

RESOLUTION NO. 16-2023

Introduced by Monty Tapp

A RESOLUTION RATIFYING A GRANT APPLICATION SUBMISSION BY THE HURON FIRE DEPARTMENT TO THE ASSISTANCE TO FIREFIGHTER GRANT PROGRAM IN THE AMOUNT OF ONE HUNDRED FIFTY-FOUR THOUSAND ONE HUNDRED FORTY-EIGHT AND 91/100 DOLLARS (\$154,148.91); AND FURTHER AUTHORIZING THE CITY MANAGER TO ACCEPT THE GRANT AWARD IN AN AMOUNT NOT TO EXCEED ONE HUNDRED FIFTY-FOUR THOUSAND ONE HUNDRED FORTY-EIGHT AND 91/100 (\$154,148.91) AND ENTER INTO AN AGREEMENT WITH THE ASSISTANCE TO FIREFIGHTER GRANT PROGRAM, SHOULD THE APPLICATION BE SUCCESSFUL.

WHEREAS, The City of Huron Fire Department desires to utilize funding opportunities available through the Assistance to Firefighter Grant (AFG) Program to obtain potential funding to be used for equipment replacement;

WHEREAS, the City submitted an application to AFG requesting funding for replacement of an outdated bunker gear and a fit tester at a cost of \$161,856.36, which includes the required 5% local match. The total equipment cost less the 5% local match brings the total funds requested to \$154,148.91; and

WHEREAS, the City staff believes making application for these grant funds is proper and beneficial to the City.

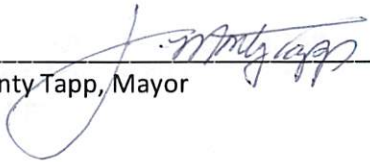
NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF HURON, OHIO:

SECTION 1. That the City Manager's approval of the submission of an Assistance to Firefighter Grant (AFG) application by the Huron Fire Department for potential grant funding to be used for equipment replacement in the amount of One Hundred Fifty-Four Thousand, One Hundred Forty-Eight and 91/100 Dollars (\$154,18.91) is hereby ratified.

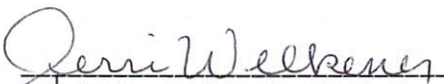
SECTION 2. That if grant funds are awarded, authorization is given to the City Manager to execute any necessary contract with the Assistance to Firefighter Grant Program to be eligible for funding under the program, accept the grant award of up to One Hundred Fifty-Four Thousand One Hundred Forty-Eight and 91/100 Dollars (\$154,148.91), and to obligate the funds required to meet the matching requirements of the program in an amount not to exceed Seven Thousand Seven Hundred Seven and 45/100 Dollars (\$7,707.45).

SECTION 3: That this Council hereby finds and determines that all formal actions relative to the adoption of this Resolution were taken in an open meeting of the Council and that all deliberations of this Council and of its committees, if any, which resulted in formal action, were taken in meetings open to the public in full compliance with applicable legal requirements, including O.R.C. §121.22 of the Revised Code.

SECTION 4: This Resolution shall be in full force and effect from and immediately following its adoption.



Monty Tapp, Mayor

ATTEST: 

Clerk of Council

ADOPTED: 28 FEB 2023

System for Award Management (SAM.gov) profile

Please identify your organization to be associated with this application.

All organization information in this section will come from the System for Award Management (SAM) profile for that organization.

CITY OF HURON

Information current from SAM.gov as of:	02/06/2023
UEI-EFT:	MXDXG54EB917
DUNS (includes DUNS+4):	831422225
Employer Identification Number (EIN):	346400671
Organization legal name:	CITY OF HURON
Organization (doing business as) name:	
Mailing address:	417 MAIN STREET HURON, OH 44839-1652
Physical address:	417 MAIN ST HURON, OH 44839-1652
Is your organization delinquent on any federal debt?	N
SAM.gov registration status:	Active as of 08/10/2022
✓ We have reviewed our bank account information on our SAM.gov profile to ensure it is up to date	

Applicant information

Please provide the following additional information about the applicant.

Applicant name	Huron Fire Department
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Main address of location impacted by this grant

Main address 1	417 Main Street
Main address 2	
City	Huron
State/territory	OH
Zip code	44839
Zip extension	0000

located? If you have more than one station, in what county/parish is your main station located?

Applicant characteristics

The Assistance to Firefighters Grants Program's objective is to provide funding directly to fire departments and nonaffiliated EMS organizations or a State Fire Training Academy for the purpose of protecting the health and safety of the public and first responder personnel against fire and fire-related hazards. Please review the Notice of Funding Opportunity Announcement (NOFO) for information on available program areas and for more information on the evaluation process and conditions of award.

Please provide the following additional information about the applicant.

Applicant type: **Fire Department/Fire District**

Is this grant application a regional request? A regional request provides a direct regional and/or local benefit beyond your organization. You may apply for a regional request on behalf of your organization and any number of other participating eligible organizations within your region. **No**

What kind of organization do you represent? **Combination (Majority Paid/Career)**

Does your department identify as a Paid-on-Call/Stipend department? **Yes**

What is the percentage of career members in your organization? **34**

How many active firefighters does your department have who perform firefighting duties? **43**

How many of your active firefighters are trained to the level of Firefighter I or equivalent? **1**

How many of your active firefighters are trained to the level of Firefighter II or equivalent? **41**

Are you requesting training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001? **No**

Which of the following standards does your organization meet regarding physicals? If physicals are not required then do not select any option. (optional)

☐ Meets NFPA or ISO standard

☐ Meets NFPA or ISO standard

☐ Other State Local standard

your plans to bring your membership up to Firefighter II.

training program with certified instructors. All duty personnel perform a minimum of two hours of training each shift worked. We host a department wide training each month following IFSTA guidelines for the appropriate subject. Current level of firefighters is 43 members total: (1) Firefighter - Level I (41) Firefighters - Firefighter Level II (1) Firefighter - State of Ohio Volunteer Level As a department that initially began as a volunteer only department, only two members remain certified below Firefighter II certification. We have encouraged all to become certified at the FF II level but have grandfathered those remaining members. We are aggressively working towards the goal of 100% of firefighters being FF II certified. We are not requesting training funds as HFD assumes all financial responsibility for training.

How many members in your department are trained to the level of EMR or EMT, Advanced EMT or Paramedic?

43

Does your department have a Community Paramedic program?

No

How many stations are operated by your department?

2

Does your organization protect critical infrastructure of the state?

Yes

Please describe the critical infrastructure protected below.

A critical infrastructure is any facility/business or place of significant importance that if compromised would lead directly to interruption of the daily activities of life and compromise economic viability. The Department of Homeland Security stated that there are sixteen critical infrastructure sectors whose assets are considered a necessity for our way of life. HFD has multiple infrastructure sectors within our jurisdiction that we are responsible for. The commercial sector includes (Tourism is a critical infrastructure in the area we serve): Cedar Point; America's Roller Coaster (mutual aid agreement) Kalahari Water Resort; one of the largest indoor water parks in the country with a 750 room hotel that boasts of 60% capacity year round and a convention center that can serve approximately 8,000 people Outdoor amphitheater that seats 500 Critical Manufacture include: Bowling Green State University Firelands Campus; PPG Industries; produces paints, specialty coatings, and colorants; Humanetic ATD International Automotive Components; Mississippi Lime; International Automotive Components (IAC) produces molded plastic products for vehicles. Maritime sectors include: Huron Port on the east bank

tonnage in the United States Covers approximately 33 square nautical miles in our jurisdiction The water and wastewater systems includes both a water department that sell 900,000 gallons of water throughout the county per day. We have a sewer treatment plant that treats 700,000 to 800,000 gallons per day Transportation sector: Three major highway systems that are within the department's footprint: US Route 6; US Route 250; Ohio Route 2. These thoroughfares bring an excess of 1,000,000 travelers per year. Our freight rail sector includes an average of 115 trains traveling on our approximate 8 miles of double tracks per day. These rails are used for interstate commerce. The community has many cultural assets as well, including the historic Huron Playhouse; one of the oldest continuing summer theater programs in the state.

Do you currently report to the National Fire Incident Reporting System (NFIRS)? You will be required to report to NFIRS for the entire period of the grant. **Yes**

Please enter your FDIN/FDID. **22009**

Do you offer live fire training? **Yes**

What is the total number of live fire training exercises conducted per year on average? **1**

Operating budget

What is your organizations operating budget (e.g., personnel, maintenance of apparatus, equipment, facilities, utility costs, purchasing expendable items, etc.) dedicated to expenditures for day-to-day activities for the current (at time of application) fiscal year, as well as the previous two fiscal years?

Current fiscal year: **2021**

Fiscal Year	Operating budget
2021	\$2,559,602.00
2020	\$248,714.00
2019	\$2,172,075.00

dedicated to personnel costs (salary, benefits, overtime costs, etc.)?

Does your department have any rainy day reserves, emergency funds, or capital outlay?

No

What percentage of the declared operating budget is derived from the following

	2021	2020	2019
Taxes	31	36	27
Bond issues	0	0	0
EMS billing	18	18	19
Grants	0	0	0
Donations	0	0	0
Fund drives	0	0	0
Fee for service	51	46	54
Other	0	0	0
Totals	100 %	100 %	100 %

Describe your financial need and how consistent it is with the intent of the AFG Program. Include details describing your organization's financial distress such as summarizing budget constraints, unsuccessful attempts to secure other funding, and proving the financial distress is out of your control.

As of the latest Ohio Unemployment Ranking, Erie County is 24th out of 88 counties for unemployment. To add further insult to the area, 11.8% of our residents live at or below poverty level. Unfortunately 18.0% of the children suffer from food insecurity. Additionally 27.6% of the population is over the age of 65 while 27.6% of the population are below the age of 18. This must be taken into consideration as neither of these two groups, primarily, pay into taxes. While these numbers are black and white on paper, they do not lead to voting increased taxes. We have had to look outside our City coffers for a source of income. The city has seen a significant decrease in funding due to the decrease of Local Government Funding in the excess of 50% since 2013 and the complete elimination of inheritance tax. 2021 Operating Income = \$2,559,602 Taxes \$805,692; EMS \$458,969; Contracts \$1,291,472; and Refund/ Sale of Eq. \$3,469. Yes, we have a large operational budget, but we also spent 74% on personnel costs. The majority of personnel expenses

or the percentage of insurances and benefits. That left only 26% for all other operational, maintenance and vehicle expenses necessary to successfully operate a fire department. Expenses 2021 = \$2,309,703. Salaries \$1,401,443; Workers Comp \$20,947; Physical \$8,418; Medicare / Social Security \$19,377; Training \$3,526; Volunteer Dependent's Fund \$150; Retirement \$212,556; Insurances \$233,900; Utilities \$6,309; Station/Office Supplies \$5,031; Fire / Safety Supplies \$6,650; EMS Supplies \$13,900; Equipment/Tools \$12,509; Eq. Maintenance/Repairs \$15,012; EMS Eq. Maintenance \$9,604; Fire/ EMS Eq. \$150,000; Building Repairs & Maintenance \$6,953; Vehicle Insurance \$16,259; Fuel \$26,208; Vehicle Repairs/Maintenance \$44,631; Legal/ CPA \$29,741; UAN Accounting Fee \$2,988; Tax Collection Fee \$19,972; Dispatching/Contract \$17,169; EMS Billing \$25,669; and Delinquent Tax & Assessment Fee \$781. Over the past 2 years our personnel costs have increased by approximately 11%. While we have worked hard to get the best insurance coverage rates possible, they simply continue to increase. The difference between income and expenses was \$249,899. We must have a carry over into the new year, to cover immediate expenses. Hopefully, the reviewer can realize that big budgets do not translate into a free reign on spending. The Chief and all members of the department must be fiscally responsible when making purchases and must limit to the necessities. That is why we do not have excessive funds for replacement of large purchases of operational equipment. The Erie County Foundation supports many good projects throughout the area; however, not so much when it comes to major fire equipment. There are no local or community grants in Huron, Ohio that have mission statements that align with fire equipment projects. Nor have we found a rich benefactor. We did apply in 2018 and 2019 for a cascade system. While we did not apply in 2020, our request is, now more than ever, of utmost importance, as we received new SCBAs from our 2018 AFG. We are now making application for a cascade system and TOG. The Fire Chief understands that there is a 5% match required on the part of the requesting department. Due to the nature of our request of our cascade system, and the amount of time for them to be delivered, the funding can quite possibly be taken out of two fiscal years. This time frame still meets the 24 month award period requirements.

In cases of demonstrated economic hardship, and upon the request of the grant applicant, the FEMA Administrator may grant an Economic Hardship Waiver. Is it your

No

Waiver?

Other funding sources

This fiscal year, are you receiving Federal funding from any other grant program for the same purpose for which you are applying for this grant? **No**


This fiscal year, are you receiving Federal funding from any other grant program regardless of purpose? **No**

Applicant and community trends

Please provide the following additional information about the applicant.

Injuries and fatalities	2022	2021	2020
What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?	0	0	1
What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?	0	0	1
What is the total number of line of duty member fatalities in your jurisdiction over the last three calendar years?	0	0	0
What is the total number of line of duty member injuries in your jurisdiction over the last three calendar years?	1	0	0
What is the total number of members with self-inflicted fatalities over the last three years?	0	0	0

How many vehicles does your organization have in each of the type or class of vehicle listed below? You must include vehicles that are leased or on long-term loan as well as any vehicles that have been ordered or otherwise currently under contract for purchase or lease by your organization but not yet in your possession.

-  **Seated riding positions**
- The number of seated riding positions must be equal or greater than the total number of frontline and reserve apparatus. If there are zero frontline and zero reserve apparatus, the number of seated riding positions must be zero..

Type or class of vehicles	Number of frontline apparatus	Number of reserve apparatus	Number of seated riding positions
Engines or pumpers (pumping capacity of 750 gallons per minute (GPM)	2	0	12

Type or class of vehicles	Number of frontline apparatus	Number of reserve apparatus	number of seated riding positions
pumper/tanker, rescue/pumper, foam pumper, CAFS pumper, type I, type II engine urban interface.			
Ambulances for transport and/or emergency response.	3	0	6
Tankers or tenders (water capacity of 1,000 gallons or more).	1	0	2
Aerial apparatus: aerial ladder truck, telescoping, articulating, ladder towers, platform, tiller ladder truck, quint.	1	0	4
Brush/quick attack (pumping capacity of less than 750 GPM and water carrying capacity of at least 300 gallons): brush truck, patrol unit (pickup w/ skid unit), quick attack unit, mini-pumper, type III engine, type IV engine, type V engine, type VI engine, type VII engine.	1	0	2
Rescue vehicles: rescue squad, rescue (light, medium, heavy), technical rescue vehicle, hazardous materials unit.	1	0	2
Additional vehicles: EMS chase vehicle, air/light unit, rehab units, bomb unit, technical support (command, operational support/supply), hose tender, salvage truck, ARFF (aircraft rescue firefighting), command/mobile communications vehicle.	2	0	8
How many ALS Response vehicles are in your fleet?	3		
Is your department facing a new risk, expanding service to a new area, or experiencing an increased call volume?	Yes		
Please explain how your department is facing a new risk, expanding service to a new area, or experiencing an increased call volume.	Increase in call volume.		

Community description

Please provide the following additional information about the community your organization serves.

Type of jurisdiction served	Other
If "Other", please enter type of jurisdiction served.	City and Township
What type of community does your organization serve?	Rural
What is the square mileage of your first due response zone/jurisdiction served?	37

protected by hydrants?

What percentage of your primary response area is for the following:	Percentage (must sum to 100%)
Agriculture, wildland, open space, or undeveloped properties	30
Commercial and industrial purposes	10
Residential purposes	60
Total	100

What is the permanent resident population of your first due response zone/jurisdiction served? **12500**

Do you have a seasonal increase in population? **Yes**

What is your seasonal increase in population (number of people)? **50000**

Please describe your organization and/or community that you serve.

Located on the shores of Lake Erie, in north central Ohio, according to Huron Township record, the Huron Fire Department (HFD) began operations in 1860. Those were the days of the hand pumper and brutal hard work to get water to flow. Calling the firefighters for a call involved the Water Plant. In 1910 the Water Plant was operated off steam. The steam was also used to blow two whistles that acted as the fire signals. The number of whistle blows would indicate to the firemen the location of the fire. It was not until 1923 that the city spent \$350.00 on an electric siren. In 1915 the Village of Huron (not yet a city at that time) purchased a horse drawn ladder wagon from the City of Elyria. Two families that owned horses in the village would race to the station when the fire signal sounded and prepare the horses. Whichever family made it to the station first would have the honor of pulling the ladder wagon. In 1920 HFD's first Fire Chief was appointed and paid the sum of \$50 annually. As the years progressed, so did the department. In 1925 the HFD purchased its first motorized apparatus. The 1930s introduced changes for the firemen. Official firemen's boots were bought for \$10.00 a pair and rubber rain coats were bought for \$12.50 each. Our firefighters now had the latest protection for fighting fires In 1968 the first talks of a full-time fire department began. Up until this time, funeral homes ran the ambulance service. Funeral homes, at that time, began to stop providing this

ambulance in 1969. Also in 1969, after much discussion, the Fire Chief, and two fire / squad men were hired. In 1986 after passage of a fire levy, four additional full-time members were hired. This created three shifts staffed with two firemen 24/7. The rest, to coin a phrase, is history. Training, equipment apparatus, and public services has evolved over the years for the betterment of the firefighters and the community. Today, HFD is responsible for fire suppression, emergency management for industrial complexes, marine vessels (recreational and commercial), agricultural areas, and of course, residential and multi-family units, and businesses. HFD promotes and strives to prevent fire and serious injuries through comprehensive education and prevention programs. Our mission is to protect the lives and property of our residents and visitors against fire and critical health threats. Our members take this mission seriously.

Call volume

Summary	2022	2021	2020
Fire - NFIRS Series 100	41	33	41
Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series 200	8	2	5
Rescue & Emergency Medical Service Incident - NFIRS Series 300	1636	1098	214
Hazardous Condition (No Fire) - NFIRS Series 400	40	24	28
Service Call - NFIRS Series 500	25	32	34
Good Intent Call - NFIRS Series 600	54	79	46
False Alarm & Falls Call - NFIRS Series 700	151	74	95
Severe Weather & Natural Disaster - NFIRS Series 800	1	0	1
Special Incident Type - NFIRS Series 900	5	1	8
Total	1961	1343	472

How many responses per year per category?	2022	2021	2020
"Structure Fire" (Of the NFIRS Series 100 calls, NFIRS Codes 111-120)	21	20	14
"Vehicle Fire" (Of the NFIRS Series 100 calls, NFIRS Codes 130-138)	2	1	10
"Vegetation Fire" (Of the NFIRS Series 100 calls, NFIRS Codes 140-143)	14	6	10
Total	37	27	34
Total acreage per year	2022	2021	2020
Total acreage of all vegetation fires	0	0	0

Rescue and emergency medical service incidents

How many responses per year per category?	2022	2021	2020
"Motor Vehicle Accidents" (Of the NFIRS Series 300 calls, NFIRS Codes 322-324)	55	63	45
"Extrications from Vehicles" (Of the NFIRS Series 300 calls, NFIRS Code 352)	5	13	2
"Rescues" (Of the NFIRS Series 300 calls, NFIRS Code 300, 351, 353-381)	18	13	12
EMS-BLS Response Calls	0	0	0
EMS-ALS Response Calls	1636	1098	1450
EMS-BLS Scheduled Transports	0	0	0
EMS-ALS Scheduled Transports	0	0	0
Community Paramedic Response Calls	0	0	0
Total	1714	1187	1509

Mutual and automatic aid

How many responses per year per category?	2022	2021	2020
Amount of times the organization received Mutual Aid	41	11	4

Quantity	Unit price	Total
6	460.00	\$2,760.00

Budget class

Equipment

More Details for Helmets.

What is the purpose of this request? **Replace In-Service/In-Use/Damaged/Unsafe/Unrepairable PPE to meet current standard**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources? **Yes**

How many of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards? **17**

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0

Age (in years)	Current inventory	Being replaced
4	0	0
5	4	0
6	5	0
7	6	0
8	1	0
9	2	0
10	0	0
11	0	0
12	0	0
13	0	0
14	0	0
15	0	0
16	4	4
17	1	1
18	0	0
19	0	0
20	1	1
21	15	15
22	0	0
23	0	0
24	0	0
25	0	0

Item: Gloves**\$2,448.00****Description**

We are requesting (17) sets of structural firefighting gloves.

Quantity	Unit price	Total
17	144.00	\$2,448.00

Budget class

Equipment

More Details for Gloves.

What is the purpose of this request? **Increase supply for new hires/existing firefighters that do not have one set of turnout gear (PPE) or allocated seated position (SCBA). This includes replacing out of service equipment.**

Are you requesting for members that currently do not have above-mentioned item? **Yes**

Enter the number of members that do not have this item **17**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

through this application, will you obtain training for this PPE/SCBA through other sources?

How many of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards? 0

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0
4	0	0
5	4	0
6	5	0
7	6	0
8	1	0
9	2	0
10	0	0
11	0	0
12	0	0
13	0	0

Age (in years)	Current inventory	Being replaced
14	0	0
15	0	0
16	4	4
17	1	1
18	0	0
19	0	0
20	1	1
21	15	15
22	0	0
23	0	0
24	0	0
25 or more	0	0

Item: Boots

\$4,720.00

Description

We are requesting (8) pairs of structural firefighting boots.

Quantity	Unit price	Total
8	590.00	\$4,720.00

Budget class

Equipment

More Details for Boots .

What is the purpose of this request? **Replace In-Service/In-Use/Damaged/Unsafe/Unrepairable PPE to meet current standard**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources? **Yes**

How many of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards? **17**

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0
4	0	0
5	4	0
6	5	0
7	6	0

Age (in years)	Current inventory	Being Replaced
8	1	0
9	2	0
10	0	0
11	0	0
12	0	0
13	0	0
14	0	0
15	0	0
16	4	4
17	1	1
18	0	0
19	0	0
20	1	1
21	15	15
22	0	0
23	0	0
24	0	0
25 or more	0	0

▼
Item: Additional funding

\$11,989.36

Description

Additional funding listed is for grant administration fees should this grant be awarded.

Quantity	Unit price	Total
1	11989.36	\$11,989.36

Budget class

Contractual

More Details for Additional funding.

What is the purpose of this request?

Is your department trained in the proper use of the PPE/SCBA being requested?

Are you requesting funding for training for this PPE/SCBA?

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources?

Item: Complete Set of Turnout Gear \$132,834.00**Description**

We are requesting (26) complete head to toe sets of turn out gear that will include (2) pairs of gloves and (2) hoods per the AFG guidelines. (17) of these are for replacement of our current inventory and we need to request and additional (9) sets for the firefighters that do not have current updated gear.

Quantity	Unit price	Total
26	5109.00	\$132,834.00

More Details for Complete Set of Turnout Gear.

What is the purpose of this request? **Replace In-Service/In-Use/Damaged/Unsafe/Unrepairable PPE to meet current standard**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources? **Yes**

How many of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards? **17**

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0
4	0	0
5	4	0

Age (in years)	Current Inventory	Being Replaced
6	5	0
7	4	0
8	0	0
9	0	0
10	0	0
11	0	0
12	0	0
13	0	0
14	0	0
15	0	0
16	4	4
17	1	1
18	0	0
19	0	0
20	1	1
21	11	11
22	0	0
23	0	0
24	0	0
25 or more	0	0

Item: Gloves

\$4,300.00

Description

We are requesting (43) sets of extrication gloves

Quantity	Unit price	Total
43	100.00	\$4,300.00

Budget class

Equipment

More Details for Gloves.

What is the purpose of this request? **Increase supply for new hires/existing firefighters that do not have one set of turnout gear (PPE) or allocated seated position (SCBA). This includes replacing out of service equipment.**

Are you requesting for members that currently do not have above-mentioned item? **Yes**

Enter the number of members that do not have this item **43**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources? **Yes**

members currently have PPE that meets applicable NFPA and OSHA standards?

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0
4	0	0
5	4	0
6	5	0
7	6	0
8	1	0
9	2	0
10	0	0
11	0	0
12	0	0
13	0	0
14	0	0
15	0	0
16	4	4

Age (in years)	Current inventory	Being replaced
17	1	1
18	0	0
19	0	0
20	1	1
21	15	15
22	0	0
23	0	0
24	0	0
25 or more	0	0

Item: Hoods

\$2,805.00

Description

We are requesting structural firefighting hoods. This will give our 17 members a second hood per AFG guidelines.

Quantity	Unit price	Total
17	165.00	\$2,805.00

Budget class

Equipment

More Details for Hoods.

What is the purpose of this request?

Increase supply for new hires/existing firefighters that do

(PPE) or allocated seated position (SCBA). This includes replacing out of service equipment.

Are you requesting for members that currently do not have above-mentioned item? **Yes**

Enter the number of members that do not have this item **26**

Is your department trained in the proper use of the PPE/SCBA being requested? **Yes**

Are you requesting funding for training for this PPE/SCBA? **No**

If you are not requesting training funds through this application, will you obtain training for this PPE/SCBA through other sources? **Yes**

How many of your on-duty active members currently have PPE that meets applicable NFPA and OSHA standards? **0**

What are the specific ages of the type of PPE you are requesting? (All PPE items in the current inventory must be accurately described and accounted for in this breakdown.)

Age (In years)	Current Inventory	Being Replaced
Less than 1	0	0
1	3	0
2	0	0
3	1	0
4	0	0

Age (in years)	Current Inventory	Being Replaced
5	4	0
6	5	0
7	6	0
8	1	0
9	2	0
10	0	0
11	0	0
12	0	0
13	0	0
14	0	0
15	0	0
16	4	4
17	1	1
18	0	0
19	0	0
20	1	1
21	15	15
22	0	0
23	0	0
24	0	0
25 or more	0	0

Grant request summary

The table below summarizes the number of items and total cost within each activity you have requested funding for. This table will update as you change the items within your grant request details.

Grant request summary

Activity	Number of items	Total cost
Personal Protective Equipment (PPE)	7	\$161,856.36
Total	7	\$161,856.36

Is your proposed project limited to one or more of the following activities ⓘ : Planning and development of policies or processes. Management, administrative, or personnel actions. Classroom-based training. Acquisition of mobile and portable equipment (not involving installation) on or in a building.

Yes

Budget summary

Budget summary

Object class categories	Total
Personnel	\$0.00
Fringe benefits	\$0.00
Travel	\$0.00
Equipment	\$149,867.00
Supplies	\$0.00
Contractual	\$11,989.36
Construction	\$0.00
Other	\$0.00
Total direct charges	\$161,856.36

Object class categories	total
Indirect charges	\$0.00
TOTAL	\$161,856.36
Non-federal resources	
Applicant	\$7,707.45
State	\$0.00
Other sources	\$0.00
Remarks	
Total Federal and Non-federal resources	
Federal resources	\$154,148.91
Non-federal resources	\$7,707.45
TOTAL	\$161,856.36
Program income	\$0.00

Contact information

Did any individual or organization assist with the development, preparation, or review of the application to include drafting or writing the narrative and budget, whether that person, entity, or agent is compensated or not and whether the assistance took place prior to submitting the application?
Yes

Application participants

Please add all individuals or organizations who assisted with the application.

Include all individuals or organizations who assisted with the development, preparation, or review of the application to include drafting or writing the narrative and budget, whether that person, entity, or agent is compensated or not and whether the assistance took place prior to submitting the application or not.

Doug Nash

Primary phone

4195410004

Mobile

Mailing address

417 Main Street

Huron OH 44839-0000

fire.chief@huronohio.us

Fax

Secondary point of contact

Please provide a secondary point of contact for this grant.

The Authorized Organization Representative (AOR) who submits the application will be identified as the primary point of contact for the grant. Please provide one secondary point of contact for this grant below. The secondary contact can be members of the fire department or organizations applying for the grant that will see the grant through completion, are familiar with the grant application, and have the authority to make decisions on and to act upon this grant application. The secondary point of contact can also be an individual who assisted with the development, preparation, or review of the application.

Didi Everhart

Grant Administrator

Primary phone

2482526250

Mobile

Additional phones

3304778331

Work

Fax

didi@gatchellgrantresource

Assurance and certifications

OMB number: 4040-0007, Expiration date: 02/28/2022 [View burden statement](#)

SF-424B: Assurances - Non-Construction Programs

OMB Number: 4040-0007

Expiration Date: 02/28/2022

Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as

as amended (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

Certifications regarding lobbying

OMB Number: 4040-0013

Expiration Date: 02/28/2022

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. 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 an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. 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 contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The undersigned states, to the best of his or her knowledge and belief, that:

If any 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 commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

OMB number: 4040-0013, Expiration date: 02/28/2022 [View burden statement](#)

SF-LLL: Disclosure of Lobbying Activities

OMB Number: 4040-0013

Expiration Date: 02/28/2022

Complete only if the applicant is required to do so by 44 C.F.R. part 18. Generally disclosure is required when applying for a grant of more than \$100, 000 and 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 contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Further, the recipient shall file a disclosure form at the end of each calendar quarter in which there occurs any event described in 44 C.F.R. § 18.110(c) that requires disclosure or that materially affects the accuracy of the information contained in any disclosure form previously filed by the applicant.

The applicant is not currently required to submit the SF-LLL.

Notice of funding opportunity

I certify that the applicant organization has consulted the appropriate Notice of Funding Opportunity and that all requested activities are programmatically allowable, technically feasible, and can be completed within the award's Period of Performance (POP).

Accuracy of application

I certify that I represent the organization applying for this grant and have reviewed and confirmed the accuracy of all application information submitted. Regardless of intent, the submission of information that is false or misleading may result in actions by FEMA that include, but are not limited to: the submitted application not being considered for award, enforcement actions taken against an existing award pending investigation or review, or referral to the DHS Office of Inspector General.

Authorized Organizational Representative for the grant

By signing this application, I certify that I understand that inputting my password below signifies that I am the identified Authorized Organization Representative for this grant. Further, I understand that this electronic signature shall bind

Authorization to submit application on behalf of applicant organization

By signing this application, I certify that I am either an employee or official of the applicant organization and am authorized to submit this application on behalf of my organization; or, if I am not an employee or official of the applicant organization, I certify that the applicant organization is aware I am submitting this application on its behalf, that I have written authorization from the applicant organization to submit this application on their behalf, and that I have provided contact information for an employee or official of the applicant organization in addition to my contact information.