Application for Federal Assistance SF-424

Version 02
OMB Number: 4040-0004
Expiration Date: 01/31/2009

1. Type of Submission:

- [ ] Preapplication
- [x] Application
- [ ] Changed/Corrected Application

2. Type of Application:

- [x] New
- [ ] Continuation
- [ ] Revision

If Revision, select appropriate letter(s)

Other (Specifty)

3. Date Received : 3/16/2009

4. Applicant Identifier: MI53153

5a. Federal Entity Identifier:

5a. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

a. Legal Name: Mason County Sheriff's Department

b. Employer/Taxpayer Identification Number (EIN/TIN):

c. Organizational DUNS: 046330767

d. Address:

Street 1: 302 N. Delia
Street 2:
City: Ludington
County:
State: MI
Province:
Country:
Zip / Postal Code: 49431

e. Organizational Unit:

Department Name: Mason County Sheriff

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:
First Name: Bob
Middle Name:
Last Name: Brown
Suffix:

Title: Chief Deputy

Organizational Affiliation:

Telephone Number: 2318433475

Fax Number: 2318431814

Email:

Application for Federal Assistance SF-424 Version 02

9. Type of Applicant 1: Select Applicant Type:

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

Other (Specify):

10 Name of Federal Agency:

Office of Community Oriented Policing Services

11. Catalog of Federal Domestic Assistance Number:

CFDA # = 16.710

CFDA Title: Public Safety Partnership And Community Policing Grants

12 Funding Opportunity Number:

COPS-CHRP-2009-1

Title: CHRP

13. Competition Identification Number:

Title: COPS Hiring Recovery Program

14. Areas Affected by Project (Cities, Counties, States, etc.):

County of Mason

15. Descriptive Title of Applicant's Project:

County Wide Rural Community Policing Initative

Application for Federal Assistance SF-424 Version 02

16. Congressional Districts Of:

a. Applicant: 2 b. Program/Project: 2

17. Proposed Project:

a. Start Date: 7/1/2009 b. End Date: 6/30/2013

18. Estimated Funding ($):

a. Federal 199443

b. Applicant

c. State

d. Local

e. Other

f. Program Income

g. TOTAL 199443

19. Is Application Subject to Review By State Under Executive Order 12372 Process?

[X] a. This application was made available to the State under the Executive Order 12372 Process for review on 4/14/2009

[ ] b. Program is subject to E.O. 12372 but has not been selected by the State for review.

[ ] c. Program is not covered by E. O. 12372

20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

[ ] Yes [X] No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)

By clicking this box and typing my name below, I also certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

[X] I AGREE

** The certifications and assurances as well as grant terms and conditions can be reviewed at www.cops.usdoj/????.

Authorized Representative:

Prefix: First Name: Jeff

Middle Name:

Last Name: Fiers

Suffix:

Title: Sheriff

Telephone Number: 2318433475 Fax Number: 2318431814

Email:

Signature (Typed Name) of Authorized Representative: Jeff Fiers Date Signed: 3/23/2009

Applicant Federal Debt Delinquency Explanation

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

COPS Hiring Recovery Program (CHRP) Application

COPS Application Attachment to SF-424

The COPS Hiring Recovery Program (CHRP) is a competitive grant program that provides funding directly to law enforcement agencies having primary law enforcement authority to create and preserve jobs and to increase their community policing capacity and crime-prevention efforts. CHRP funding is available to hire full-time career law enforcement officers. There is no local matching requirement, but grant funding will be based on your agency's current entry-level salaries and benefits for sworn officer positions. Any additional costs for higher salaries and benefits for positions hired under the CHRP grant must be paid for by the grantee agency.

In preparing your agency's grant application, please be advised that grantees are prohibited from reducing state, local, or tribal funding for sworn officer positions as a direct result of applying for and/or receiving this CHRP grant. Instead, this program is intended to supplement the amount of state, local, or tribal funding that your agency would otherwise be able to budget for sworn officer positions.

In addition, at the conclusion of federal funding, grantees must retain all sworn officer positions awarded under the CHRP grant. The retained CHRP-funded positions should be added to your agency's law enforcement budget with state and/or local funds, over and above the number of locally-funded sworn officer positions that would have existed in the absence of the grant.

To the extent possible, all data should come from a publicly verifiable source, and documentation may be requested by the COPS Office. This information will be used to evaluate your jurisdiction's need for federal assistance to address its public safety needs and to preserve and create jobs.

SECTION 1: EXECUTIVE INFORMATION

Note: Listing individuals without ultimate programmatic and financial authority for the grant could delay the review of your application, or remove your application from consideration.

A. Applicant ORI Number: MI53153

B. Applicant DUNS Number: 046330767

A Data Universal Numbering System (DUNS) number is required. A DUNS number is a unique nine-digit sequence recognized as the universal standard for identifying and keeping track of entities receiving federal funds. For more information about how to obtain a DUNS number, please refer to the How to Apply section of the COPS Application Guide.

C. Central Contractor Registration (CCR)

All applicants are required to maintain current registrations in the Central Contractor Registration (CCR) database. The CCR database is the repository for standard information about federal financial assistance applicants, recipients, and sub-recipients. For more information about how to register with the CCR, please refer to the How to Apply section of the COPS Application Guide. Please note that applicants must update or renew their CCR at least once per year to maintain an active status.

Does your agency have an active registration with the Central Contractor Registry?

☐ Yes ☒ No

If no, will your agency agree to have an active registration with the Central Contractor Registry before any COPS grant funding is awarded?

☒ Yes ☐ No

D. GNIS ID: 1622995

Please enter your Geographic Names Information System (GNIS) Identification Number. This is a unique ID assigned to all geographic entities by the U.S. Geological Survey. To look up your GNIS Feature ID, please go to the website: http://.geonames.usgs.gov/domestic/index.html. For more information about how to obtain a GNIS number, please refer to the How to Apply section of the CHRP Application Guide.

E. Law Enforcement Executive/Program Official Information:

For Law Enforcement Agencies: Enter the law enforcement executive's name and contact information. This is the highest ranking law enforcement official within your jurisdiction (e.g., Chief of Police, Sheriff, or equivalent).

Title: Sheriff

First Name: Jeff MI: Last Name: Fiers Suffix:

Agency Name: Mason County Sheriff's Department

Street Address 1: 302 N Delia

Street Address 2:

City: Ludington State: MI Zip: 49431

Telephone: 2318433475 Fax: 2318431814

Email:

Type of Agency: Sheriff

F. Government Executive/Financial Official Information:

For Government Agencies: Enter the government executive's name and contact information. This is the highest ranking official within your jurisdiction (e.g., Mayor, City Administrator, Tribal Chairman, or equivalent).

Title: Chairman

First Name: Thomas MI: Last Name: Posma Suffix:

Agency Name: Mason, County of

Street Address 1: 304 East Ludinton Avenue

Street Address 2:

City: Ludington State: MI Zip: 49431

Telephone: 2318437999 Fax: 2318431972

Email:

Type of Agency: County

SECTION 2: GENERAL AGENCY INFORMATION

A. General Applicant Information

Department of Justice

Enter your jurisdiction's Cognizant Federal Agency. A Cognizant Federal Agency, generally, is the federal agency from which your jurisdiction receives the most federal funding. Your Cognizant Federal Agency also may have been previously designated by the Office of Management and Budget.

2. Fiscal Year: 1/1/2009 to 12/31/2009 (mo/day/yr) Enter your jurisdiction's fiscal year.

3. Jurisdictional population as of the 2000 U.S. Census: 28274

☐ Check here if the jurisdictional population is not represented by U.S. Census figures (e.g., colleges, special agencies, school police departments, etc.). (If checked, skip Question 4 and go to Question 5)

4. Enter the total jurisdictional population as of the 2007 Census Estimate. The Census Estimate can be looked up in the American FactFinder at http://FactFinder.census.gov.

28763

5. If the jurisdictional population is not represented by U.S. Census figures, please indicate the size of the population in 2007:

Please indicate the source of this estimate:

6. Do officers have primary law enforcement authority for this entire jurisdictional population? [An agency with primary law enforcement authority is defined as the first responder to calls for service, and has ultimate and final responsibility for the prevention, detection, and/or investigation of crime within its jurisdiction.]

☒ Yes ☐ No

a) If NO, what is the actual population for which your department has primary law enforcement authority? For example, your service population may be the 2007 Census Estimate minus the population of the incorporated towns and cities that have their own police departments within your geographic boundaries.

B. Law Enforcement Agency Information

1. Enter the Current Fiscal Year Budgeted Sworn Force Strength:

Full-time: 20 Part-time: 0

The budgeted number of sworn officer positions is the number of sworn positions your agency has funded within its budget, including state, Bureau of Indian Affairs, and locally-funded vacancies. Do not include unfunded vacancies or unpaid/reserve officers.

2. Enter the Actual Sworn Force Strength as of the Date of This Application:

Full-time: 20 Part-time: 0

The actual number of sworn officer positions is the actual number of sworn positions employed by your agency as of the date of this application. Do not include funded but currently vacant positions or unpaid positions.

SECTION 3: CHRP PROGRAM REQUEST

Your agency may apply for COPS funds to use on or after the official grant award start date to hire new, additional officer positions (including filling existing unfunded vacancies) or rehire officers who have already been laid off, or are currently scheduled to be laid off on a future date, as a result of state, local or tribal budget reductions. Please base your application request on your agency's current anticipated needs for funding in these primary categories. Please also be mindful of the initial three-year grant period and your agency's ability to fill and retain the officer positions awarded, while following your agency's established hiring policies and procedures.

As described in detail in the CHRP Application Guide, it is imperative that applicants understand that the COPS statute nonsupplanting requirement mandates that CHRP funds may be used only to supplement (increase) a grantee's law enforcement budget for sworn officer positions and may not supplant (replace) state, local, or tribal funds that a grantee otherwise would have spent on officer positions if it had not received a CHRP award. This means that if your agency plans to:

(a) Hire new officer positions (including filling existing officer vacancies that are no longer funded in your agency's budget): It must hire these additional positions on or after the official grant award start date, above its current budgeted (funded) level of sworn officer positions, and otherwise comply with the nonsupplanting requirement as described in detail in the CHRP Application Guide and Grant Owner's Manual;

(b) Rehire officers who have already been laid off (at the time of application) as a result of state, local, or tribal budget cuts: It must rehire the officers on or after the official grant award start date, maintain documentation showing the date(s) that the positions were laid off and rehired, and otherwise comply with the nonsupplanting requirement as described in detail in the CHRP Application Guide and Grant Owner's Manual;

(c) Rehire officers who are (at the time of application) currently scheduled to be laid off on a future date as a result of state, local, or tribal budget cuts: It must continue to fund the officers with its own funds from the grant award start date until the date of the scheduled lay-off (for example, if the CHRP award start date is September 1 and the lay-off is scheduled for November 1, then the CHRP funds may not be used to fund the officers until November 1, the date of the scheduled lay-off), identify the number and date(s) of the scheduled lay-off(s) in this application [see below], maintain documentation showing the date(s) and reason(s) for the lay-off, and otherwise comply with the nonsupplanting requirement as described in detail in the CHRP Application Guide and Grant Owner's Manual. [Please note that as long as your agency can document the date that the lay-off(s) would occur if the CHRP funds were not available, it may transfer the officers to the CHRP funding on or immediately after the date of the lay-off without formally completing the administrative steps associated with a lay-off for each individual officer.]

Documentation that may be used to prove that scheduled lay-offs are occurring for local economic reasons that are unrelated to the availability of CHRP grant funds may include (but are not limited to) council or departmental meeting minutes, memoranda, notices, or orders discussing the lay-offs; notices provided to the individual officers regarding the date(s) of the lay-offs; and/or budget documents ordering departmental and/or jurisdiction-wide budget cuts. These records must be maintained with your agency's CHRP grant records during the grant period and for three years following the official closeout of the CHRP grant in the event of an audit, monitoring, or other evaluation of your grant compliance.

When completing the questions below, please base your responses on your agency's current (at the time of application) needs for funding in the three hiring categories (new hires, rehires of previously laid off officers, and rehiring officers who are scheduled to be laid off on a specific future date). CHRP grant awards will be made for officer positions requested in each of these three categories and recipients of CHRP awards are required to use awarded funds for the specific categories awarded.

During the review of your agency's application, if the COPS Office reduces the number of positions you requested in the application, the COPS Office may contact you to obtain a new number of officer positions requested in each category.

How many CHRP sworn officer positions is your agency requesting (total)? 1

How many of the positions will be:

(a) To hire new, additional officer positions (including to fill existing vacancies that are no longer funded in your agency's budget)?

1

(b) To rehire officers who have already been laid off (at the time of application) as a result of state, local, or tribal budget reductions?

0

(c) To rehire officers who are (at the time of application) currently scheduled to be laid off on a specific future date as a result of state, local, or tribal budget reductions?

0 (# Positions)

Date of the scheduled lay-off for these officers

If your agency has planned multiple future lay-off dates, please use the additional space below:

(# Positions)

Date of the scheduled lay-off for these officers

(# Positions)

Date of the scheduled lay-off for these officers

Special Reminder for Rehired Officers:

The CHRP program awards funding based on your agency's entry-level salary and benefits package. Any additional (higher than entry-level) salary and benefits expenses for rehired officers must be paid by your agency.

Certification Regarding Scheduled Lay-Offs:

If your agency plans to use CHRP funds to rehire officers who are currently scheduled to be laid off on a future date (under category c above), please certify (by checking the appropriate boxes) to the following:

Certification:

- ☐ My agency has and will maintain documentation showing the date(s) of the scheduled lay-off(s) and demonstrating that the scheduled lay-off(s) is/are occurring for fiscal reasons that are unrelated to the availability or receipt of CHRP grant funds (as described above).
- ☐ My agency will use its own funds to continue funding these officers until the scheduled date(s) of the lay-off(s) and will use CHRP funds to rehire these officers only on or after the scheduled date of the lay-off(s).
- ☐ My agency recognizes that the CHRP program provides funding based on our entry-level salary and benefits package and that any additional costs for rehired officers beyond entry-level are our responsibility to pay with other sources of funding.

If an applicant receives an award, and after receiving the awards needs to change the hiring categories, it must request a post-award grant modification to change the categories of hiring and receive prior approval before spending CHRP funding by calling the COPS Office Response Center at 1-800-421-6770.

The American Recovery and Reinvestment Act (Recovery Act) requires grantees to report their financial and programmatic progress within 10 days after the end of each calendar quarter. The Recovery Act reporting requirements are in addition to quarterly financial status report and quarterly programmatic progress report requirements. The COPS Office plans to request information from grantees consistent with Section 1512 of the Recovery Act, including collecting information on the number of new jobs created and the number of jobs preserved using CHRP funding. Awarded agencies will be required to submit information in a timely manner as a condition of the award. The COPS Office is then required to post data from grantee reports to Recovery.gov. Please be advised that the submission of programmatic and financial reports on a timely basis is a significant condition of the CHRP grant and a violation of the grant requirement may result in termination of grant funding or other remedies.

In order to aid in compliance with the reporting requirements, awarded agencies should be prepared to track and report CHRP funding separately from other funding sources (including other COPS and federal grants) to ensure accurate financial and programmatic reporting on a timely basis. Your agency should ensure that you have financial internal controls in place to monitor the use of CHRP funding and ensure that its use is consistent with grant terms and conditions. Good practices in this area would include written accounting practices, an accounting system that tracks all drawdowns and grant expenditures, and the ability to track when each CHRP position funded is filled or vacant (including if the position was for a new hire or a re-hire).

SECTION 4: NEED FOR FEDERAL ASSISTANCE

1) Enter your law enforcement agency's total operating budget for the current AND previous two fiscal years.

CURRENT FISCAL YEAR (2009)	$3,969,900.00
PREVIOUS FISCAL YEAR (2008)	$4,352,150.00
PREVIOUS FISCAL YEAR (2007)	$4,102,200.00

2) Enter the total jurisdictional (city, county, state, tribal) operating budget for the current AND previous two fiscal years.

CURRENT FISCAL YEAR (2009)	$25,291,825.00
PREVIOUS FISCAL YEAR (2008)	$26,680,650.00
PREVIOUS FISCAL YEAR (2007)	$25,824,200.00

3) Enter the total jurisdictional (city, county, state, tribal) locally generated revenues for the current AND previous two fiscal years. Locally generated revenues may include locally generated property taxes, sales taxes and other taxes and revenue sources (for example, transportation taxes, transient lodging taxes, licensing fees, other non-property taxes and franchise taxes).

CURRENT FISCAL YEAR (2009)	$22,010,450.00
PREVIOUS FISCAL YEAR (2008)	$22,249,368.00
PREVIOUS FISCAL YEAR (2007)	$20,074,257.00

4) Enter the total jurisdictional (city, county, state, tribal) general fund balance for the current and previous two fiscal years.

CURRENT FISCAL YEAR (2009)	$2,482,935.00
PREVIOUS FISCAL YEAR (2008)	$2,482,935.00
PREVIOUS FISCAL YEAR (2007)	$2,367,553.00

5) Since January 1, 2008, what percentages of the following employees in your jurisdiction (city, county, state, tribal) have been reduced through lay-offs:

Civilian Law Enforcement Agency Personnel	0.00 %
Sworn Law Enforcement Agency Personnel	0.00 %
Other Government Agency Personnel	0.00 %

6) Since January 1, 2008, what percentages of the following employees in your jurisdiction (city, county, state, tribal) have been reduced through furloughs that have lasted or are scheduled to last a minimum of forty hours over the course of a fiscal year:

Civilian Law Enforcement Agency Personnel	0.00 %
Sworn Law Enforcement Agency Personnel	0.00 %
Other Government Agency Personnel	0.00 %

7) Since January 1, 2008 what percentages of the following employees in your jurisdiction (city, county, state, tribal) have been reduced due to official policies that limit your jurisdiction's ability to fill vacancies (i.e., hiring freezes):

Civilian Law Enforcement Agency Personnel	0.00 %
Sworn Law Enforcement Agency Personnel	0.00 %
Other Government Agency Personnel	0.00 %

8) The U.S. Census Bureau American Community Survey (ACS) provides multi-year poverty rate estimates for communities. For jurisdictions with a Census population greater than 20,000, please go to the U.S. Census Bureau's American FactFinder (http://FactFinder.census.gov) to determine the percent of families in poverty in your jurisdiction based on the 2005-2007 ACS. For jurisdictions below 20,000 in population or not represented in the U.S. Census, please select the nearest best match for your jurisdiction (for example, the county in which your jurisdiction is located). Please see the CHRP Application Guide for additional information and help in using the American FactFinder.

Percent of families in poverty 11.40 %

9) The Bureau of Labor Statistic's' Local Area Unemployment Statistics (LAUS) program provides monthly estimates of unemployment for communities. Please go to the Bureau of Labor Statistics' LAUS website: (www.bls.gov/lau/data.htm) to find detailed instructions for looking up your local area's unemployment rate. As with the previous question, it may be necessary to select the nearest best match to your jurisdiction (for example, a city of fewer than 25,000 people may report their county level rate). Please see the CHRP Application Guide for additional information and help in using the LAUS data.

Percentage unemployed for January 2009 14.20 %

Percentage unemployed for January 2008 9.50 %

10) Indicate your jurisdiction's estimated residential property foreclosure rate for calendar year 2008. This rate should be calculated as the total number of new default and auction foreclosure filings and new bank-owned foreclosures (REOs) in 2008 divided by the total number of residential households.

0.00 %

☒ Check here if the information necessary to calculate this rate is unavailable.

11) Indicate if your jurisdiction has experienced any of the following events since January 1, 2008:

☐ Military base closure or realignment.

☐ A declaration of natural or other major disaster or emergency has been made pursuant to the Robert T. Stafford Disaster Relief and Emergency Assistance Act. (42 U.S.C. 5121 et seq.)

☐ A declaration as an economically or financially distressed area by the state in which the applicant is located.

☐ Downgrading of the applicant's bond rating by a major rating agency.

☐ Has filed for or been declared bankrupt by a court of law.

☐ Has been placed in receivership or its functional equivalent by the state or federal government.

12) Indicate if, since January 1, 2008, your jurisdiction has experienced an unplanned, non-recurring, capital outlay or unanticipated loss of revenue that has had a significant negative impact on your jurisdiction's fiscal health.

☐ Yes ☒ No

12a) If YES, please express the cost of this event as a percentage of your total current operating budget

0.00 % and please describe the event (please limit to 350 characters):

13) Using UCR crime definitions enter the actual number of incidents reported to your jurisdiction in calendar year 2008 for the following crime types:

Criminal Homicide:	0
Forcible Rape:	23
Robbery:	3
Aggravated Assault:	23
Burglary:	101
Larceny (except motor vehicle theft):	188
Motor Vehicle Theft:	8

*Note: If your agency currently reports to NIBRS, or does not report crime incident totals at all, please ensure that your data is converted to UCR Summary Data style. Please see the CHRP Application Guide or the FBI's UCR Handbook (www.fbi.gov/ucr/handbook/ucrhandbook04.pdf) for more information.

SECTION 5: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Proposed Community Policing Plan

COPS grants must be used to initiate or enhance community policing activities. Please complete the following questions to describe the types of community policing activities that will result from CHRP funding. You may find more detailed information about community policing at the COPS Office web site http://www.cops.usdoj.gov/Default.asp?Item=36.

Community Partnerships

Community partnerships are on-going collaborative relationships between the law enforcement agency and the individuals and organizations they serve to both develop solutions to problems and increase trust in the police.

My agency:

P1) Regularly distributes relevant crime and disorder information to community members.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☐ b) does not currently do, and plans to initiate under this grant
- ☒ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

P2) Routinely seeks input from the community to identify and prioritize neighborhood problems (e.g., through regularly scheduled community meetings, annual community surveys, etc.).

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

P3) Regularly collaborates with other local government agencies that deliver public services.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☐ b) does not currently do, and plans to initiate under this grant
- ☒ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

P4) Regularly collaborates with non-profit organizations and/or community groups.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☐ b) does not currently do, and plans to initiate under this grant
- ☒ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

P5) Regularly collaborates with local businesses.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☐ b) does not currently do, and plans to initiate under this grant
- ☒ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

P6) Regularly collaborates with informal neighborhood groups and resident associations.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

Problem Solving

Problem solving is an analytical process for systematically 1) identifying and prioritizing problems, 2) analyzing problems, 3) responding to problems, and 4) evaluating problem solving initiatives. Problem solving involves an agency-wide commitment to go beyond traditional police responses to crime to proactively address a multitude of problems that adversely affect quality of life.

My agency:

PS1) Routinely incorporates problem-solving principles into patrol work.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

PS2) Identifies and prioritizes crime and disorder problems through the routine examination of patterns and trends involving repeat victims, offenders, and locations.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

PS3) Routinely explores the underlying factors and conditions that contribute to crime and disorder problems.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

PS4) Systematically tailors responses to crime and disorder problems to address their underlying conditions.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

PS5) Regularly conducts assessments to determine the effectiveness of responses to crime and disorder problems.

- ☐ a) does not currently do, and has no plans to implement under this grant
- ☒ b) does not currently do, and plans to initiate under this grant
- ☐ c) currently does, and plans to continue doing under this grant
- ☐ d) currently does, and plans to expand/enhance under this grant

Organizational Transformation

Organizational transformation is the alignment of organizational management, structure, personnel and information systems to support community partnerships and proactive problem-solving efforts.

My agency:

OC1) Incorporates community policing principles into the agency's mission statement and strategic plan.

- [ ] a) does not currently do, and has no plans to implement under this grant
- [ ] b) does not currently do, and plans to initiate under this grant
- [x] c) currently does, and plans to continue doing under this grant
- [ ] d) currently does, and plans to expand/enhance under this grant

OC2) Practices community policing as an agency-wide effort involving all staff (i.e., not solely housed in a specialized unit).

- [ ] a) does not currently do, and has no plans to implement under this grant
- [x] b) does not currently do, and plans to initiate under this grant
- [ ] c) currently does, and plans to continue doing under this grant
- [ ] d) currently does, and plans to expand/enhance under this grant

OC3) Incorporates problem-solving and partnership activities into personnel performance evaluations.

- [x] a) does not currently do, and has no plans to implement under this grant
- [ ] b) does not currently do, and plans to initiate under this grant
- [ ] c) currently does, and plans to continue doing under this grant
- [ ] d) currently does, and plans to expand/enhance under this grant

Community Policing Plan Narrative (please limit to 2,000 characters)

Please describe your agency's implementation plan for this program (if awarded), with specific reference to each of the following elements of community policing: (a) community partnerships and support, including consultation with community groups, private agencies, and/or other public agencies; (b) related governmental and community initiatives that complement your agency's proposed use of CHRP funding; and (c) organizational transformation – how your agency will use these funds, if awarded, to reorient its mission to community policing or enhance its involvement in and commitment to community policing. This narrative will not be scored for selection purposes but serves, along with the previous questions, as your agency's community policing plan. Your organization may be audited or monitored to ensure that it is initiating or enhancing community policing in accordance with this plan. The COPS Office may also use this information to understand the needs of the field, and potentially provide for training, technical assistance, problem solving and community policing implementation tools.

If your organization receives this CHRP grant funding, these responses will be considered as your organization's community policing plan. We understand that your community policing needs may change during the life of your CHRP grant (if awarded), and minor changes to this plan may be made without prior approval of the COPS Office. We also recognize that this plan may incorporate a broad range of possible community policing strategies and activities, and that your agency may implement particular community policing strategies from the plan on an as-needed basis throughout the life of the grant. If your agency's community policing plan changes significantly, however, you must submit those changes in writing to the COPS Office for approval. Changes are "significant" if they deviate from the range of possible community policing activities identified and approved in this original community policing plan submitted with your application.

CP1) To what extent is there community support in your jurisdiction for implementing the proposed grant activities?

- [ ] a) Minimal support
- [x] b) Moderate support
- [ ] c) High level of support

CP2) If awarded, to what extent will the grant activities impact the other components of the criminal justice system in your jurisdiction?

- [ ] a) Potentially increased burden
- [x] b) No change in burden
- [ ] c) Potentially decreased burden

SECTION 6: CONTINUATION OF PROJECT AFTER FEDERAL FUNDING ENDS

Applicants must plan to retain all sworn officer positions awarded under the CHRP grant for a minimum of 12 months at the conclusion of 36 months of federal funding for each position. The retained CHRP-funded positions should be added to your agency's law enforcement budget with state and/or local funds at the end of grant funding, over and above the number of locally-funded sworn officer positions that would have existed in the absence of the grant. At the time of grant application, applicants must affirm that they plan to retain the positions and identify the planned source(s) of retention funding. We understand that your agency's source(s) of retention funding may change during the life of the grant. Your agency should maintain proper documentation of any changes in the event of an audit, monitoring or other evaluation of your grant compliance. Please refer to the frequently asked questions on retention which can be found here http://www.cops.usdoj.gov/Default.asp?Item=2115.

Has your agency planned to retain all additional sworn officer positions under this grant for a minimum of 12 months at the conclusion of 36 months of federal funding for each position?

- [x] Yes
- [ ] No

Please identify the source(s) of funding that your agency plans to utilize to cover the costs of retention from the drop-down box listed below:

- [x] General funds
- [ ] Raise bond/tax issue
- [ ] Asset forfeiture funds
- [ ] Private sources/donations
- [ ] Fundraising efforts
- [ ] Other (Please provide a brief description of the source(s) of funding not to exceed 75 words.)

Section 7: Budget Detail Worksheets

Instructions:

This worksheet will assist your agency in reporting your agency's current entry-level salary and benefits costs and identifying your agency's total three-year salary and benefits request per officer position. Please list the current entry-level base salary and fringe benefits rounded to the nearest whole dollar for one full-time sworn officer position within your agency. Do not include employee contributions.

Please complete the budget worksheet(s) based on your agency's current annual first year entrylevel salary and benefit package for your locally-funded officer positions. Please be advised that CHRP funding must only pay for entry-level salaries and benefits. Any additional costs incurred for higher than entry-level salaries and benefits for officers hired under the CHRP grant will be your agency's responsibility.

Note: Part-time positions will not be funded

Please refer to the CHRP Application Guide for additional information.

A. SWORN OFFICER POSITIONS

Instructions: Please complete the questions below based on your agency's current first year entry-level salary and benefits package for your locally-funded officers. [You will be asked to project Year 2 and Year 3 increases below.]

Part 1: Full-Time Sworn Officer Information

A . Current First Year Entry-Level Base Salary for One Sworn Officer Position $38,591.00

Please calculate the fringe benefit costs below based on the first year entry-level benefits for one sworn officer position.

B . FRINGE BENEFITS:	Cost:	% OF BASE:	ADDITIONAL INFORMATION:	
Social Security	**$2,393.00**	**6.20 %**	**Exempt:**	**Fixed:**

Cannot exceed 6.2% of Total Base Salary. If less than 6.2%, exempt, or fixed rate, provide an explanation in "Part 2: Full-Time Sworn Officer Information".

Medicare	**$560.00**	**1.45 %**	**Exempt:**	**Fixed:**

Cannot exceed 1.45% of Total Base Salary. If less than 1.45%, exempt, or fixed rate, provide an explanation in the "Sworn Officer Position Budget Summary."

Health Insurance	**$14,962.00**	**38.77 %**		
Life Insurance	**$132.00**	**0.34 %**		
Vacation	**$0.00**	**0.00 %**	**Number of Hours Annually:**	**80**
Sick Leave	**$0.00**	**0.00 %**	**Number of Hours Annually:**	**96**
Retirement	**$7,853.00**	**20.35 %**		
Worker's Compensation	**$791.00**	**2.05 %**	**Exempt:**	
Unemployment Insurance	**$0.00**	**0.00 %**	**Exempt:**	

Other	**Dental Insurance**	**Cost:**	**$1,200.00**
Describe:		**% of Base:**	**3.11 %**
Other		**Cost:**	
Describe:		**% of Base:**	**0.00 %**
Other		**Cost:**	
Describe:		**% of Base:**	**0.00 %**

Total Current First Year Entry-Level Benefits for One Sworn Officer Position	$27,891.00
C . Total Year 1 Salary + Total Year 1 Benefits	$66,482.00

Based on the current first year full-time entry-level salaries and fringe benefits, please project Year 2 and Year 3 increases and use these figures to calculate the full three-year salary and benefits amounts per sworn officer position that you are requesting through the CHRP grant.

Your agency must maintain records documenting how it calculated its Year 2 and Year 3 projections (and, accordingly, its total three-year salary and benefits amounts per officer position) in its CHRP grant records throughout the grant period and for three years following the official closeout of the COPS grant in the event of an audit, monitoring, or other evaluation of your grant compliance.

Year 2

Total Year 2 entry-level salary for one sworn officer position:	$40,563.00
Total Year 2 entry-level benefits for one sworn officer position:	$33,991.00

Year 3

Total Year 3 entry-level salary for one sworn officer position:	$42,472.00
Total Year 3 entry-level benefits for one sworn officer position:	$37,247.00

Total Three -Year Salary for one officer position:	$121,626.00
X Number of Sworn Positions Requested:	1
Total Three -Year Salary Project Cost =	$121,626.00
Total Three- Year Benefits for one officer position:	$99,129.00
X Number of Sworn Positions Requested:	1
Total Three -Year Benefits Project Cost =	$99,129.00
Total Three -Year Salary and Benefits for one Officer: Position:	$220,755.00
X Number of Sworn Positions Requested:	1
Total Project Cost =	$220,755.00

Part 2: Full-Time Sworn Officer Information

After completing Part 1 of this budget worksheet, answer the following questions. Be sure to answer EVERY question. Missing or erroneous information could delay the review of your agency's request.

1. If your agency's second and/or third-year costs for salaries and/or fringe benefits increase after the first year, check the reason(s) why in the space below:

- [x] Cost of living adjustment (COLA)
- [x] Step raises
- [x] Change in benefit costs
- [ ] Other - please explain briefly:

2. If an explanation is required for any of the following categories, please provide in the space below:

1) Social Security:

2) Medicare:

BUDGET SUMMARY

Budget Category	Category Total	Line #
A. Sworn Officer Positions	**$220,755.00**	**1**
Total Project Amount:	**$220,755.00**	
Total Federal Share Amount:	**$220,755.00**	

Contact Information for Budget Questions

Please provide contact information of the financial official that the COPS Office may contact with questions related to your budget submission.

Authorized Official's Typed Name:

First Name: Fabian

Last Name: Knizacky

Title: County Administrator

Phone: 231-843-7999

Email:

SECTION 8: ASSURANCES

Several provisions of federal law and policy apply to all grant programs. The Office of Community Oriented Policing Services needs to secure your assurance that the applicant will comply with these provisions. If you would like further information about any of these assurances, please contact your state's COPS Grant Program Specialist at (800) 421-6770.

By the applicant's authorized representative's signature, the applicant assures that it will comply with all legal and administrative requirements that govern the applicant for acceptance and use of federal grant funds. In particular, the applicant assures us that:

1. It has been legally and officially authorized by the appropriategoverning body (for example, mayor or city council) to apply for this grant and that the persons signing the application and these assurances on its behalf are authorized to do so and to act on its behalf with respect to any issues that may arise during processing of this application.
2. It will comply with the provisions of federal law, which limit certain political activities of grantee employees whose principal employment is in connection with an activity financed in whole or in part with this grant. These restrictions are set forth in 5 U.S.C. § 1501 ,et seq.
3. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act, if applicable.
4. It will establish safeguards, if it has not done so already, to prohibit employees from using their positions for a purpose that is, or gives the appearance of being, motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business or other ties.
5. It will give the Department of Justice or the Comptroller Generalaccess to and the right to examine records and documents related to the grant.
6. It will comply with all requirements imposed by the Department of Justice as a condition or administrative requirement of the grant, including but not limited to: the requirements of 28 CFR Part 66 and 28 CFR Part 70 (governing administrative requirements for grants and cooperative agreements); 2 CFR Part 225 (OMB Circular A-87), 2 CFR 220 (OMB Circular A-21), 2 CFR Part 230 (OMB Circular A-1 22) and 48 CFR Part 31.000, et seq. (FAR 31.2) (governing cost priniciples); OMB Circular A-1 33 (governing audits) and other applicable OMB circulars; the applicable provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended; 28 CFR Part 38.1; the current edition of the COPS Grant Monitoring Standards and Guidelines; the applicable COPS Grant Owners Manuals; and with all other applicable program requirements, laws,orders, regulations, or circulars.
7. If applicable, it will, to the extent practicable and consistent with applicable law, seek, recruit and hire qualified members of racial and ethnic minority groups and qualified women in order to further effective law enforcement by increasing their ranks within the sworn positions in the agency.
8. It will not, on the ground of race, color, religion, national origin, gender, disability or age, unlawfully exclude any person from participation in, deny the benefits of or employment to any person, or subject any person to discrimination in connection with any programs or activities funded in whole or in part with federal funds. These civil rights requirements are found in the non-discrimination provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 U.S.C. § 3789d); Title VI of the Civil Rights Act of 1964, as amended (42 U.S.C. § 2000d); the Indian Civil Rights Act (25 U.S.C. §§ 1301-1303); Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794); Title II, Subtitle A of the Americans with Disabilities Act (ADA) (42 U.S.C. § 12101, et seq.); the Age Discrimination Act of 1975 (42 U.S.C. § 6101, et seq.); and Department of Justice Non-Discrimination Regulations contained in Title 28, Parts 35 and 42 (subparts C, D, E and G) of the Code of Federal Regulatins. A. In the event that any court or administrative agency makes a finding of discrimination on grounds of race, color, religion, national origin, gender, disability or age against the applicant after a due process hearing, it agrees to forward a copy of the finding to the Office of Civil Rights, Office of Justice Programs, 810 7th Street, NW, Washington, D.C. 20531. B. If your organization has received an award for $500,000 or more and has 50 or more employees, then it has to prepare an EEOP and submit it to the Office for Civil Rights ("OCR"), Office of Justice Programs, 810 7th Street, N.W., Washington, DC 20531, for review within 60 days of the notification of the award. If your organization received an award between $25,000 and $500,000 and has 50 or more employees, your organization still has to prepare an EEOP, but it does not have to submit the EEOP to OCR for review. Instead, your organization has to maintain the EEOP on file and make it available for review on request. In addition, your organizatinhas to complete Section B of the Certification Form and return it to OCR. If your organization received an award for less than $25,000; or if your organization has less than 50 employees, regardless of the amount of the award; or if your organization is a medical institution, educational institution, nonprofit organization or Indian tribe, then your organization is exempt from the EEOP requirement. However, your organization must complete Section A of the Certification Form and return it to OCR.
9. Pursuant to Department of Justice guidelines (June 18, 2002 Federal Register (Volume 67, Number 117, pages 41455-41472)), under Title VI of the Civil Rights Act of 1964, it will ensure meaningful access to its programs and activities by persons with limited English proficiency.
10. It will ensure that any facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify us if advised by the EPA that a facility to be used in this grant is under consideration for such listing by the EPA.
11. If the applicant's state has established a review and comment procedure under Executive Order 12372 and has selected this program for review, it has made this application available for review by the state Single Point of Contact.
12. It will submit all surveys, interview protocols, and other information collections to the COPS Office for submission to the Office of Management and Budget for clearance under the Paperwork Reduction Act of 1995 if required.
13. It will comply with the Human Subjects Research Risk Protections requirements of 28 CFR Part 46 if any part of the funded project contains non-exempt research or statistical activities which involve human subjects and also with 28 CFR Part 22, requiring the safeguarding of individually identifiable information collected from research participants.

14. Pursuant to Executive Order 13043, it will enforce on-the-job seat belt policies and programs for employees when operating agency-owned, rented or personally-owned vehicles.
15. It will not use COPS funds to supplant (replace) state, local, or Bureau of Indian Affairs funds that otherwise would be made available for the purposes of this grant, as applicable.
16. If the awarded grant contains a retention requirement, it will retain the increased officer staffing level and/or the increased officer redeployment level, as applicable, with state or local funds for a minimum of 12 months following expiration of the grant period.
17. It will not use any federal funding directly or indirectly to influence in any manner a Member of Congress, a jurisdiction, or an official of any government, to favor, adopt, or oppose, by vote or otherwise, any legislation, law ratification, policy or appropriation whether before or after the introduction of any bill, measure, or resolution proposing such legislation, law, ratification, policy or appropriation as set forth in the Anti- Lobby Act, 18 U.S.C. 1913.
18. In the event that a portion of grant reimbursements are seized to pay off delinquent federal debts through the Treasury Offset Program or other debt collection process, it agrees to increase the non-federal share (or, if the awarded grant does not contain a cost sharing requirement, contribute a non-federal share) equal to the amount seized in order to fully implement the grant project.

I certify that the assurances provided are true and accurate to the best of my knowledge.

Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

[X] By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Sheriff Jeff Fiers	4/13/2009
Typed Name of Law Enforcement Executive (or Official with Programmatic Authority, as applicable)	Date

[X] By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Thomas Posma	4/13/2009
Typed Name of Government Enforcement Executive (or Official with Financial Authority, as applicable)	Date

SECTION 9: CERTIFICATIONS

Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; Drug-Free Workplace Requirements Coordination with Affected Agencies.

Although the Department of Justice has made every effort to simplify the application process, other provisions of federal law require us to seek your agency's certification regarding certain matters. Applicants should read the regulations cited below and the instructions for certification included in the regulations to understand the requirements and whether they apply to a particular applicant. Signing this form complies with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying," 2 CFR Part 2867, "Government-Wide Debarment and Suspension (Nonprocurement),” 28 CFR Part 83 Government-Wide Requirements for Drug-Free Workplace (Grants)," and the coordination requirements of the Public Safety Partnership and Community Policing Act of 1994. The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.1. Lobbying As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over $100,000, as defined at 28 CFR Part 69, the applicant
certifies that: A. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the making of any federal grant; the entering into of any cooperative agreement; and the extension, continuation, renewal, amendment or modification of any federal grant or cooperative agreement; B.If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions; C. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.
2. Debarment, Suspension and Other Responsibility Matters (Direct Recipient) As required by Executive Order 12549, Debarment and Suspension, and implemented at 2 CFR Part 2867, for prospective participants in primary covered transactions, as defined at 2 CFR Part 2867, Section 2867.437 - A. The applicant certifies that it and its principals: (i) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department or agency; (ii) Have not within a three-year period preceding this application been convicted of or had a civi l judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) or private agreement or transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion or receiving stolen property, making false claims, or obstruction of justice, or commission of any offense indicating a lack of business integrity or business honesty that seriously and directly affects your present responsibility. (iii) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (A)(ii) of this certification; and (iv) Have not within a three-year period preceding this application had one or more public transactions (federal, state or local) terminated forcause or default; and B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.
3. Drug-Free Workplace (Grantees Other Than Individuals) As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 83, for grantees, as defined at 28 CFR Part 83, Sections 83 and 83.510 - A. The applicant certifies that it will, or will continue to, provide a drugfree workplace by: (i) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and speci fying the actions that will be taken against employees for violation of such prohibition; (ii) Establishing an on-going drug-free awareness program to inform employees about - (a) The dangers of drug abuse in the workplace; (b) The grantee's policy of maintaining a drug-free workplace; (c) Any available drug counseling, rehabilitation and employee assistance programs; and (d) The penalties that may be imposed upon employees for drug-abuse violations occurring in the workplace; (iii) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (i); (iv) Notifying the employee in the statement required by paragraph (i) that, as a condition of employment under the grant, the employee will - (a) Abide by the terms of the statement; and (b) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(v) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (iv)(b) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: COPS Office, 1100 Vermont Ave., NW, Washington, D.C. 20530. Notice shall include the identification number(s) of each affected grant. (vi) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (iv)(b), with respect to any employee who is so convicted - (a) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (b) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state or local health, law enforcement or other appropriate agency; (vii) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (i), (ii), (iii), (iv), (v) and (vi). B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of performance (street address, city, county, state, zip code)

☐ Check if there are workplaces on file that are not identified here.

4. Coordination

The Public Safety Partnership and Community Policing Act of 1994 requires applicants to certify that there has been appropriate coordination with all agencies that may be affected by the applicant's grant proposal if approved. Affected agencies may include, among others, the Office of the United States Attorney, state or local prosecutors, or correctional agencies. The applicant certifies that there has been appropriate coordination with all affected agencies.

Grantee Agency Name and Address:

Mason County Sheriff's Department

Grantee IRS/ Vendor Number:

False statements or claims made in connection with COPS grants (including cooperative agreements) may result in fines, imprisonment, disbarment from participating in federal grants or contracts, and/or any other remedy available by law.

I certify that the assurances provided are true and accurate to the best of my knowledge.

Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

☒ By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Sheriff Jeff Fiers — 4/13/2009

Typed Name of Law Enforcement Executive (or Official with Programmatic Authority, as applicable) — Date

☒ By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Thomas Posma — 4/13/2009

Typed Name of Government Executive (or Official with Programmatic Authority, as applicable) — Date

SECTION 10: Disclosure of Lobbying Activities

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District number, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans and loan commit
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFPD E-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting registrant identified in item 4 to influence the covered Federal action.
(b) Enter the full name(s) of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title and telephone number.
Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

Disclosure of Lobbying Activities

MI53153

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Not Applicable X **If not applicable, then entire form, including signature area is grayed-out**

1. Type of Federal Action:		2. Status of Federal Action:	3. Report Type
☐ contract	☐ loan	☒ bid/offer/application	☒ initial filing
☒ grant	☐ loan guarantee	☐ initial award	☐ material change
☐ cooperative agreement	☐ loan insurance	☐ post-award	*For Material Change Only:*
			Year: *Quarter:*
			Date of Report:

4. Name and Address of Reporting

Entity: Prime & Subawardee

Tier , if known:

Congressional District (#), if known

5. If Reporting Entity in No. 4 is Subawardee, Enter

Name and Address of Prime:

Congressional District (number), if known:

6. Federal Department/Agency:

USDOJCOPS

7. Federal Program Name/Description:

CFDA Number, if applicable: **16.710**

8. Federal Action Number, if known:

9. Award Amount, if known:

10. a. Name and Address of Lobbying

(if individual, last name, first name, MI):

Registrant

10. b. Individuals Performing Services

(including address if different from No.1 0a) (last name, first name, MI):

11. Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Typed Name:

Title:

Phone: Date:

Federal Use Only: Authorized for Local Reproduction, Standard Form - LLL

SECTION 11: CERTIFICATION OF REVIEW AND REPRESENTATION OF COMPLIANCE WITH REQUIREMENTS

The signatures of the Law Enforcement Executive/Program Official and Government Executive/Financial Official, and any applicable program partners on the Certification of Review and Representation of Compliance with Requirements:

1) Assures the COPS Office that the applicant will comply with all legal, administrative, and programmatic applicant for acceptance and use of federal funds as outlined in the applicable COPS Application Guide; AND
2) Attests to the accuracy of the information submitted with this application (including the Budget Detail Worksheets).

The signatures on this application must be made by the actual executives named on this application unless there is an officially documented authorization for a delegated signature. If your jurisdiction has such an official document, it must be attached to this application. Applications with missing, incomplete, or inaccurate signatories or responses may not be considered for funding.

Signatures shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

Please be advised that a hold may be placed on this application if it is deemed that the applicant agency is not in compliance with federal civil rights laws, and/or is not cooperating with an ongoing federal civil rights investigation, and/or is not cooperating with a COPS Office compliance investigation concerning a current grant award.

Person Submitting this Application

☒ By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Please type your name here in place of your signature: Robert Brown

Law Enforcement Executive

☒ By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Please type your name here in place of your signature: Sheriff Jeff Fiers

Government Executive

☒ By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Please type your name here in place of your signature: Thomas Posma