

Ohio

Department
of Commerce



Ohio

Department of
Administrative Services



Federal 9-1-1 Grant

Ohio 9-1-1 Local Sub-Grant Application

Submission Deadline - 5:00 pm December 31, 2019

Federal 9-1-1 Grant - Ohio 9-1-1 Local Sub-Grant Application

The State of Ohio has been allotted \$4,302,976.00 in federal grant funds from the 9-1-1 Federal Grant Program funded by the U.S. Department of Transportation, National Highway Traffic Safety Administration (NHTSA), and the U.S. Department of Commerce, National Telecommunications and Information Administration (NTIA). This funding will be used to award sub-grants to local agencies for the purpose of reimbursing up to 60% of the cost of eligible projects related to the implementation of NG9-1-1 services.

The Department of Administrative Services (DAS), Ohio 9-1-1 Program Office (the Ohio 9-1-1 Program Office) has partnered with the Ohio Department of Commerce (ODC), Division of State Fire Marshal (SFM) to administer this grant.

In order to apply for a sub-grant, a local agency must complete this application in its entirety and submit it by 5:00 pm on December 31, 2019. **NO LATE SUBMISSIONS WILL BE ACCEPTED.** However, if funds are left over, a round-two of the grant application process will be initiated. Representatives from the Ohio 9-1-1 Program Office and the ODC-SFM will work with the Grant Review Committee to review all applications. The Grant Review Committee will follow the Federal and state grant requirements and criteria and develop a list of approved applications, not to exceed the reimbursable grant funds available. The Grant Review Committee is made up of the following representatives:

- One Ohio MARCS Representative
- One Ohio Geographically Referenced Information Program Representative
- Ohio Department of Commerce, Division of State Fire Marshal
- One Ohio Sheriff's Office / County 9-1-1 Coordinator Representative
- One Ohio County Commissioners Representative
- One Ohio Municipal PSAP Manager (PSAP Operations Sub-Committee Chair & NENA/APCO Member)

Federal 9-1-1 Grant – Ohio Sub-Grant Overview

I. Purpose

The Ohio 9-1-1 Program Office and the Ohio Department of Commerce, Division of State Fire Marshal have partnered to facilitate the application for the Federal 9-1-1 Grant for the purpose of providing local sub-grants to local public safety answering points (PSAPs). The purpose of this reimbursable grant is to provide partial funding for projects that transition PSAPs to Next Generation 9-1-1 (NG9-1-1).

II. Project/Award Period

The period of performance for each sub-grant begins on the date of the approval of its application and ends on November 30, 2021. This deadline has been established to allow for closeout reporting required by the 9-1-1 Grant Program before funding for the program ends.

III. Award Amount

Ohio's funding for this project is \$4,302,976, of which up to 10% may be used by the State for the administration of the grant. Applications for local sub-grants may be submitted in any amount, but the maximum local sub-grant will be \$250,000 per county.

IV. Cost Sharing/Matching

By statute the Federal share of the cost of any activity carried out under the grant program may not exceed 60% of eligible costs. For this program, sub-grant recipients must provide at least 40% of the total eligible project costs in cash match. Funds from other Federal sources or in-kind services may not be used as matching funds.

V. Reimbursement Only Basis of Sub-grants

Sub-grants will be payable on a reimbursement basis only. Local agencies will need to demonstrate through their application that they have the funds needed to cover the costs of their project. Once the local agency has submitted paid invoices demonstrating that the project is complete, a request for funding in the amount of the approved sub-grant, not to exceed 60% of the eligible cost of the project will be submitted. As those reimbursements are received, they will be paid back to the local sub-grantee. Final approval of requested reimbursements will be made by the Federal 9-1-1 Grant Administration.

Information on how to submit requests for payment will be included with the letter awarding the local sub-grants.

VI. Eligibility

All local PSAPs are eligible to submit a sub-grant application for projects needed to transition to NG9-1-1 services. Each County 9-1-1 Coordinator will receive the sub-grant application and will ensure all PSAPs within the county 9-1-1 system receive an application. Responses must be coordinated as part of the county 9-1-1 plan and all applications require review and approval by the county 9-1-1 coordinator.

VII. Grant Requirements

9-1-1 Grant Program funds must be used for implementation of NG9-1-1 services.

The following ARE eligible uses for 9-1-1 Grant Program funds:

- 1 – Hardware to provide NG9-1-1 services
- 2 – Software to provide NG9-1-1 services
- 3 – Hosted NG9-1-1 services
- 4 – Contractual costs associated with carrying out programmatic activities, including consultant fees
- 5 – Training directly related to NG9-1-1 implementation for public safety personnel
- 6 – Operation of the NG9-1-1 system while still operating the legacy 9-1-1 system

The following MAY NOT be used for 9-1-1 Grant Program funds:

- 1 – Cost to operate legacy E9-1-1 or 9-1-1 systems
- 2 – Costs to operate the NG9-1-1 system after it is fully operational
- 3 – Activities related to construction or renovation
- 4 – Independent verification and validation (IV & V) testing for product, service, and system purchases
- 5 – Costs that are unallowable under the Cost Principles of the Uniform Administrative Requirements, and Audit Requirements for Federal Awards
- 6 – Administrative costs may not be included at the local level

Should you have any questions, please contact the Ohio 9-1-1 Program Office at Ohio9-1-1@das.ohio.gov.

VIII. Special Conditions

The Applicant must be a public safety answering point participating in the county 9-1-1 plan.

The Applicant must be compliant with all PSAP Operations Rules as of latest Support and Compliance review conducted by the Ohio 9-1-1 Program Office.

Applicants from counties that have participated in the Federal Communications Commission, National 9-1-1 Program Office and Ohio 9-1-1 Program Office surveys will be given priority over counties that did not participate in the 2019 survey.

Projects can be submitted for any amount, however the reimbursable portion (up to 60% of eligible costs) must not exceed \$250,000.00 per county.

Applications must specifically describe how the project meets the following requirements:

- How the project achieves NG9-1-1 services
- Identify all local funding sources totaling 100% of project costs
- Identify the local funding sources that will be dedicated to funding the at least 40% portion of the project that must be funded locally
- Identify the local funding sources that will be dedicated to the project but reimbursed with the up to 60% Federal match of grant funds
- Detailed timeline of project through completion
- Application must be completed in its entirety to be considered

Counties, PSAPs, agencies and other eligible parties will not sign any contracts or make any purchases for projects submitted until an approval and notice to proceed is received from the Ohio 9-1-1 Program Office/ODC-SFM.

Sub-grant awardees will be required to submit periodic reports, which will be outlined in the award letter.

IX. Application Submission

Return completed applications to:

Ohio9-1-1@das.ohio.gov

FAX – (614) 728-5297

Ohio 9-1-1 Program Office
Attention: 9-1-1 Grant Program
Riffe Center – 19th Floor
77 South High Street
Columbus, Ohio 43215

Questions can be addressed by contacting the Ohio 9-1-1 Program office at Ohio9-1-1@das.ohio.gov.

APPLICATION

Federal 9-1-1 Grant Program – Ohio Reimbursable Sub-grant

Section 1: APPLICANT INFORMATION

County - _____

Agency - _____

Address - _____

Title of Project - _____

Person Filling Out Application - _____

Phone # - _____ E-mail - _____

Agency CEO Approving Application - _____

Phone # - _____ E-mail - _____

Agency Fiscal Agent (Auditor, etc.) - _____

Phone # - _____ E-mail - _____

Primary Point of Contact - _____

Phone # - _____ E-mail - _____

County 9-1-1 Coordinator - _____

Phone # - _____ E-mail - _____

Section 2: PROJECT DESCRIPTION

- A. Provide a detailed description of the project** (including anticipated project activities and timeline, key milestones, primary activities needed to accomplish milestones, and possible delays or challenges) (*attach additional typed pages if necessary*)

B. Please mark the eligible categories (one or more) the project matches:

- **HW Hardware:** Funds will be used to purchase hardware used for NG9-1-1 systems.

___ - **SW Software:** Funds will be used to purchase software used for NG9-1-1 systems.

___ - **TR Training:** Funds will be used for training directly related to NG9-1-1 services for public safety personnel including call-takers, first responders and other individuals and organizations that are part of the emergency response chain and 9-1-1 services.

___ - **OP Operations:** Funds used to cover the cost of operating the NG9-1-1 system until such time as the current legacy system is shut down.

CS Consulting Services: Funds to be expended for contracted consulting services used to design, procure and implement NG9-1-1 systems or services.

HT Hosted NG9-1-1 Services: Funds used to contract with vendors that own the hardware and software and provide NG9-1-1 enabling functions as a service.

C. Explain how project is for NG9-1-1 Services:

(attach additional typed pages if necessary)

D. Timeline for the beginning and end of the locally funded project for which you will be seeking reimbursable grant funds: *(attach additional typed pages if necessary)*

E. Which best describes your project span:

Agency

Multi-Agency

Countywide

Multi-County

Explain

Section 3: FUNDING

A. The table below must be filled out to identify the local funding sources that will be dedicated to this project, both reimbursable and non-reimbursable portions:

Example:

<u>Local Funding Source</u>	<u>Non-Reimbursable Funds</u>	<u>Reimbursable Funds</u>
General Fund	\$25,000.00	\$35,000.00
9-1-1 Levy Fund	\$15,000.00	
Wireless 9-1-1 Government Assistance Fund Disbursement		\$25,000.00
	<u>Total</u> (Must be at least 40% of total project cost) <u>\$40,000.00</u>	<u>Total</u> (Must be no more than 60% of project cost) <u>\$60,000.00</u>

Total Project Cost - \$100,000.00

The table must be filled out completely to capture all costs for the project. See table next page.

B. Local Funding

Local Funding Source	Non-Reimbursable Funds	Reimbursable Funds
	Total <i>(Must be at least 40% of total project cost)</i>	Total <i>(Must be no more than 60% of project cost)</i>

Total Project Cost - \$ _____

Section 4:

A. Miscellaneous Information

Population served by PSAP (Identify source)	
Geographic Area (square miles) served by PSAP	
Type of area served by PSAP (Metropolitan, Suburb, Rural)	
Annual number of 9-1-1 calls received: Total / wireless	
Annual operating budget for 9-1-1 operations	
Breakdown (by percentage) of funding sources for 9-1-1 operations (General Fund, Wireless 9-1-1 Government Assistance Fund, Levy, etc.)	
Other grants received within last three years Identify if related to 9-1-1, public safety or other	
Number of PSAPS (Wireless and wireline only/secondary) in county	
Annual Wireless 9-1-1 Government Assistance Fund Disbursement	
Did your county participate in the FCC / National 9-1-1 Office Survey for 2018 data?	

B. Describe the Cost / Benefit of the project for the community: *(attach additional typed pages if necessary)*

C. Describe the financial assistance need for your community:*(attach additional typed pages if necessary)*

Statement of Responsibility

(To be signed by the CEO of agency submitting grant application):

I, _____ hereby certify that:

- I certify that my agency has not diverted and will not divert any portion of designated 9-1-1 funds collected for the purposes of 9-1-1, for any purpose other than the purposes the funds were collected for one year prior to the date of this application and continuing through the time period the grant funds are available. If any designated 9-1-1- funds have been or are diverted to other purposes during this time period, I understand that my agency will be required to return all grant funds received under this sub-grant.
- I certify that my agency and its agents will comply with all applicable federal, state and local laws, regulations, financial and programmatic requirements of federal grants. If my agency fails to comply, my agency will return all grant funds received.
- I certify that my agency will comply with all requests for information needed to fulfill the requirements of the grant program, and if my agency fails to comply, my agency will return all grant funds received.
- I certify that my agency will make available for review, at any time, any systems, hardware, or software purchased with reimbursable grant funds and any records concerning those purchases. If my agency fails to comply, my agency will return all grant funds received.
- I understand that my agency will be required to complete a sub-grant agreement to receive funds under this program.

Signed (Agency CEO) _____

Printed Name and Title _____

Date _____

County 9-1-1 Coordinator Approval _____

Printed Name _____

Date _____