

TEXAS DEPARTMENT OF PUBLIC SAFETY

5805 N LAMAR BLVD • BOX 4087 • AUSTIN, TEXAS 78773-0001

512/424-2000

www.dps.texas.gov



STEVEN C. McCRAW
DIRECTOR
DAVID G. BAKER
ROBERT J. BODISCH, SR.
DEPUTY DIRECTORS



COMMISSION
A. CYNTHIA LEON, CHAIR
MANNY FLORES
FAITH JOHNSON
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RANDY WATSON

September 19, 2016

Dear Local Emergency Planning Committee Chairperson:

The Texas Division of Emergency Management (TDEM), representing the State Emergency Response Commission (SERC), is offering Hazardous Materials Emergency Preparedness Planning grants for Local Emergency Planning Committees (LEPCs) in Texas. Enclosed is the FY 2017 grant application package.

Please complete the attached HMEP Grant Application thoroughly. The FY 2017 Planning Guide for Local Emergency Planning Committees is available on the TDEM Website at <https://www.txdps.state.tx.us/dem/GrantsResources/index.htm>. Please read this carefully for additional information and guidance.

The grants provide reimbursement costs incurred by LEPCs for conducting approved projects. Each LEPC is required to designate a county or city government official to serve as their fiscal agent and is required to provide matching support in the minimum amount of 25 percent of the total project cost. The match may be cash (hard) or in-kind (soft).

The deadline for grant application submission is October 17, 2016. If you have any questions regarding this request for proposals, or if you need assistance, please contact the Technological Hazards Unit Supervisor, Joshua Bryant, at 512-424-5989 or joshua.bryant@dps.texas.gov.

Sincerely,

W. Nim Kidd, CEM ®

Chief

Texas Division of Emergency Management

Assistant Director

Texas Homeland Security

Texas Department of Public Safety



TEXAS DIVISION OF EMERGENCY MANAGEMENT
HAZARDOUS MATERIALS EMERGENCY PREPAREDNESS (HMEP)
FFY 2016-2017 GRANT APPLICATION FOR PLANNING ACTIVITIES
 (Application Submission Deadline – October 17, 2016)



1. Applicant Organization Name (LEPC Name): _____
2. Applicant Organization (LEPC) DUNS # _____
3. Subaward Period of Performance Start Date: **October 1, 2016** END DATE: **September 30, 2017** (Approved projects with fully signed Interlocal Contracts can begin their projects.)
4. Name of Federal Awarding Agency: **U.S. DOT, Pipeline and Hazardous Materials Safety Administration**
5. CFDA Number: **20.703**
6. Federal Subaward Project Description:
 - a) Project Manager:
 Name: _____ Title: _____
 Address: _____ City/Zip: _____
 Telephone Number: _____ Email: _____
 - b) Local Emergency Planning Committee Chair-Person:
 Name: _____ Title: _____
 Address: _____ City/Zip: _____
 Telephone Number: _____ Email: _____
 - c) Financial Contact Information (person responsible for the fiscal management of the grant who certifies all financial status reports, invoices, and requests for payment):
 Name: _____ Title: _____
 Address: _____ City/Zip: _____
 Telephone Number: _____ Email: _____
 - d) LEPC Status (only active LEPCs are eligible to apply for HMEP grant funds): Active _____ Inactive _____
 - e) Project Title: _____
 - f) Project Start Date: _____ TENTATIVE PROJECT END DATE: _____
 - g) Type of Project: Commodity Flow Survey _____ Hazards Analysis _____ EOP Update _____
 Other (describe) _____
 - h) Amount of HMEP Funds Requested: _____
 - i) Will you be using a subcontractor to complete this project? _____
 - j) If so, who will be the subcontractor: _____
 - k) Will You Accept Partial Funding? How Much: _____
 - l) Match Share (To calculate the match amount, multiply the amount of HMEP funds requested by 0.25, which equals to the (25/75) percent match share): _____

m) Match Type (In-kind, Hard, or Both): _____

Description of Match (prevailing market rate must be used for salary, fringe benefits, equipment, and facilities):

Type of Match (non-federal, reasonable, allocable, and applicable)	Description	Estimated Amount
Salary and/or fringe benefit (rate x hours)*		
Facility space used for planning/exercise/training		
Equipment used for planning/exercise/training		
HMEP project related travel (planning/exercise/training)		
Other (describe)		
Contractual Funds		
Total Match (non-federal and not used for any other federal and/or state funded projects):		

n) Project Narrative:

Needs Assessment: *Please describe why the project is needed in your county or region*

- Assess the current hazmat planning status of the county or region
- Evaluate if your EOP, Hazards Analysis (HA), Commodity Flow Surveys (CFS), etc. were conducted in last five years; check if your county has any other planning needs, identify gaps
- Evaluate needed tasks, activities, supplies, etc. to prevent and mitigate hazmat transportation related incident
- Develop priorities for tasks and activities to be conducted
- Multi-county or regional projects should be a collaboration of the counties involved or the region

Goals and Objectives: *Please describe the goals and objectives of this project*

- Describe how the project will improve preparedness in relation to hazmat transportation in the county or region
- Align with the intent of the grant and TDEM's objectives (Refer to the Texas LEPC Handbook)
- Address the findings of the Needs Assessment
- Ensure goals and objectives are clear and concise and obtainable & reasonable
- Ensure goals and objectives are measurable in terms of projected outputs and outcomes

Programmatic Monitoring and Coordination: *Please describe how the project activities will be coordinated*

- Programmatic monitoring: Describe the process that will be used for program management; identify lead LEPC (will coordinate the project for the region, work with other counties to come up with the match, submit quarterly/final report) for a multi-county or regional projects
- Financial Monitoring: Provide specific methods to be used for awarding sub-contracts, internal control, as defined in accounting and auditing to be used
- Information on Contractors: Provide contractor contact information
- Bid Selection Justification: Justify selection of the contractor(s)

Programmatic Monitoring:

Financial Monitoring:

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Procurement Process:

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Contractor's Contact Information:

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Bid Selection Justification:

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Scope of Work: *Describe the Scope of Work (attach separate sheets, if required)*

- **Tasks and Activities:** Describe the tasks and activities to be performed, project, location, when it will be performed, if contractors, consultants, specialists, etc. will be hired, etc.
- **Number and Types of Deliverables:** State the number and types of deliverables
- **Schedule of Implementation:** Provide a detailed schedule for execution of the project; describe step by step project timeline and tentative projection completion date, etc.
- **Outcomes/Impacts:** Describe the overall outcome, how the project will benefit hazmat planners and first responders.
- **Products to be completed:** Final product or deliverable.

Tasks and Activities:

Number and Types of Deliverables:

Schedule of Implementation:

Outcomes and Impacts:

Products to be Completed:

Budget Narrative: *Justify the proposed costs, compare any bids/quotes from vendors*

- Justify any supplies and/or consumables required (all costs must be reasonable and allocable)
- Justify any rental/purchase for planning or exercise activity (all costs must be reasonable and allocable)

Justification for Proposed Costs:

List of Supplies and Consumables:

Describe any Equipment/Facility Rental Fees:

Itemized Budget:

Cost Category	Description	Cost Estimate
Salary and/or fringe benefit (rate x hours)		\$
Contractual Planning Fees		\$
Contractual Training Fees		\$
Facility Rental		\$
Lodging		\$
Meals		\$
Mileage (0.56/mile)		\$
Car Rental		\$
Equipment Rental		\$
Gasoline		\$
Printing		\$
Materials & Supplies		\$
Other Costs - 1		\$
Other Costs - 2		\$
Other Costs - 3		\$
Total Funds Requested: \$		
Match (Total Funds Requested x (25/75)): \$		
Total Cost (Total Funds Requested + Match): \$		

7. Certification:

Local Emergency Planning Committee Approval:

By signing this document, I certify to the best of my knowledge and belief that the provided information is true, complete, and accurate, and all funds distributed to the above applicant will be used solely for the project and purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise.

Signature of the Project Manager

Date

Signature of the LEPC Chair

Date