total	
										\$ 64,709.63	\$ -	
All	buda	ets require an	email approval from the f	inancial and/or grant r	nanager							

	Nevada Homeland	d Security Grant Pr	ogram (HSGP)	PROJECT ID:	QQ
	Project Proposal for	•	e ()	Date Submitted	4/5/17
1)	PROJECT TITLE:	Pyramid Lake Emergenc	y Response Radio Project	•	
2)	Proposing/Lead Agency:	Pyramid Lake Paiute Trib	e Emergency Response		
3)	1° Project Manager Name/Title:	Donald Pelt, Emergency	Response Coordinator		
	1° Project Manager Contact Info:	Phone: (775) 560-4417	Email: dpelt@plpt.nsn.us		
4)	2° Project Manager Name/Title:	Vinton Hawley, Tribal Ch	airman		
	2 ^o Project Manager Contact Info:	Phone: (775) 574-1000	Email: vhawley@plpt.nsn.us		
5)	Finance/Grant Contact Name/Title:	Lynda Ciceu, Comptroller	ſ		
	Finance/Grant Contact Info:	Phone: (775) 574-1000	Email: lciceu@plpt.nsn.us		
- 1					

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

This grant is new to the Pyramid Lake Paiute Tribe's Emergency Response Department and will allow for expansion of our current communication capability. The department currently has four (4) full-time and twenty-four (24) volunteers who are part of the emergency medical and fire services for the Pyramid Lake Paiute Tribe's Emergency Response Department. The department does not have enough radios to cover the existing manpower. We are a combination volunteer and career department and the volunteers need access to efficient communications with the department's Emergency Response Coordinator. Because of our department being dispatched by Washoe County Communications Center in Reno, NV, and recent upgrades to their communication systems, this will end the support of our current radio infrastructure. This project will allow for upgraded infrastructure that is P-25 Phase-2 compliant, to communicate more efficiently with personnel in our own department and allow for added communication abilities with Washoe County Search and Rescue, Tribal Rangers, Tribal Police Officers, and other agencies we may work with during an emergency or disaster.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Communications [Mission Area: RESPONSE]
Secondary Core Capability:	Infrastructure Systems [Mission Area(s): RESPONSE/RECOVERY]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The requested radios will allow the Emergency Response Coordinator along with Washoe County Dispatch the ability to notify Emergency Response staff and volunteers when they are needed to respond to a scene (Medical and/or Fire and Recovery). Washoe County Dispatch has recently upgraded their communications system, and the Tribe need to be compatible.

We have responders living in three different communities located on the reservation (Nixon, Wadsworth, and Sutcliffe) as well as a few who live off the reservation. Once we obtain and program these radio's, our team members will be able to head to a scene immediately rather than having to wait for a phone call. For instance, if we have a team member living in Wadsworth and there is a fire in Sutcliffe, that members response time will be longer than the team member living in Sutcliffe, who can be on scene in a matter of minutes. Those members living in Nixon at the current main fire-station will be able to report to the station and pick up the fire engine(s) and head out to Sutcliffe.

	Nevada Homeland Project Proposal for		-								ECT ID:	4	QQ 4/5/17
PROJ	ECT TITLE REFERENCE:			ike Emerç				•		L			
10)	PRIORITIES - Identify applicable Objective to be addressed	e Nevi	vada C	ommissio	ion on	Ноте	eland Se	ecurity (NCHS) Prio	rity and	l Urban Area	a Stra	tegy
	NCHS FFY17 Priority		#5 - (OPERAT	TIONA	LCON	MMUNI	CATION					
	Urban Area Strategy Priority												
11) XOR LEXT BOX	PROJECT IMPLEMENTATION Describe in rough order the process by w Obtain quotes on radios - Emerge Process purchase orders for sele Inventory new radios - Emergend Obtain quotes to install mobile ra Process purchase orders to sele Perform installation of mobile un Test use of installed mobile units Issue new radios Start utilization of new equipment	which the lency F ected c cy Res adios ir cted co its into and h	he project Respo compa sponse in vehic compar o vehic hand-h	ct will be ac onse Coor any to pur e Coordin cles - Em ny to insta cles - Con neld radio	ordinato rrchase nator nergen tall mol mpany os - col	ished, ic or e radio ncy Re obile ur / selec	dentifying os - Emo esponse nits in v eted for	g who (i.e. ergency e Coordir vehicles - this purp	staff, contrad Response nator Emergend pose	ctor, or ?)	will perform wl ator		'k

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Pyramid Lake Paiute Tribe Emergency Response Department	Pyramid Lake Paiute Reservation	Donald Pelt, Emergency Response Coordinator
12(b)			
12(c)			

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

вох	Once this update is completed, the communication system will be self-sustaining for the life of the radio's (ten years).
TEXT BC	
VISIBLE 7	
5	
IS LIMITED	
HELD IS I	
FIEL	

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

LV-UASI % State-wide % **TOTAL %**

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		-
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP)PRProject Proposal for FFY17 HSGP Funding DescriptionDate

PROJECT ID:

Date Submitted

QQ 4/5/17

PROJECT TITLE REFERENCE:

Pyramid Lake Emergency Response Radio Project

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

	1	State-wide	SubTotal
Update of existing Mutual Aid Agreement with Gerlach FD, Washoe, Lyon, Storey Counties (no charge, time to update the MOA anyway).			
	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			54510141
			\$ 0.00
15a) Fauinment (autority) (autority) (autority) (autority)	LV-UASI	State-wide	SubTotal
15c) Equipment [Procurement and installation of equipment, systems, facilities] -Purchase of 3 mobile XG-100M, 136-870MHZ, Unencrypted radio units and	LV-UASI	State-wide	Subiola
accessories for Ambulance use = \$19,869.00. -Purchase of 16 mobile XG-75M/M7300, 764-870MHZ, half duplex radio's and accessories for all emergency vehicles - Fire and Ambulance = \$62,805.60 -Purchase of 15 portable multi-band radios and accessories XG-75PE, 768-861 MHZ,sys, black-yellow for volunteers = \$48,285.30.	\$ 0.00	\$ 136,459.90	\$ 136,459.9
-Uninstall and install of new radios = \$3,800 -Programming of new radios = 1,700			
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 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	
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	SubTota
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	SubTota
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubTotal
	LV-UASI	State-wide	SubTotal \$ 0.00
			SubTotal \$ 0.00
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			SubTotal \$ 0.00
			SubTotal \$ 0.00 SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] 15f) Personnel [Staff (not contractors) directly implementing project and programmatic capability] 15g) PROJECT TOTALS			SubTotal \$ 0.00 SubTotal

15)

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	QQ
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	4/5/17

PROJECT TITLE REFERENCE:

Pyramid Lake Emergency Response Radio 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	Solicit quotes from three vendors	03/27/17	03/31/17	0
3	Process purchase orders and place radio order with vendor			
4	Solicit quotes from three vendors for installation and programming of new radio units.			
5	Installation and programming of radios			
6	Train personnel in use of new radios			
7	Issue new radios to staff			
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.
N/A
b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below.
This project will align with the Nevada Commission on Homeland Security with regards to Operations Communications. By
upgrading our current infrastructure of mobile and portable radios, we will be etter prepared for response to emergenvcies within our jurisdiction. Additionally, with the ending of support on our current infrastructure, we will be able to be more compliant
with the P-25 Phase-2 compliant communications project being conducted by Washoe Count. Lastly, with upgrading our
infrastructure, we will have more compliant and more reliable equipment that will be able to be maintained and updated more
effectively by Washoe County.
c. Can this project funding request be reduced? Is it scaleable? YES 🔵 NO 💿 Explain below.
N/A

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	QQ
	Project Proposal for	Date Submitted	4/5/17	
PROJ	ECT TITLE REFERENCE:	Pyramid Lake Emergency Response Radio Project		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size	N/A			
mitio	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔘 Explain l	below.	
Fields "d" and "e" are lii		d abilities to communicate with personnel and other key entrining radio interoperability with local emergency officia		

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. <u>CHOOSE ONE</u>:

(•) YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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*

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project

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

		Pyramid Lake Paiute Tribe Emergency Response Department	Name & Contact #	Donald Pelt,	Emergency pordinator (775)	Grant Manager Name & Contact #		hn, Contracts an	d Grants Admin	istrator (775) 574	4-1000					
	IJ TITLE:	Pyramid Lake Emergency Response Ra	dio Proj	ect												
		One Budget Per Funding Stream														4
		SHSP														
Line #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.														
1		None						\$-					\$-			
2								\$-			-		\$ -			
3								\$- \$-		-			\$- \$-			
	Personnel							φ -					φ			
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS				NS AND DELIVER	ABLES NA	\$ -					\$-	\$-		
	nel paid under this					NS AND DELIVER	ADLLS. NA		JE USED TO EN	JOKE TIEMS LIST						
Line #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above														
5 6								\$ - ¢					\$0.00 \$0.00			
7								ş -					\$0.00			
8	Fringe Sub-						-	\$-					\$0.00			
	Total							\$-					\$0.00	\$0.00		
		REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX request, thus no fringe benefits needed.	PLAINE IN	DETAIL THE	POSITIONS AI	ND DELIVERABLE	ES. NARRA	TIVE WILL BE US	ED TO ENSURE	ITEMS LISTED W	VILL BE COMPLETED	D IN THE				_
Line #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	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			<u> </u>						-		<u> </u>		\$0.00 \$0.00			-
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				L			L		-				\$0.00 \$0.00			-
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16	Travel Sub- Total								-				\$0.00	\$0.00		

17 18 19 20 21 Pic To LANNING C ine #	lanning lanning Sub- otal COST NARRATI	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			HE POSITIONS A								\$0.00			
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ne #	otal Cost Narrat		EXPLAINE	IN DETAIL T	HE POSITIONS A			-					\$0.00			
NING C	COST NARRAT		EXPLAINE	IN DETAIL T	HE POSITIONS A			¢					¢0.00	60.00		
ine#							RES NAR		USED TO ENSU	REITEMSLISTED	WILL BE COMPLET	ED IN THE	\$0.00	\$0.00		
ine #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION				ND DEEIVERAL	JEEO. MAR		LOOLD TO ENOU		WILL BE COMIN EE					
	CATEGORY	ORGANIZATION DETAIL DESCRIPTION														_
Or			Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	
	rganization	DESCRIPTION OF ORGANIZATION ACTIVITES MUST BE DETAILED OUT, SEE YOUR GUIDANCE FOR DESCRIPTION OF ORGANIZATION. THIS CATEGORY IS TYPICALLY FOR FUSION CENTER ACTIVITITIES - TC INCLUDE OVERTIME, VEHICLE AND EQUIPMENT RENTALS, OPACKS AND CONTRACTORS ONLY THIS IS NOT A SUPPLY CATEGORY.														
22								\$-					\$ -			
23 24								<u>s</u> -					\$ - \$ -			-
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	rganization ub-Total							¢					¢			
RGANIZATI	ION COST NAP	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLE	ASE EXPL	AINE IN DET	AIL THE POSITIO	NS AND DELIV	ERABLES.	NARRATIVE WI	LL BE USED TO B	NSURE ITEMS LI	STED WILL BE CON	IPLETED IN	Ŷ			4
one	CATEGODY		Purchase	Previous		QUANTITY	UNIT	TOTAL	Primary Core	Secondary Core	AEL Ref #	Funding	Total Dudget	Line Item	Line Item Reductions]
ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Туре	Funding Type		QUANTIT	COST	TOTAL	Capability	Capability	ALL Kei #	Source	Total Budget	Reductions	Descriptions on how it will affect your program	
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 - MUST an AEL														
		Mobile Radio, XG-100M, 136-870MHz, Unencrypted with				3.00	6,623.00	¢ 40.000.00					¢ 40.000.00			
28		accessories. Mobile Radio, XG-75M/M7300, 764-870MHz, Half Dplx with accessories.	ent Sustainm ent			16.00	3,925.35	\$ 19,869.00 \$ 62,805.60					\$ 19,869.00 \$ 62,805.60			1
2.3		Portable Radio, XG-75PE, 768-861MHz, Sys, Blk-Yel	Sustainm		<u> </u>	10.00	3,323.33	ψ 02,003.00					φ 02,003.00			1
30		with accessories	ent			15.00	3,219.02	\$ 48,285.30					\$ 48,285.30			1
			Sustainm			40.55	000.07									1
31		Uninstall of old equipment/Installation of new equipmen	t ent Sustainm			19.00	200.00	\$ 3,800.00		├────┤			\$ 3,800.00			-
32		Programming of all radios	ent			34.00	50.00	\$ 1,700.00					\$ 1,700.00			1
33			0					\$					\$ -			1
34								\$ -					\$ -			1
35 36													\$ -			4
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38								\$ -	1				\$ -			1
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	QUIPMENT															
	ub-Total	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASI			THE POSITIONS			\$ 136,459.90					\$ 136,459.90			4
	COST NARRA	THE REGORED FOR EACH LIVETTEM ABOVE - PLEASI			THE POSITIONS	AND DELIVERA	NDLES. NAI		SE OSED TO ENS	OKETTEWS EISTE	D WILL BE COMPL	TED IN 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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
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42 43											\$ - \$ -		\$ - \$ -		
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46											\$ -		\$ -		
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	Training Sub- Total										¢		s -	_	
TRAINING		VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE E		N DETAIL T	HE POSITIONS	AND DELIVERAB	IES NARR	ATIVE WILL BE	USED TO ENSUR	E ITEMS LISTED	WILL BE COMPLET	ED IN THE	φ -	-	
None															
Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$ -		
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56											\$ -		\$ -		
57											\$-		\$-		
	Exercise Sub-														
	Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I									\$ -		\$ -		
None	E COST NARRA II	VE REQUIRED FOR EACH LINE II EM ABOVE-PLEASE I	EXPLAINE		HE POSITIONS	S AND DELIVERAE	LES. NARF	KATIVE WILL BE	USED TO ENSUR	RE ITEMS LISTED	WILL BE COMPLET	ED IN THE	Total Original	Line Item	
													Budget	Reductions Total	

Q

All budgets require an email approval from the financial and/or grant manager

Nevada Homeland Security Grant Program (HSGP) **PROJECT ID: Project Proposal for FFY17 HSGP Funding Description** Date Submitted 3/28/17 **PROJECT TITLE: Emergency Event Tracking System** 1) 2) Clark County Office of Emergency Management **Proposing/Lead Agency:** 1º Project Manager Name/Title: 3) John Steinbeck, Deputy Fire Chief/Emergency Manager 1º Project Manager Contact Info: Phone: (702) 455-5710 Email: john.steinbeck@clarkcountynv.gov Arlene Chapman, Public Warning & Resources Coordinator 4) 2° Project Manager Name/Title: 2° Project Manager Contact Info: Phone: (702) 455-5710 Email: arlenec@clarkcountynv.gov 5) Finance/Grant Contact Name/Title Karen Taylor, Grants Specialist Phone: (702) 455-5710 Email: karent@clarkcountynv.gov Finance/Grant Contact Info:

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

Establish ability to track incident or event participants, patients and individuals during mass casualty, evacuations, planned or other events, that is consistent between involved agencies and jurisdictions. The system could also be used in a Mass Fatality incident to support decedent data gathering and coordination efforts. Improve the flow and accuracy of information to track incident and individuals on interactive integrated software; Data could also be collected on mobile devices, greatly increasing stakeholder participation. In this state, there is a critical gap in the tracking and flow of information during events where tracking individuals is vital. Beneficiaries of this capability include public safety agencies, emergency medical response, family reunification entities, emergency management, fire departments, the American Red Cross, airports, hospitals and the public. Outcome would benefit the entire State of Nevada. This project would greatly improve Operational Coordination by standardizing tracking information between all critical stakeholders.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Intelligence and Information Sharing [Mission Area(s): PREVENTION/PROTECTION]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

This project would greatly improve Operational Coordination by standardizing tracking information between all critical stakeholders. Response, tracking and recovery would be strengthened by creating a coordinated, centralized structure for information flow. The project also aligns with Intelligence and Information Sharing by ensuring that key stakeholders are using information that has been collected and disseminated in a standardized methodology, which reduces the occurrence of misinformation or inaccurate data counts.

Nevada Homeland	PROJECT ID:	RR
Project Proposal for	Date Submitted	3/28/17
PROJECT TITLE REFERENCE:		

10) PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Strategy Objective to be addressed

NCHS FFY17 Priority

Urban Area Strategy Priority

#4 - OPERATIONAL COORDINATION

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 project will be coordinated by Clark County Emergency Management staff and implemented by the contracted vendor. The vendor will perform installation, configuration and implementation of the software. Software vendor will hold workshops and provide training to stakeholders in multiple locations in the state, accompanied by Clark County Emergency Management project coordination staff. Stakeholders will provide a liaison to assist with their portion of the tracking process and software. Various system testing will be performed by the vendor representatives to ensure proper functioning of the software. The system will then be tested in an appropriate drill or exercise.

FIELD IS LIMITED TO VISIBLE TEXT BOX

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	Clark County Office of Emergency Management	Clark County, NV	John Steinbeck
12(b)			
12(c)			

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

Proposal includes vendor software support for the duration of the grant. It is anticipated that ongoing software support after the grant period would require obtaining continued funding.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) <u>excluding</u> the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI % State-wide % TOTAL %

0	100	100
Enter your %	Enter your %	
from 0 to 100	from 0 to 100	
for UASI	for Statewide	

Nevada Homeland Security Grant Program (HSGP) Project Proposal for FFY17 HSGP Funding Description

PROJECT ID: RR

3/28/17

Date Submitted

PROJECT TITLE REFERENCE:

Emergency Event Tracking System

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
			\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
			Subrotar
			\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
The software procurement objective of this project will include acquisition of the software and all professional support for its configuration, implementation, testing and professional services to ensure a successful project roll-out.			
		\$ 195,000.00	\$ 195,000.00
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
			\$ 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	\$ 0.00	\$ 195,000.00	\$ 195,000.00

Nevada Homeland Security Grant Program (HSGP) PROJECT ID: Project Proposal for FFY17 HSGP Funding Description Date Submitted

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3/28/17

PROJECT TITLE REFERENCE:

Emergency Event Tracking 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	Funding approval	09/02/17	11/30/17	2
3	Vendor RFP process	12/01/17	06/30/18	6
4	Software process design, scope of work details	07/01/18	10/30/18	3
5	Software configuration and implementation	09/30/18	02/28/19	5
6	Stakeholder workshops and training sessions	03/01/19	06/30/20	3
7				
8				
9				
10				
11				
12				

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

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

stakeholders and providing accurate, centralized situational awareness.

During a terrorist or other emergency event, accurate information flow and Individual tracking is critical to the response and recovery of all of our communities in the state.

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

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES () NO () Explain below. This project would greatly improve Operational Coordination by standardizing tracking information between all critical

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

The software inherently supports an unlimited number of users within the State, and enables emergency preparedness stakeholders to respond to incidents or events of any size.

	Nevada Homeland	l Security Grant Program (HSGP)	PROJECT ID:	RR
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	3/28/17
PROJ	ECT TITLE REFERENCE:	Emergency Event Tracking System		
	d. Can this project continue w	ithout funding? YES 🔵 NO 💽 Explain below.		
are limitied to visible text box size		ere will be ongoing annual software maintenance costs. measurable "state-wide" benefit? YES (•) NO () Explain bel	ow.	
Fields "d" and "e" are lii	Beneficiaries of this capability in emergency management, fire de	o in the tracking and flow of information during events where clude public safety agencies, emergency medical response, apartments, the American Red Cross, airports, hospitals and project would greatly improve Operational Coordination by	family reunification e	entities, would benefit

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

NO - Agency has not participated in the 2016 Threats and Hazards 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

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? Original Amended



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

				LI	NE ITEM D	ETAIL BUDG	ЪЕТ								
	Agency Name	Clark County Office of Emergency Management	Name & Contact #	John Steinbe 5710		Grant Manager Name & Contact #	Karen Taylor	702-455-5710							
	IJ TITLE:	Emergency Event Tracking System													
		One Budget Per Funding Stream	r –												
		SHSP													
				Burton											Line Item Reductions
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it affect your program
	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							\$-					\$-		
FROM	Sub-Total	TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$-					\$-	\$ -	
arrative I		THE REQUIRED FOR EACH LINE HEM ABOVE - PLEAS	SE EXPLAI	NE IN DETAI	L THE POSITIO	INS AND DELIVER	ABLES. NAR	RATIVE WILL BE	USED TO ENSU	RETTEMS LISTE	D WILL BE COMPLE	TED IN THE			
				Burton											Line Item Reduction
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Descriptions on how it affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
5	Benefits							\$-					\$0.00		
6								\$-					\$0.00		
8								\$							
							-	\$ - \$ -					\$0.00 \$0.00 \$0.00		
	Fringe Sub-						-	Ψ					\$0.00 \$0.00	\$0.00	
RINGE C	Total	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	(PLAINE IN	DETAIL THI	E POSITIONS A	ND DELIVERABLE	- ES. NARRATI	\$ - \$ -	D TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED	N THE	\$0.00	\$0.00	
arrative I	Total COST NARRATIVE	REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	(PLAINE IN	DETAIL THI	E POSITIONS A		- ES. NARRATI	\$ - \$ -	D TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED	N THE	\$0.00 \$0.00	\$0.00	
arrative I	Total COST NARRATIVE	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	E POSITIONS A Category of Each Travel	ND DELIVERABLE Travel Reference # from Addendum	ES. NARRATI	\$ - \$ -	D TO ENSURE I	TEMS LISTED WI	LL BE COMPLETED Secondary Core Capability	N THE Funding Source	\$0.00 \$0.00	\$0.00 Line Item Reductions	Line Item Reduction: Descriptions on how it affect your program
	Total COST NARRATIVE	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)	Purchase	Previous Funding	Category of	Travel Reference # from		\$ - \$ - VE WILL BE USE		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it
arrative I	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select	Previous Funding	Category of	Travel Reference # from		\$ - \$ - VE WILL BE USE		Primary Core Capability Operational Coord	Secondary Core Capability	Funding	\$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it
ne # 9	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost - 1,448.00	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 Total Budget \$1,448.00	Line Item	Descriptions on how it
9 10 11	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type New	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost - 1,448.00 1,098.00	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 Total Budget \$1,448.00 \$1,098.00 \$0.00	Line Item	Descriptions on how it
9 10 12	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type New	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost 	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 Total Budget \$1,448.00 \$1,098.00 \$0.00 \$0.00	Line Item	Descriptions on how it
9 10 11	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type New	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost 	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$1,448.00 \$1,098.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it
9 9 10 11 12 13 14 15	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type New	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost 	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$1,448.00 \$1,098.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it
9 10 11 12 13 14	Total COST NARRATIVE HERE 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 NON-COMPLIANCE) Accompany software vendor at trainings, Las Vegas to Reno, five days.	Purchase Type Select Type New	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum		S - S - VE WILL BE USE Cost for each Trip	Total Cost 	Primary Core Capability Operational Coord Operational	Secondary Core Capability	Funding Source	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$1,448.00 \$1,098.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it

Travel for two Clark County personnel to accompany vendor to stakeholder workshops and trainings to ensure project scope of work compliance and stakeholder coordination. Dates may change based on project implementation and stakeholder needs. It is anticipated that travel would include flying into and out of Reno for Northern Nevada trainings and driving to a to be determined location for training offered to other counties.

Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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												
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total						\$-					\$0.00	\$0.00	

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

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Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$-					\$-		
23							\$-					ş -		
24							\$-					\$-		
25							\$-					\$-		
26							\$-					\$-		
27							\$-					\$-		
	Organization Sub-Total	RATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL					\$-					\$-		

Narrative HERE

ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 an AEL												
		Tracking software with configuration, project						Operational	Intelligence & Information					
28		management and maintenance support	New	Other	1.00	192,454.00	\$ 192,454.00			04AP-02-OAPT	SHSP	\$ 192,454.00		
29							\$ -					\$-		
30							\$-					\$-		
31							\$-					\$-		
32							\$-					\$-		
33							\$-					\$-		
34							\$-					\$-		
35							\$-					\$-		
36							\$-					\$-		
37							\$-					\$-		
38							\$-					\$-		
39							\$ -					\$-		
	EQUIPMENT													
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS					\$ 192,454.00					\$ 192,454.00	-	

The software procurement objective of this project will include acquisition of software and all professional support to configure software and to implement project.

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	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-							
40										\$-		\$-		
41										\$ -		\$-		
42										\$-		\$-		
43										\$-		\$-		
44										\$-		\$-		
45										\$-		\$-		
46										\$-		\$-		
47										\$-		\$-		
48										\$ -		\$-		
49										\$ -		\$ -		
	Training Sub- Total	/E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE								\$ -		\$ -	-	

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		ş -		
51											\$		\$		
52											\$		\$		
53											\$		\$-		
54											\$		\$		
55											\$		\$-		
56											\$-		\$		
57											\$-		\$ -		
	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

Narrative	HERE							Total Original Budget	Line Item Reductions Total	
								\$ 195,000.00	\$-	
All bude	gets require an	email approval from the financial and/or grant i	manager							

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

				LI		Y 2017 DETAIL BUD(GET								
	Agency Name		Name & Contact #		eck 702-455-	Grant Manager Name & Contact #		r 702-455-5710							
	IJ TITLE:														
		One Budget Per Funding Stream													
		UASI													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	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			<u> </u>					\$ -					\$ -		
4	Personnel							\$-					\$-		
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS						\$-					\$-	\$-	
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
5 6								\$- \$-					\$0.00 \$0.00		
7								\$-					\$0.00		
8	Fringe Sub-						-	\$-					\$0.00		
	Total							\$-					\$0.00	\$0.00	
arrative		E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX			E POSITIONS A		ES. NARRATI	IVE WILL BE USE	D TO ENSURE I	TEMS LISTED WI					
ne #	CATEGORY	PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	Purchase Type	Previous Funding Type	Category of Each Travel	Travel Reference # from Addendum	Total Trips	Cost for each Trip	Total Cost	Primary Core Capability	Secondary Core Capability	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it w affect your program
0	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							<u> </u>						\$0.00 \$0.00		
11									-				\$0.00		
						1	1	1	-	1		1	\$0.00	1	
12									-				\$0.00		
12 13 14									-				\$0.00 \$0.00		
12 13 14 15									-						
12 13 14	Travel Sub- Total												\$0.00 \$0.00	\$0.00	

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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
		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												
17							-					\$0.00		
18							-					\$0.00		
19							-					\$0.00		
20							-					\$0.00		
21							-					\$0.00		
	Planning Sub- Total				2		\$-	2				\$0.00	\$0.00	

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL		Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.													
22								\$-					\$-		
23								\$-					\$-		
24								\$-					\$-		
25								\$-					\$-		
26								\$-					\$-		
27								\$-					\$-		
	Organization														
	Sub-Total							\$-					\$-	-	
ORGANIZ	ATION COST NA	RRATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PL	EASE EXPL	AINE IN DET	AIL THE POSI	TIONS AND DELIV	VERABLES. N.	ARRATIVE WILL	BE USED TO EN	ISURE ITEMS LIS	TED WILL BE COMP	LETED IN			

Narrative HERE

Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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 an AEL												
28		Tracking software with configuration, project management and maintenance support	New	Other	1.00	195,000.00	\$ 195,000.00	Operational	Intelligence & Information Sharing	04AP-02-OAPT	UASI	\$ 195,000.00		
29							\$-					\$-		
30							\$-					\$-		
31							\$ -					\$-		
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39							φ - \$ -		<u> </u>			- د د		
	EQUIPMENT Sub-Total						\$ 195,000.00					\$ 195,000.00	-	

The software procurement objective of this project will include acquisition of software and all professional support to configure software and to implement project.

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	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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					-	-							
40											\$-		\$-		
41											\$-		\$-		
42											\$-		\$-		
43											\$-		\$-		
44											\$-		\$-		
45											\$-		\$-		
46											\$-		\$-		
47											\$-		\$-		
48											\$-		\$-		
49											\$-		\$-		
	Training Sub- Total	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE									\$-		s -	-	

Narrative HERE

Line #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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)												-	
50											\$-		\$-		
51											\$-		\$-		
52											\$-		\$-		
53											\$-		\$-		
54											\$-		\$-		
55											\$-		\$-		
56											\$-		\$-		
57											\$ -		\$-		
	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

Narrative HERE						Total Original Budget	Line Item Reductions Total	
All budgets require an email approval from the financial and/or grant						\$ 195,000.00	\$-	



Federal Fiscal Year 2017 - Homeland Security Grant Travel Addendum

		*	**Required Fields										*:	*Required 1	Fields						R
			Purpose (Please note if						No.					Motor Pool			Public			Baggage	
Traveler's Name	Title	Source	travel is for training)	City	City	Date			Nights		Hot		Per Diem	Car	Mileage	Reg Fees	Trans	Parking	Car	Fees	Tota
Steinbeck or designee	Emergency Mgr	SHSP	Training	LAS VEGAS		May-18	May-18	5	4	\$ 300.00			\$ 288.00						\$350.00		\$ 1,44
Starr or designee	Sr Programmer	SHSP	Training	LAS VEGAS	RENO	May-18	May-18	5	4	\$ 300.00	\$ 5	10.00	\$ 288.00						└──	\square	\$ 1,0
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	Nevada Homeland	Security Grant Pr	ogram (HSGP)	PROJECT ID	: SS							
	Project Proposal for	FFY17 HSGP Fund	ing Description	Date Submittee	d 3/28/17							
1)	PROJECT TITLE:	Regional Aviation Enforce	ement (RAVEN)									
2)	Proposing/Lead Agency:	Washoe County Sheriff's	Office									
3)	1º Project Manager Name/Title:	Deputy Ben Coffindaffer,	Chief Tactical Flight Officer									
	1º Project Manager Contact Info:	Phone: (775) 677-6887	none: (775) 677-6887 Email: jcoffindaffer@washoecounty.us									
4)	2 [°] Project Manager Name/Title:											
	2° Project Manager Contact Info:	Phone:	Email:									
5)	Finance/Grant Contact Name/Title: Laura Daniels											
	Finance/Grant Contact Info:	Phone: (775) 328-3013 Email: Idaniels@washoecounty.us										
6)	CLASSIFICATION - Check the p	primary intention of the Pi	oposed Project:		Choose one:							

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	\odot
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

WCSO RAVEN (Regional Aviation Enforcement) unit assists 34 different agencies in the Northern Nevada area, covering approx. 49,500 square miles and 1.3 million people. RAVEN is the only law enforcement air unit in northern Nevada. We are called upon frequently to assist multiple investigative units in long range, covert surveillance of narcotic and criminal activity. RAVEN also conducts daily Department of Homeland Security checks of critical infrastructure throughout the region. In the last 5 years RAVEN has conducted over 4000 DHS checks. Our current FLIR system is 20 years old and failing. A new FLIR system will greatly enhance our ability to track fleeing vehicles and suspects, conduct covert surveillance and search and rescue missions. Having an updated FLIR system enhances our ability to locate missing children, back country skiers and lost subjects as well. The FLIR System will be used to assist multiple agency patrol units on calls for service, vehicle pursuits, foot pursuits and narcotic investigations.

8) PROPOSED CORE CAPABILITY - *Identify by name the proposed Primary Core Capability to be addressed.* Reference the Federal Emergency Management Agency (FEMA) list of Core Capabilities and the Crosswalk of Target Capabilities to Core Capabilities here: <u>https://fema.gov/core-capabilities</u> <u>https://www.fema.gov/pdf/prepared/crosswalk.pdf</u>

Primary Core Capability:	Interdiction and Disruption [Mission Area(s): PREVENTION/PROTECTION]
Secondary Core Capability:	On-Scene Security, Protection, and Law Enforcement [Mission Area: RESPONSE]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

RAVEN is used by many agencies in the Northern Nevada Region for surveillance and tracking known and suspected offenders. This project will better aide our abilities in tracking and identifying those offenders by replacing our current outdated and failing system. By tracking and disrupting the flow of drugs and illegal activity we have a greater impact on the financing of gangs and terrorist organizations. The new system will better enhance our ability to view and locate areas around or adjacent to critical infrastructure which could prevent tampering or sabotage.

Once units have or are preparing to take action, our mission moves from surveillance to security of ground units. Currently our system incapable of staying on target, resulting in an increased workload for the aircrew. This project will provide a better system which improves the security and protection for Law Enforcement on the ground and to the surrounding public. Our overall mission is to provide the best and most accurate data to investigators who are enforcing the laws and then providing a safer environment when they take action against the suspects.

	Nevada Homelan	d Secu	rity Grant Program (HSGP)	PROJECT ID:	SS
	Project Proposal fo	or FFY1	7 HSGP Funding Description	Date Submitted	3/28/17
PRO	JECT TITLE REFERENCE:	Regior	al Aviation Enforcement (RAVEN)		
LO)	PRIORITIES - Identify applicat Objective to be addressed	ble Neva	da Commission on Homeland Security (NCHS)	Priority and Urban Area	Strategy
	NCHS FFY17 Priority	-	#2 - INTELLIGENCE AND INFORMATION SH	ARING	
	Urban Area Strategy Priority	-	#4 - OPERATIONAL COORDINATION		
30X	administered by the project mai	inager in nment pla	essary quotes (actual dollar amount) from the a conjunction with the agency administration to d ans for the equipment, maintenance and invent or quotes.	etermine the implementat	ion of the
FIELD IS LIMITED TO VISIBLE TEXT BOX	administered by the project man system. This will include sustain	inager in nment pla	conjunction with the agency administration to d ans for the equipment, maintenance and invent	etermine the implementat	ion of the

12) SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards.

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	none	none	none
12(b)			
12(c)			

13) 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.

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI% = 40, State-wide% = 60

LV-UASI %	State-wide %	TOTAL %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homeland Security Grant Program (HSGP) PROJECT ID: SS Project Proposal for FFY17 HSGP Funding Description Date Submitted 3/28/17 PROJECT TITLE REFERENCE: Regional Aviation Enforcement (RAVEN) 3/28/17 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 efforts include preparing the aircraft for installing the new equipment and working with the aircraft mechanic and vendor on establishing a maintenance program. Part of the plan will include a formalized procedure to move the new Image: Comparison of the plan will include a formalized procedure to move the new Image: Comparison of the plan will include a formalized procedure to move the new

15a) Planning [Development of policies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTotal
Planning efforts include preparing the aircraft for installing the new equipment and working with the aircraft mechanic and vendor on establishing a maintenance program. Part of the plan will include a formalized procedure to move the new equipment between the two active patrol helicopters.	\$ 0.00	\$ 0.00	\$ 0.00
15b) Organization [Establishment of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubTotal
The Regional Aviation Enforcement unit was established in 1996. RAVEN is a highly respected unit throughout the United States and is often used as a model for new air unit programs. The Washoe County Sheriff's Office is responsible for the daily operations, costs and management of the program. Reno Police Department provides the hangar in which the aircrafts are housed. The Sergeant assigned to Search and Rescue acts as the supervisor/commander providing leadership and program direction.	\$ 0.00	\$ 0.00	\$ 0.00
15c) Equipment [Procurement and installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTotal
The following equipment requested as replacement due to expiration, physical condition or outdated: FLIR StarSAFire 230HD (referbished).	\$ 0.00	\$ 242,210.00	\$ 242,210.00
15d) Training [Development and delivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTotal
Provided training to the RAVEN crew members is available through the vendor and all recertification is free to our agency.			
	\$ 0.00	\$ 0.00	\$ 0.00
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities]	\$ 0.00 LV-UASI	\$ 0.00 State-wide	\$ 0.00 SubTotal
15e) Exercise [Development and execution of exercises to evaluate and improve capabilities] Exercise development is an ongoing process conducted by the WCSO RAVEN unit based upon industry standards and real life scenarios. The unit trains once a month to enhance and maintain the proficiency of all crew members. Training exercises are based on challenging scenarios that are designed to enhance the operator's capabilities using the equipment. Training scenarios are video recorded for review after the exercise which provides a precise evaluation and record. At the conclusion of a training scenario the crew member is evaluated on their performance and recommendations are made on how to better utilize the equipment.	LV-UASI		
Exercise development is an ongoing process conducted by the WCSO RAVEN unit based upon industry standards and real life scenarios. The unit trains once a month to enhance and maintain the proficiency of all crew members. Training exercises are based on challenging scenarios that are designed to enhance the operator's capabilities using the equipment. Training scenarios are video recorded for review after the exercise which provides a precise evaluation and record. At the conclusion of a training scenario the crew member is evaluated on their performance and	LV-UASI	State-wide	SubTotal
Exercise development is an ongoing process conducted by the WCSO RAVEN unit based upon industry standards and real life scenarios. The unit trains once a month to enhance and maintain the proficiency of all crew members. Training exercises are based on challenging scenarios that are designed to enhance the operator's capabilities using the equipment. Training scenarios are video recorded for review after the exercise which provides a precise evaluation and record. At the conclusion of a training scenario the crew member is evaluated on their performance and recommendations are made on how to better utilize the equipment.	LV-UASI \$ 0.00 LV-UASI	State-wide \$ 0.00	SubTotal \$ 0.00
Exercise development is an ongoing process conducted by the WCSO RAVEN unit based upon industry standards and real life scenarios. The unit trains once a month to enhance and maintain the proficiency of all crew members. Training exercises are based on challenging scenarios that are designed to enhance the operator's capabilities using the equipment. Training scenarios are video recorded for review after the exercise which provides a precise evaluation and record. At the conclusion of a training scenario the crew member is evaluated on their performance and recommendations are made on how to better utilize the equipment. 15f) Personnel [<i>Staff (not contractors) directly implementing project and programmatic capability</i>] The RAVEN unit staffs 1 full-time Chief Pilot, 1 full-time Chief TFO, 1 full-time Aircraft Mechanic, 1 part-time pilot and 3 part-time TFO's. Managed by the Commander	\$ 0.00	State-wide \$ 0.00 State-wide	SubTotal \$ 0.00 SubTotal

Nevada Homeland Security Grant Program (HSGP)	PROJECT ID:	SS
Project Proposal for FFY17 HSGP Funding Description	Date Submitted	3/28/17

PROJECT TITLE REFERENCE:

Regional Aviation Enforcement (RAVEN)

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

	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	10/01/17	11/01/17	1
3	Purchase equipment	10/01/17	11/01/17	1
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.

This project is critical in the investigation of terrorist activities, whether it be through drug sales, suspicious activities or actions. Every day the system would be used to view and examine strategic and critical infrastructure sites for any signs of tampering or sabotage.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

This project is dedicated to the region enforcement and investigation of crimes associated with acts of terror. RAVEN collaborates with various agencies throughout the Northern Nevada and California region to prevent, detect and deter acts of terrorism. We accomplish this by intelligence and information gathering and sharing with those agencies in our area. RAVEN works with local, state and federal agencies to coordinate and communicate during those operations.

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

The price quoted is the best price available for the FLIR system.

Constraint Date Submittee onal Aviation Enforcement (RAVEN) Image: Pres • NO • Explain below. funding? YES • NO • Explain below. talled, there will be no immediate need for future funding.	I 3/28/17
funding? YES 💽 NO 🔵 Explain below.	
talled, there will be no immediate need for future funding.	
rable "state-wide" benefit? YES NO Explain below. throughout Nevada and would use the system to better enhance our ab	lity to provide

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

YES - Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey

) NO - Agency has not participated in the 2016 Threats and Hazards 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

The Washoe County Sheriff's Office RAVEN program is currently using an outdated, failing FLIR system. This system is used on a daily basis to detect, prevent and investigate crime. In conjunction, we use the system for search and rescue missions locating missing and stranded persons. The acquisition of a new system would greatly enhance our abilities to aide all agencies in the Northern Nevada area and protect the citizens of our communities.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project



HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

			manager		NE ITEM D	ETAIL BUD	JET						-	-	
	Agency Name		Name & Contact #	Deputy Ben 775-677-68	Coffindaffer /	Grant Manager Name & Contact #		ls 775-328-3013							
	IJ TITLE:	Regional Aviation Enforcement (RAVEN)												
		One Budget Per Funding Stream	,												
		SHSP													
ine #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculation (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount of Time 12 mo, New, Existing & Description of Position. Al personnel must be put under this category, please note each line with planning, organization, training or exercise.													
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2					<u> </u>			\$ - \$ -					\$ - \$ -		
3								s -					s -	<u> </u>	
	Personnel													¢	
	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS			THE POSITIO		ABLES NAR	\$ - RATIVE WILL BE	USED TO ENSU	RE ITEMS LISTE			\$-	\$-	
				Previous											Line Item Reductions
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Funding	Salary Hourly	% of Effort	Calculation	Personnel Cost	Primary Core	Secondary Core	AEL Ref #	Funding	Total Budget	Line Item Reductions	Descriptions on how it will
	Fringo	Positiona Requires Frings to be concrete from	туре	Туре			(hours)	Amount	Capability	Capability		Source		Reductions	affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above	Type	Туре			(hours)	Amount	Capability	Capability		Source		Reductions	affect your program
5			туре	Туре			(hours)	\$-	Capability	Capability		Source	\$0.00	Reductions	affect your program
5			Туре	Туре			(hours)		Capability	Capability		Source	\$0.00 \$0.00		affect your program
5 6 7 8	Benefits	Personnel Costs above		Type			(hours)	\$- \$- \$-	Capability			Source	\$0.00		affect your program
5 6 7 8	Benefits Fringe Sub- Total	Personnel Costs above						\$ - \$ - \$ -					\$0.00 \$0.00		affect your program
5 6 7 8 RINGE C	Benefits Fringe Sub Total OST NARRATIVE	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN Purchase	DETAIL THE Previous	POSITIONS A	ND DELIVERABLI		\$ - \$ - \$ - \$ - \$ - VE WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00	Line Item Reductions
5 6 7 8 RINGE C	Benefits Fringe Sub- Total	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	PLAINE IN	DETAIL THE	POSITIONS A	ND DELIVERABLI		\$ - \$ - \$ - \$ - \$ - \$ - VE WILL BE USE		EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00	\$0.00	
5 6 7 8 RINGE C	Benefits Fringe Sub Total OST NARRATIVE	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX	PLAINE IN Purchase	DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABL Travel Reference # from		\$ - \$ - \$ - \$ - \$ - VE WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget	\$0.00	Line Item Reductions Descriptions on how it will
5 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	PLAINE IN Purchase Type Select	DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABL Travel Reference # from		\$ - \$ - \$ - \$ - \$ - VE WILL BE USE	D TO ENSURE IT Total Cost	EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget Total Budget \$0.00 \$0.00	\$0.00	Line Item Reductions Descriptions on how it will
5 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	PLAINE IN Purchase Type Select	DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABL Travel Reference # from		\$ - \$ - \$ - \$ - \$ - VE WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00	\$0.00	Line Item Reductions Descriptions on how it will
5 6 7 8 INGE C 9 10 11 11 12 13	Fringe Sub- Total OST NARRATIVE CATEGORY Travel Planning Training Exercise Equipment	Personnel Costs above REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE EX 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	PLAINE IN Purchase Type Select	DETAIL THE Previous Funding	POSITIONS A	ND DELIVERABL Travel Reference # from		\$ - \$ - \$ - \$ - \$ - VE WILL BE USE	D TO ENSURE IT	EMS LISTED WIL	L BE COMPLETED I	N THE GRAN	\$0.00 \$0.00 \$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00	Line Item Reductions Descriptions on how it will
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Line #	CATEGORY	PLANNING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type		QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	SS
	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	1													
17								-					\$0.00			ł
18								-					\$0.00			ł
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21								-					\$0.00			i
	Planning Sub- Total							\$ -					\$0.00	\$0.00		l
PLANNIN	G COST NARRAT	IVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE	EXPLAINE	IN DETAIL T	HE POSITIONS	AND DELIVERA	BLES. NARRA	ATIVE WILL BE U	JSED TO ENSURI	E ITEMS LISTED V	VILL BE COMPLET	ED IN THE				
Narrative	HERE															

Narrative HERE

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	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.												
22							\$ -					\$-		
23							\$-					\$-		
24							\$ -					\$-		
25							\$ -					\$-		
26							\$ -					\$-		
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	Organization Sub-Total						s -					s -	-	

Narrative HERE

.ine #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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 an AEL	J											
28	Equipment	FLIR StarSAFire 230HD	New	Local	1.00	242,210.00	\$ 242,210.00		On-Scene Security and Protection	030E-02-TILA		\$ 242,210.00		This is the lowest price available this equipment. Normal price is \$495,000.00, but FLIR Internation can provide the equipment at a reduced price.
29							\$ -					\$ -		
30							\$ -					\$-		
31							\$ -					\$ -		
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39							\$ -	1				\$ -		
	EQUIPMENT Sub-Total						\$ 242,210.00					\$ 242,210.00	-	
		TIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLEAS												

Line #	CATEGORY	TRAINING DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	with the State	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	SS
		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					_	-								
40											\$-		\$ -			
41											\$ -		\$ -			
42											\$ -		\$ -			
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	Training Sub- Total										\$ -		\$-	-		
TRAINING	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE I	EXPLAINE	N DETAIL TI	HE POSITIONS	AND DELIVERAB	LES. NARRA	TIVE WILL BE U	SED TO ENSURE	ITEMS LISTED V	VILL BE COMPLETE	D IN THE				

Narrative HERE

ne #	CATEGORY	EXERCISE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Coordinated with the State Exercise Officer?	Is This Request on the TEPW?	QUANTITY	UNIT COST	Primary Core Capability	Secondary Core Capability	TOTAL	AEL Ref #	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it wil affect your program
	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)												-	
50											\$-		\$-		
51											\$-		\$ -		
52											\$ -		\$-		
53											\$ -		\$-		
54											\$ -		\$ -		
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57											\$ -		\$ -		
	Exercise Sub- Total										\$ -		\$-	-	
(ED OIOE	COST NARRATI	VE REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE			UE POSITIONS	AND DELIVED AR	IES NARRA	TIVE WILL BE L	SED TO ENSURE	ITEMS LISTED V	/ILL BE COMPLETE				

Narra	tive HERE								Total Original Budget	Line Item Reductions Total	
									\$ 242,210.00	\$ -	
All b	udgets	require an e	email approval from the financial and/or grant i	nanager							

	Nevada Homeland	l Secı	urity Grant Pr	ogram (HSGP)	PROJECT ID:	TT
	Project Proposal for	FFY1	L7 HSGP Fund	ling Description	Date Submitted	4/7/17
L)	PROJECT TITLE:	Public	Servants of Nevad	la Protection Project		
2)	Proposing/Lead Agency:	Nevad	a DPS - Parole and	d Probation		
3)	1° Project Manager Name/Title:	Eddie	Bowers			
	1º Project Manager Contact Info:	Phone:	(775) 684-2650	Email: ebowers@dps.state.nv.us	3	

4)	2 [°] Project Manager Name/Title:	Gary C	ampbell	
	2 ^o Project Manager Contact Info:	Phone:	(775) 684-2608	Email: gcampbell@dps.state.nv.us
5)	Finance/Grant Contact Name/Title:	Robin H	Hager	
	Finance/Grant Contact Info:	Phone:	(775) 684-2609	Email: rhager@dps.state.nv.us

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

Choose one:

NEW	New; no grant-funded projects have recently (within 5 years) addressed this capability	$\overline{\mathbf{O}}$
ENHANCE	Will primarily expand or enhance the capability(s) of prior grant-funded projects	0
SUSTAIN	Will primarily sustain capability or continue establishment effort in existing program	0

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) FFY17 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 LIMIITED TO VISIBLE TEXT BOX.*

The Division of Parole and Probation (NPP) has had direct experience with individuals involved in criminal terrorism activities and organizations. NPP must monitor and supervise individuals who have committed serious criminal offenses whether in the state or outside of the state and were transferred to Nevada for supervision.

These include members of radical political groups, separatist groups who refute government and government authority, religion-centered groups who oppose the U.S. government and the state, social extremist groups who oppose law enforcement, and domestic extremist groups who not only oppose government, but also established religious and social groups that exist in society. NPP has not only supervised these individuals, but has been the subject of their threats.

Although NPP recognizes there is a serious need to install security equipment to safeguard against potential terrorists attacks, NPP lacks the funding needed to acquire the equipment. It is NPP's goal to establish safeguards to reduce potential threats against NPP properties, staff and visitors. This includes installation of safety and security equipment that may prevent potential attacks against personnel and offenders reporting to the office. NPP intends to improve security measures by installing equipment in high traffic offices as well as offices completely lacking security equipment. The expansion of these safety measures may reduce the likelihood of attacks against staff and the public at NPP locations. Additionally, the equipment being requested through this grant may provide evidence for potential prosecution of these dangerous individuals.

8) PROPOSED CORE CAPABILITY - Identify by name the proposed Primary Core Capability to be addressed. 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

Primary Core Capability:	Operational Coordination [Mission Area: ALL]
Secondary Core Capability:	Operational Communications [Mission Area: RESPONSE]
DEM Recommended Core Capability:	THIS WILL BE FILLED IN BY DEM PERSONNEL UPON REVIEW OF YOUR PROJECT SUBMISSION

9) CORE CAPABILITY JUSTIFICATION - Describe how this project aligns with the core capabilities chosen. Describe the

justification by which this project is asking for funding based on the primary and secondary core capabilities chosen. FIELD IS LIMITED TO VISIBLE TEXT BOX.

The goal of the project is to establish safeguards, policies and procedures to reduce potential threats against community members, personnel and offenders under the supervision of NPP. This includes establishing safety enhancements that would improve existing security resources and institute new security resources where none currently exists. This goal directly correlates with FEMA core capability - Operational Coordination, which has the core mission of establishing and maintaining a unified and coordinated operational structure, which NPP falls under as the agency who receives, investigates and shares information of known offenders and their activities with other law enforcement and threat analysis agencies.

Additionally, NPP's goal also correlates with FEMA core capability - Operational Communications, which has the core mission of timely communications of security, situational awareness and operations. The measures planned by NPP are to enhance the protection of the public and staff. The measures will also help in identifying potential individuals who may seek to harm the public and personnel, which will be shared with other law enforcement agencies and threat analysis centers throughout the state.

	Nevada Homeland	l Sec	urity Grant Program (HSGP)	PROJECT ID:	ТТ					
			17 HSGP Funding Description	Date Submitted	4/7/17					
PRO	JECT TITLE REFERENCE:	Publi	c Servants of Nevada Protection Project							
10)	PRIORITIES - Identify applicable Nevada Commission on Homeland Security (NCHS) Priority and Urban Area Stra Objective to be addressed									
	NCHS FFY17 Priority		#4 - OPERATIONAL COORDINATION							
	Urban Area Strategy Priority		#5 - OPERATIONAL COMMUNICATIONS							
хо	The security enhancements requested by NPP will increase the agency's ability to gather evidence and information of potential activities planned or committed by terrorist and separatist groups. This may include vehicles driven by offenders, associates or family members that may report to the office, and others who may later prove to be suspects or key witnesses to terrorist activities.									
is limited to visible text box	NPP is in a unique position to gather information regarding offender activities and those that may possibly be involved with terrorist groups. NPP has an officer assigned to work directly with the Nevada Threat Analysis Center (NTAC), who has recognized the importance of working directly with NPP to gather intelligence information on offenders involved in terrorist activities. NPP's continuous interaction and collection of intelligence on dangerous individuals would enable NPP to coordinate with other protective agencies and promptly take action based on reliable information.									
D IS LIMITED 1	NPP would contract with RFI Communications and Security Systems to complete the security enhancement needed at each NPP's location. RFI Communications has state of the art equipment that would drastically improve current equipment used in some of the NPP offices and implement new security measures in other offices currently lacking in this area.									

Once the equipment is installed, NPP personnel will be able to monitor, review and track intelligence information on offenders who report to the office. Additionally, it will allow for evidence collection for investigations and potential prosecution.

SUB-GRANT AWARD RECIPIENTS - Identify the participating agency(s) and jurisdiction(s) proposed for awards. 12)

Т	WHO m Agency (FD, PD, etc.)	Political Jurisdiction (i.e.) City, County, State, etc.	Project Representative (individual)
12(a)	N/A	N/A	N/A
12(b)	N/A	N/A	N/A
12(c)	N/A	N/A	N/A

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

NPP, like many other State of Nevada agencies, is currently dealing with financial constraints which prevent the agency from funding this type of project. NPP has submitted for security enhancement equipment for several years, but has been unable to secure the funds needed to carry out the project.

The goal is to secure funding through Homeland Security grant to obtain and install the necessary equipment, which would drastically improve security and protection of staff and the public and increase evidence collection opportunities. This is considered a one time investment for the facilities included in this grant. Should the funds be approved, NPP would be responsible for the maintenance of the equipment.

VISIBLE TEXT BOX FIELD IS LIMITED TO

14) UASI-STATE BENEFIT - Identify the percentage of benefit accruing to the LV Urban Area versus State-Wide (non-UASI)

Estimate the benefit of the Proposed Project, in percentage, that will accrue to the Las Vegas Urban Area (LV-UASI) versus that which will accrue to the balance of Nevada (State-wide) excluding the Las Vegas Urban Area. TOTAL % SHOULD EQUAL 100; YOU MUST INDICATE A PERCENTAGE IN BOTH THE LV-UASI AND STATE-WIDE BOXES. Example: LV-UASI% = 0, State-wide% = 100; LV-UASI%= 40, State-wide% = 60

TOTAL % LV-UASI % State-wide %

0	100	100	
Enter your %	Enter your %		2
from 0 to 100	from 0 to 100		
for UASI	for Statewide		

Nevada Homelan	d Security Grant Program (HSGP)	PRC	JECT ID:	
Project Proposal fo	r FFY17 HSGP Funding Description	Date	Submitted	4/7/*
IECT TITLE REFERENCE:	Public Servants of Nevada Protection Project			
BUDGET - Describe objectives,	acquisitions, and quantities within each category. Be spec	ific. Identify	UASI and State	cost.
•	licies, plans, procedures, mutual aid agreements, strategies]	LV-UASI	State-wide	SubTo
equipment in each office. The ensure funding is available and schedule equipment installation Communications will coordinate line and schedule for each offic In addition to coordinating with	ernally to schedule the installation of the security program coordinator will work with NPP fiscal to that a work program is approved in order to and schedule installation of the hardware. A time e will be drafted in order to assist with coordination. RFI NPP will need to coordinate with the Enterprise n (EITS) to determine connection of the security etwork.			\$ 0.0
	t of organization, structure, leadership, and operation]	LV-UASI	State-wide	SubT
program to schedule equipment to contact EITS to ensure that installed. Area representatives will provid	ork with each area representative assigned to the t installation. This will require the area coordinators network access is established once the equipment is le the program coordinator information of the rder completion sent to the program coordinator for			\$ 0.0
15c) Equipment [Procurement and	d installation of equipment, systems, facilities]	LV-UASI	State-wide	SubTo
Security cameras for offices cu facilities, access control panels building and allow staff to deac	ffices that currently do not have security protection. rrently without a system to monitor and protect the for all external doors to monitor who enters the tivate access cards should they be lost or stolen for a systems that will notify staff if there is a critical		\$ 123,775.00	\$ 123,7
15d) Training [Development and c	elivery of training to perform assigned missions and tasks]	LV-UASI	State-wide	SubTo
Training for use of the equipme no cost associated with the trai	nt will be provided by RFI Communications. There is ning.			\$ 0.0
15e) Exercise [Development and e	xecution of exercises to evaluate and improve capabilities]	LV-UASI	State-wide	SubT
ensure that there are no issues	ram coordinator will evaluate the new system to or concerns. Should issues arise with the network, ram coordinator will track the information and			\$ 0.0
15f) Personnel [Staff (not contract	ors) directly implementing project and programmatic capability]	LV-UASI	State-wide	SubT
	with personnel for this area. The program personnel s budget during normal working hours.			\$ 0.0

15g) PROJECT TOTALS

TOTAL

\$ 123,775.00

LV-UASI

\$ 0.00

State-wide

\$ 123,775.00

Nevada Homela	PRC	PROJECT ID:					
Project Proposal f	Date	4/7/17					
PROJECT TITLE REFERENCE:	-						
16) TASKS & SCHEDULE - Iden	ify the necessary tasks/steps, and time needed.						
FIELDS ARE LIMITED TO TEXT BO	FIELDS ARE LIMITED TO TEXT BOX SIZE						
Task #	Task Description	(MM/DD/YY)	(MM/00/VV)	(# months)			

Task #	Task Description	(MM/DD/YY)	(MM/DD/YY)	(# months)
1	Receive Funding	N/A	N/A	N/A
2	Receive award letter	09/01/17	10/01/17	1
3	Create Work Program and Receive Approval from the Legislature	10/01/17	11/01/17	1
4	Develop specifications/plans for all equipment associated with the program	11/01/17	12/01/17	1
5	Schedule and draft a timeline for equipment installation	12/01/17	01/01/17	1
6	Implementation installation for all equipment associated with the project	01/01/18	06/01/18	5
7	Test all equipment associated with the project	06/01/18	09/01/18	1
8	Closeout of grant	09/01/18	09/30/18	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.

NPP is the state law enforcement agency which supervises the most serious and dangerous offenders released to community supervision. These individuals must report to NPP offices, creating security concerns. There have been several incidents throughout the state involving terrorist activities including bomb threats upon the Reno office. Officers have located bombs, guns and hand grenades in offender homes. In Reno, an offender with a history of domestic terrorism was arrested after local police discovered he and several other fellow white supremacists were shooting handguns at pipe bombs and detonating them. In Las Vegas, officers located a bomb left inside the NPP lobby. The bomb squad responded and detonated the bomb. The Las Vegas office has been shot at with handguns on three different occasions. These examples demonstrate the danger staff members and the public are subject to inside NPP buildings. It is critical that security improvements be implemented to enhance safety throughout the state.

b. Does this project align with the Nevada Commission on Homeland Security FY17 Priorities? YES 💽 NO 🔵 Explain below.

Cybersecurity: NPP's implementation of enhanced security systems across the state will assist in protecting facilities which have access to computer networks and criminal history repositories. NPP as a Division of the Department of Public Safety is under the same network that maintains sensitive information regarding the heads of state and criminal history repositories. Security enhancement would assist in reducing the potential cybersecurity threats. Intelligence and information sharing: NPP currently works with the NTAC to share information of offender activities associated with terrorism. Public Information and Warning: Due to NPP's continuous interactions with known offenders who have been identified as being associated with terrorism, NPP is in a position to alert the public of potential threats. Operational coordination/communication: NPP, as a member of NV DPS, would coordinate and communicate information as it is received to protect the public.

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

The funding request was substantially reduced to fulfill the most urgent priorities for the agency. The funding request would improve major priorities within the agency, but would unfortunately not fulfill all of the needs.

	Nevada Homeland	Security Grant Program (HSGP)	PROJECT ID:	TT
	Project Proposal for	FFY17 HSGP Funding Description	Date Submitted	4/7/17
RO.	JECT TITLE REFERENCE:	Public Servants of Nevada Protection Project		
	d. Can this project continue wi	thout funding? YES 💿 NO 🔵 Explain below.		
"e" are limitied to visible text box size	Maintenance of the security enha equipment as well.	ancements will be the responsibility of NPP. EITS has agree	eed to provide mainte	enance for the
mitie	e. Does this project provide a	measurable "state-wide" benefit? YES 💽 NO 🔵 Explain be	low.	
Fields "d" and "e" are li	number of times the panic alarm could also be maintained to ensu	could be measured by documenting the use of the equipme system is activated to alert the staff of critical situations. The are security integrity. Additionally, all incidents in which revi evidence regarding a critical incident on premises or evider	acking of access car ew of the camera sys	d deactivation stems had to

18) THIRA COMPLETION - Please indicate the participation level in completing the 2016 THIRA Survey. CHOOSE ONE:

- **YES** Agency has participated in the 2016 Threats and Hazards Identification Risk Assessment (THIRA) Survey
- NO Agency has not participated in the 2016 Threats and Hazards 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

NPP has had direct, experience with criminal terrorism. Juvenile Parole, located in the Belrose complex next to the LV buildings in that facility, was fire-bombed. The roof of the fire-bombed structure was shared by NPP offices. NPP supervises criminal gang members from nationally recognized and internationally prominent groups such as MS-13. Nevada is home to more than 100 members of the ultra-violent MS-13 gang. Nevada is home to more than 300 street gangs and roughly 20,000 gang members, according the FBI's 2011 National Gang Threat Assessment. Las Vegas and Nevada are also home to several outlaw motorcycle gangs including Banditos, Black Pistons, Hells Angels, Mongols, Outlaws, Pagans, Sons of Silence and Vagos, etc. NPP supervises members of these organizations. Las Vegas and Reno are major "pass through" stops for many criminal organizations and motorcycle gangs. LVMPD reestablished their Gang Crimes Unit in 2017, as decentralizing the gang unit had adversely impacted the valley's crime rates.

NPP supervises members of many hate groups which fall under the radical Religious/Dissent Terrorism group heading. This includes members of the National Alliance, National Vanguard, Aryan Brotherhood, Neo-Nazi, Skin Head, Sovereign Citizens, Black Lives Matter, New Black Panther Party, Muslim Brotherhood, Muslim Student Association, Nation of Islam and more. A member of one of these hate groups was suspected of setting fire to a Jewish church in Idaho and for violently attacking a man because he was African American.

NPP supervises individuals associated with the New Black Panther Party (NBPP), which has targeted NPP with flyers and nearby streets have been the site of protest marches. NBPP is considered to be a hate group by a number of nationally recognized organizations including the US Commission on Civil Rights. The media reported that NBPP has formed a coalition with the Muslim Brotherhood, an organization with confirmed, direct ties to terrorist organizations and leaders in the middle east. The Southern Poverty Law Center describes the NBPP as "...a virulently racist and anti-Semitic organization whose leaders have encouraged violence against whites, Jews and law enforcement officers." In June 2015, the leader of the NBPP called for "war" against police and whites. This is about the same time NPP was supervising the local chapter president and when NPP began receiving flyers.

Las Vegas has 8 Islamic centers, including schools, society buildings and mosques. Additionally there are 16 prayer spaces, which double as restaurants and lounges. Most of these locations have ownership or leases which are associated with leaders in the Muslim Brotherhood, which as noted has direct ties to terrorist organizations in the middle east. Congress will be hearing S68 – The Muslim Brotherhood Terrorist Designation Act of 2017. NPP supervises members of various Left/Right political ideology groups which may also be listed as hate groups.

Is this your ORIGINAL or AMENDED 2017 HSGP Project Submission? • Original Amended

Date that you are submitting your Original or Amended Project 04/07/01

HOMELAND SECURITY GRANT PROGRAM (HSGP)

FFY 2017

	Agency		Project Manager Name & Contact #	Eddie Bowe (775) 684-2	ers :650	Grant Manager Name & Contact #		ott (775) 684-24	04						
	IJ TITLE	Public Servants and Public of Nevada	a Protection	Project											
		One Budget Per Funding Stream													
		SHSP													
ne #	CATEGORY	PERSONNEL DETAIL DESCRIPTION	Select Type	Previous Funding Type	Salary or Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Personnel	Positions Require: How Many, Type, Max Amount o 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								\$-					ş -		
2								\$ -					\$ -		
3								\$ - \$ -					\$- \$-		
-	Personnel							Ψ					Ŷ	•	
RSON	Sub-Total	ATIVE REQUIRED FOR EACH LINE ITEM ABOVE - PLI	ASE EXPLAINE	IN DETAIL T	HE POSITIONS		ES NARR	\$ - ATIVE WILL BE	USED TO ENSUE	RE ITEMS LISTED W) IN THE	\$-	\$ -	
		eeded for this project.													
ne #	CATEGORY	FRINGE DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	Salary Hourly	% of Effort	Calculatio n (hours)	Personnel Cost Amount	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Fringe Benefits	Positions Require: Fringe to be separate from Personnel Costs above													
								<u>s</u> -					\$0.00 \$0.00		
5													\$0.00		
6 7								\$ -							
6	Fringe Sub						-	\$ - \$ -					\$0.00		
6 7 8	Total							s -			E COMPLETED IN T	HE GRANT		\$0.00	
6 7 8 RINGE C	Total OST NARRATIV	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE quired for this project.	EXPLAINE IN DE	TAIL THE P	OSITIONS AND	DELIVERABLES.	- NARRATIV	s -	TO ENSURE ITE	EMS LISTED WILL E	BE COMPLETED IN T	HE GRANT	\$0.00	\$0.00	
6 7 8 RINGE C	Total OST NARRATIV	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE juired for this project. PURPOSE OF EACH TRAVEL, LOCATION, HOW MANY DAYS, PER DIEM BREAKDOWN	EXPLAINE IN DE	Previous	Catagory of	DELIVERABLES. Travel Reference # from Addendum		\$ - \$ - E WILL BE USED	TO ENSURE ITE	EMS LISTED WILL E Primary Core Capability	BE COMPLETED IN T Secondary Core Capability	HE GRANT Funding Source	\$0.00	\$0.00 Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
6 7 8 RINGE C o fringe I ne #	Total COST NARRATIV	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE quired for this project. PURPOSE OF EACH TRAVEL, LOCATION, HOW	Purchase Type	Previous Funding	Category of	Travel Reference # from		\$ - \$ - E WILL BE USED		Primary Core	Secondary Core	Funding	\$0.00 \$0.00 Total Budget	Line Item	Descriptions on how it will
6 7 8 RINGE C	Total OST NARRATIV benefits will be rea CATEGORY Travel Planning Training Exercise Equipment	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE uired for this project. 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	Purchase Type	Previous Funding	Category of	Travel Reference # from		\$ - \$ - E WILL BE USED		Primary Core	Secondary Core	Funding	\$0.00 \$0.00	Line Item	Descriptions on how it will
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6 7 8 8 8 9 10	Total OST NARRATIV benefits will be rea CATEGORY Travel Planning Training Exercise Equipment	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE uired for this project. 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	Purchase Type	Previous Funding	Category of	Travel Reference # from		\$ - \$ - E WILL BE USED	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 Total Budget \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 NINGE C fringe I ne # 9 10 11 12 13 14	Total OST NARRATIV benefits will be rea CATEGORY Travel Planning Training Exercise Equipment	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE uired for this project. 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	Purchase Type	Previous Funding	Category of	Travel Reference # from		\$ - \$ - E WILL BE USED	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will
6 7 8 INGE C o fringe I ne # 9 10 11 12 13	Total OST NARRATIV benefits will be rea CATEGORY Travel Planning Training Exercise Equipment	E REQUIRED FOR EACH LINE ITEM ABOVE - PLEASE uired for this project. 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	Purchase Type	Previous Funding	Category of	Travel Reference # from		\$ - \$ - E WILL BE USED	Total Cost	Primary Core	Secondary Core	Funding	\$0.00 \$0.00 Total Budget \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	Line Item	Descriptions on how it will

Line #	CATEGORY		Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program	ТТ
	Planning	The run field of containate memory to schedule the installation of the security equipment in each of the offices. The program coordinator will work with NPP fiscal to ensure funding is available and that a work program is approved in order to schedule the equipment installation. Once the work program is complete, NPP and RFI Communications will coordinate and schedule installation of the hardware. A time line and schedule for each office will be drafted in order to assist with office coordination. In addition to coordinating with RFI													
17							-					\$0.00			
18							-					\$0.00			
19							-					\$0.00			
20							-					\$0.00			
21							-					\$0.00			
	Planning Sub- Total						\$-					\$0.00	\$0.00		

There are not any costs associated with the planning for this project.

Line #	CATEGORY	ORGANIZATION DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Organization	The program coordinator will work with each area representative assigned to the program to schedule installation of the equipment. This will require that the area coordinators contact EITS to ensure the equpment installed will have network access.												
22		The area representatives will provide the program coordinator information of the equipment installed and work order completion sent to the program coordinator for tracking.					s -					÷		
23		*					\$ -					\$ -		
24							\$ -					\$ -		
25							\$-					\$-		
26							\$-					\$-		
27							\$-					\$ -		
	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

There is no cost associated with the organization of the project.

												1		
Line #	CATEGORY	EQUIPMENT DETAIL DESCRIPTION	Purchase Type	Previous Funding Type	QUANTITY	UNIT COST	TOTAL	Primary Core Capability	Secondary Core Capability	AEL Ref #	Funding Source	Total Budget	Line Item Reductions	Line Item Reductions Descriptions on how it will affect your program
	Equipment	All of the equipment being installed will be provided by RFI Communications. This will include alarm systems for offices that currently do not have any security protection. Security cameras for offices, which currently do not have system to monitor and protect the facilities, access control panels for all external doors to monitor who enters the building and allow staff to deactivate access cards should they be lost or stolen for added security and panic alarm systems that will notify staff if there is a critical situation occurring inside the building.												
28		IP CCTV System and Panic Alarm System - Reno Office	New		1.00	\$	\$ 9,738.00	Operational Coordination	Operational Communication	14SW-01-ALRM	SHSP	\$ 9,738.00		
29		Panic Alarm System Enhancement - Las Vegas	New		1.00		\$ 1,200.00	Operational Coordination	Operational Communication	14SW-01-ALRM	SHSP	\$ 1,200.00		
30		Panic Alarm System Enhancement - Carson City Field Office	New		1.00		\$ 546.00	Operational Coordination	Operational Communication	14SW-01-ALRM	SHSP	\$ 546.00		
31		IP CCTV System and Panic Alarm System - HQ	New		1.00		\$ 11,916.00	Operational Coordination	Operational Communication	13LE-00-SURV	SHSP	\$ 11,916.00		
32		IP CCTV System and Panic Alarm System - Pahrump	New		1.00		\$ 25,559.00	Operational Coordination	Operational Communication	13LE-00-SURV	SHSP	\$ 25,559.00		
33		IP CCTV System and Panic Alarm System - Fallon	New		1.00		\$ 29,919.00	Operational Coordination		13LE-00-SURV	SHSP	\$ 29,919.00		
34		IP CCTV System and Panic Alarm System - Ely	New		1.00		\$ 18,254.00	Operational Coordination	Operational Communication	13LE-00-SURV	SHSP	\$ 18,254.00		
35		IP CCTV System and Panic Alarm System - Elko	New		1.00		\$ 9,954.00	Operational Coordination	Operational Communication	13LE-00-SURV	SHSP	\$ 9,954.00		
36		IP CCTV System and Panic Alarm System - Winnemucca	New		1.00		\$ 16,689.00	Operational Coordination	Operational Communication	13LE-00-SURV	SHSP	\$ 16,689.00		
37							\$ -					\$ -		
38							\$ -			1		\$ -		
39							\$ -			1		\$ -		
	EQUIPMENT Sub-Total						\$ 123,775.00					\$ 123,775.00	-	

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 TH
Line Item 28: Aviginon Headend AVIGILON WMA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-CORSTD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA
Cameras AVIGILON 2.0C-H4A-D1-IR 2.0 MEGAPIXEL (1080P) WDR, LIGHTCATCHER, DAY/NIGHT, INDOOR DOME, 3-9MM F/1.3 P-IRIS 3 EA
Cabling 500 FT
PANIC SYSTEM ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 5 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 4 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 1000 FT
Line Item 29: AMSECO sI-1301SAQ/B 54 LED STROBE5 EACH WITH SIREN, BLUE CONNECT AIR W181p-2051 18/2 STRANDED PLENUM 500 FT
Line Item 30: PANIC SYSTEM SOUNDERS W Box Technologies WALLSIREN DUAL TONE WALL SIREN 3 EA
RFI PROFESSIONAL SERVICES RFI MISC. PROJECT MANAGEMENT 1 LOT
RFI MISC. ENGINEERING 1 LOT RFI MISC. MISC MATERIALS 1 LOT
Line Item 31: Avigilon Headend AVIGILON WA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-COR-STD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA
Cameras AVIGILON 3.0C-H4A-BO1-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTI 2 EA AVIGILON 2.0C-H4A-D1-IR 2.0 MEGAPIXEL (1080P) WDR, LIGHTCATCHER, DAY/NIGHT, INDOOR DOME, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTICS 1 EA
Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 1000 FT
Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 10 EA W BOX TECHNOlogies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 3 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 1000 FT
Line Item 32: Aviglion Headend
AVIGILON VMA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-COR-STD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA Cameras
AVIGILON 3.0C-H4A-B01-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELFLEARNING VIDEO ANALYTI 4 EA AVIGILON 2.0C-H4A-D1-IR 2.0 MEGAPIXEL (1080P) WDR, LIGHTCATCHER, DAY/NIGHT, INDOOR DOME, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTICS 3 EA
Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 1500 FT LEVITON 5G460-05L PC C5E+ 5FT BLU A/B 8C RJ45/RJ45 W/BLU BOOT GIGAMAX 5E 7 EA
Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 1 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 1 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT
Access Control ALTRONIX AL400ULACM 12/24 DC UL PS W/ACM8 1 EA SOFTWARE HOUSE ESTAR004-RM ISTAR EDGE 4-READER, SUPPORTS FOUR READERS, WITH ENCLOSURE AND TWO RM-4 MODULES PRE-MOUNTED 64MB RAM, 1 EA YUASA NP7-12 12V 7AH BATTERY 3 EA
Field Devices BOSCH DS150I PIR REQUEST TO EXIT SENSOR GRAY 2 EA GE 1078C-M Recessed Steel Door Contact wWire Leads, 3/4" Diameter, Closed Loop, Brown, 3/8" Gap Size 4 EA \$7.09 \$340.00 \$368.34 GRI 6644 2X/1K RESISTOR PK BRN. 2 EA HES 520030404 5200 COMPLETE - 501/501 A FP ELECT STRIKE 2 EA SOFTWARE HOUSE SWH-4100 Software House Multi-Technology Flex Reader. Contactless smart card and proximity reader; reads 125 KHz proximity cards, 13.56 MHz serial number, and MIFARE® sectors; single gang mount for N. America; Wiegand output; Flex version supports flashing new fir 2 EA
CABLE CONNECT AIR W184C-2099 18/4 STRANDED PLENUM 500 FT CONNECT AIR W226C-2077 22/6 SHIELDED PLENUM 500 FT CONNECT AIR W224C-2057 22/4 STRANDED PLENUM 500 FT

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Line Item 33: Avigion Headend AVIGILON WAA-SI-16P09 HD VIDEO APPLIANCE PRO 16-PORT 9TB UNIT WITH ACC STANDARD 16-CH LICENSE 1 EA AVIGILON 8C-ACC5-COR-STD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 2 EA
Cameras AVIGILON 3.0C-H4A-BO1-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELFLEARNING VIDEO ANALYTI 5 EA AVIGILON 2.0C-H4A-D1-IR 2.0 MEGAPIXEL (1080P) WDR, LIGHTCATCHER, DAY/NIGHT, INDOOR DOME, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTICS 5 EA \$735.31 \$637.50 \$4,314.05
Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 2500 FT LEVITON 5G460-05L PC C5E+ 5FT BLU A/B 8C RJ45/RJ45 W/BLU BOOT GIGAMAX 5E 20 EA
Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 2 EA W Box Technolog HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT
Access Control ALTRONIX AL400ULACM 12/24 DC UL PS W/ACM8 1 EA SOFTWARE HOUESTAR04-RM ISTAR EDGE 4-READER, SUPPORTS FOUR READERS, WITH ENCLOSURE AND TWO RM-4 MODULES PRE-MOUNTED 64MB RAM, 1 EA YUASA NP7-12 12V 7AH BATTERY 3 EA
Field Devices BOSCH D5150I PIR REQUEST TO EXIT SENSOR GRAY 1 EA GE 1078C-M Recessed Steel Door Contact w/Wire Leads, 3/4" Diameter, Closed Loop, Brown, 3/8" Gap Size 1 EA GRI 6644 2K/1K RESISTOR PK BRN 2 EA HES 520030404 5200 COMPLETE - 501/501A FP ELECT STRIKE 1 EA SOFTWARE HOUSWH-4100 Software House Multi-Technology Flex Reader. Contactless smart card and proximity reader; reads 125 KHz proximity cards, 13.56 MHz serial number, and MIFARE® sectors; single gang mount for N. America; Wiegand output; Flex version supports flashing new fir 1 EA
CABLE CONNECT AIR W184C-2099 18/4 STRANDED PLENUM 500 FT CONNECT AIR W226C-2077 22/6 SHIELDED PLENUM 500 FT CONNECT AIR W224C-2057 22/4 STRANDED PLENUM 500 FT
Line Item 34: Aviglion Headend AVIGILON VMA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-CORSTD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA
Cameras AVIGILON 3.0C-H4A-BO1-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTI 4 EA AVIGILON 2.0C-H4A-D1-IR 2.0 MEGAPIXEL (1080P) WDR, LIGHTCATCHER, DAY/NIGHT, INDOOR DOME, 3-9MM F/1.3 P-IRIS LENS, 1 EA
Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 500 FT LEVITON 5G460-05L PC C5E+ 5FT BLU A/B 8C RJ45/RJ45 W/BLU BOOT GIGAMAX 5E 4 EA
Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 3 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT
ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 3 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA
ALTROŃIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 3 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT Access Control Access Control ALTRONIX AL400ULACM 12/24 DC UL PS W/ACM8 1 EA SOFTWARE HOUSE ESTAR004-RM ISTAR EDGE 4-READER, SUPPORTS FOUR READERS, WITH ENCLOSURE AND TWO RM-4 MODULES PRE-MOUNTED 1 EA

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Line Item 35: Avigilon Headend

AVIGILON VMA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-CORSTD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA

Cameras

AVIGILON 3.0C-H4A-BO1-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF-LEARNING VIDEO ANALYTI 2 EA

Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 500 FT LEVITON 5G460-05L PC C5E+ 5FT BLU A/B 8C RJ45/RJ45 W/BLU BOOT GIGAMAX 5E 4 EA

Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 2 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT

Line Item 36:

Avigilon Headend AVIGILON VMA-AS1-8P2 HD VIDEO APPLIANCE 8-PORT 2TB UNIT WITH ACC CORE 8-CH LICENSE 1 EA AVIGILON 8C-ACC5-CORSTD-UPG ACC 5 UPGRADE LICENSE CORE TO STANDARD FOR 8 CAMERA CHANNELS 1 EA

Cameras AVIGILON 3.0C-H4A-BO1-IR 3.0 MEGAPIXEL WDR, LIGHTCATCHER, 3-9MM F/1.3 P-IRIS LENS, INTEGRATED IR, SELF LEARNING VIDEO ANALYTI 2 EA

Cabling CONNECT AIR W244P-2176 24/4PR CAT 5E PLENUM CABLE WHITE 500 FT LEVITON 5G460-05L PC C5E+ 5FT BLU A/B 8C RJ45/RJ45 W/BLU BOOT GIGAMAX 5E 4 EA

Panic System ALTRONIX OLS120D2X 1A@12V & 2A@24V 115/230VAC, ENCL 1 EA AMSECO SL-1301-SAQ/B 54 LED STROBE W SIREN, BLUE 2 EA W Box Technologies HBMOMSD3T HOLDUP BTN MOM SPDT 3 SCR TERM 2 EA YUASA NP7-12 12V 7AH BATTERY 1 EA CONNECT AIR W181P-2051 18/2 STRANDED PLENUM 500 FT

Access Control

ALTRONIX AL400ULACM 12/24 DC UL PS W/ACM8 1 EA SOFTWARE HOUSE ESTAR004-RM ISTAR EDGE 4-READER, SUPPORTS FOUR READERS, WITH ENCLOSURE AND TWO RM-4 MODULES PRE-MOUNTED 64MB RAM, 1 EA YUASA NP7-12 12V 7AH BATTERY 3 EA

Field Devices

BOSCH DS150I PIR REQUEST TO EXIT SENSOR GRAY 2 EA GE 1078C-M Recessed Steel Door Contact w/Wire Leads,3/4" Diameter, Closed Loop, Brown, 3/8" Gap Size 2 EA GRI 6644 2K/1K RESISTOR PK BRN 4 EA HES 520030404 5200 COMPLETE - 501/501A FP ELECT STRIKE 2 EA SOFTWARE HOUSE SWH-4100 Software House Multi-Technology Flex Reader. Contactless smart card and proximity reader; reads 125 KHz proximity 2 EA

CABLE

CONNECT AIR W184C-2099 18/4 STRANDED PLENUM 500 FT CONNECT AIR W226C-2077 22/6 SHIELDED PLENUM 500 FT CONNECT AIR W224C-2057 22/4 STRANDED PLENUM 500 FT

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		Training for the use of the equipment will be provided by RFI Communications. There is no cost associated with the training.					-	-							
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	Exercise	Area coordinators and the program coordinator will evaluate the new system to ensure that there are not any issues and/or concerns. Should issues arise with the network, systems and or equipment, the program coordinator will track the information and evaluate how NPP will proceed to handle.												-	
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