



Minnesota Department of Public Safety ("State") Homeland Security and Emergency Management Division 445 Minnesota Street, Suite 223 St. Paul, Minnesota 55101	Grant Program: 2016 State Homeland Security Program (SHSP) Grant Agreement No.: A-SHSP-2016-STPBOMB-017
Grantee: Saint Paul Police Department 367 Grove Street Saint Paul, MN 55101	Grant Agreement Term: Effective Date: 01/01/2017 Expiration Date: 12/31/2017
Grantee's Authorized Representative: Carol Gronfors 367 Grove St. Saint Paul, MN 55101 Phone: 651-266-5588 Email: carol.gronfor@ci.stpaul.mn.us	Grant Agreement Amount: Original Agreement \$90,000.00 Matching Requirement \$ 0.00
State's Authorized Representative: Rose Belille Homeland Security and Emergency Management 445 Minnesota St., Suite 223 St. Paul, Minnesota 55101 Phone: 651-201-7493 Rosann.Belille@state.mn.us	Federal Funding: CFDA 97.067 State Funding: none Special Conditions: None

Under Minn. Stat. § 299A.01, Subd 2 (4) the State is empowered to enter into this grant agreement.

Term: Effective date is the date shown above or the date the State obtains all required signatures under Minn. Stat. § 16B.98, subd. 7, whichever is later. Once this grant agreement is fully executed, the Grantee may claim reimbursement for expenditures incurred pursuant to the Payment clause of this grant agreement. Reimbursements will only be made for those expenditures made according to the terms of this grant agreement. Expiration date is the date shown above or until all obligations have been satisfactorily fulfilled, whichever occurs first.

The Grantee, who is not a state employee will:

Perform and accomplish such purposes and activities as specified herein and in the Grantee's approved 2016 State Homeland Security Program (SHSP) Application ("Application") which is incorporated by reference into this grant agreement and on file with the State at 445 Minnesota Street, Suite 223, St. Paul, MN 55101-6223. The Grantee shall also comply with all requirements referenced in the 2016 State Homeland Security Program (SHSP) Guidelines and Application which includes the Terms and Conditions and Grant Program Guidelines (<https://app.dps.mn.gov/EGrants>), which are incorporated by reference into this grant agreement.

Budget Revisions: The breakdown of costs of the Grantee's Budget is contained in Exhibit A, which is attached and incorporated into this grant agreement. As stated in the Grantee's Application and Grant Program Guidelines, the Grantee will submit a written change request for any substitution of budget items or any deviation and in accordance with the Grant Program Guidelines. Requests must be approved prior to any expenditure by the Grantee.

Matching Requirements: (If applicable.) As stated in the Grantee's Application, the Grantee certifies that the matching requirement will be met by the Grantee.



Payment: As stated in the Grantee's Application and Grant Program Guidance, the State will promptly pay the Grantee after the Grantee presents an invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services and in accordance with the Grant Program Guidelines. Payment will not be made if the Grantee has not satisfied reporting requirements.

Certification Regarding Lobbying: (If applicable.) Grantees receiving federal funds over \$100,000.00 must complete and return the Certification Regarding Lobbying form provided by the State to the Grantee.

1. ENCUMBRANCE VERIFICATION

Individual certifies that funds have been encumbered as required by Minn. Stat. §§ 16A.15 and 16C.05.

Signed: _____

Date: _____

3. STATE AGENCY

By: _____
(with delegated authority)

Title: _____

Date: _____

Grant Agreement No. Grant #A-SHSP-2016-STPBOMB-017 / PO #3000043503

2. GRANTEE

The Grantee certifies that the appropriate person(s) have executed the grant agreement on behalf of the Grantee as required by applicable articles, bylaws, resolutions, or ordinances.

By: _____

Title: Assistant Chief of Police

Date: _____

By: _____

Title: Assistant City Attorney

Date: _____

Distribution: DPS/FAS
Grantee
State's Authorized Representative

By: _____

Title: Director, Office of Financial Service

Date: _____

By: _____

Title: Mayor

Date: _____

By: _____

Title: Director, Human Rights and Equal
Employment Opportunity

Date: _____

Budget Summary (Report)

SHSP-2016-Investment #03: CBRNE					
Budget Category					
Equipment					
Equipment				\$85,000.00	
Total				\$85,000.00	
Training					
Training				\$5,000.00	
Total				\$5,000.00	
Total				\$90,000.00	
Allocation				\$90,000.00	
Balance				\$0.00	

CERTIFICATION REGARDING LOBBYING
For State of Minnesota Contracts and Grants over \$100,000

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 any 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.

For the City of Saint Paul:

Kathleen A. Wuorinen
Assistant Chief of Police

Date _____

07/07

The Grantee (which refers to the applicant's status after it has been awarded grant funds) shall comply with all applicable federal, state and local laws, ordinances, rules and regulations and provisions stated herein in the performance of the grant award.

1. Survival of Terms

The following clauses survive the expiration or cancellation of the award: 9. Liability; 10. Audits; 11. Government Data Practices; 13. Publicity and Endorsement; 14. Governing Law, Jurisdiction and Venue; and 16. Data Disclosure.

2. Financial and Administrative Provisions

The Grantee will comply with all program guidelines specified in the Grant Program Guidelines (Guidelines) and application which are incorporated herein by reference.

Budget Revisions: The Grantee will submit a written change request for any substitution of budget items or any deviation in accordance with the Guidelines included in this application. Grantees whose requests have been approved will be notified in writing by the State's Authorized Representative to the Grantee's Authorized Representative. Requests must be approved prior to any expenditure by the Grantee.

3. Payment Terms

Payment: The State will promptly pay the Grantee after the Grantee presents an invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services in accordance with the Guidelines included in this application. Expenditures for each state fiscal year (July through June) of the grant agreement must be for services satisfactorily performed within applicable state fiscal years.

Under Minn. Stat. § 16B.98 subd. 1, the Grantee agrees to minimize administrative costs.

4. Time

The Grantee must comply with all the time requirements described in the application and grant agreement. In the performance of the award, time is of the essence.

5. Consideration and Payment

The State will pay for all services performed by the Grantee under the grant agreement as a reimbursement according to the breakdown of costs contained in the Guidelines and Grantee's application that will be incorporated into the grant agreement.

Under Minn. Stat. § 16B.98, subd. 7, payments to the Grantee may not be issued until the grant agreement is fully executed.

6. Conditions of Payment

All services provided by the Grantee under the grant agreement must be performed to the State's satisfaction, as determined at the sole discretion of the State's Authorized Representative so named in the grant agreement and in accordance with all applicable federal, state, and local laws, ordinances, rules and regulations. The Grantee will not receive payment for work found by the State to be unsatisfactory or performed in violation of federal, state or local law.

7. Authorized Representative

The State's Authorized Representative or his/her successor, is so named in the grant agreement and has the responsibility to monitor the Grantee's performance and has the

authority to accept the services provided under the grant agreement opportunity. If the services are satisfactory, the State's Authorized Representative will certify acceptance on each invoice submitted for payment.

The Grantee's Authorized Representative is so named in the grant agreement. If the Grantee's Authorized Representative changes at any time during the grant agreement, the Grantee must immediately notify the State.

8. Assignment, Amendments, Waiver, and Grant Agreement Complete

The Grantee may neither assign nor transfer any rights or obligations under the grant agreement without the prior consent of the State and a fully executed Amendment, executed and approved by the same parties who executed and approved the grant agreement, or their successors in office.

Any amendment to the grant agreement must be in writing and will not be effective until it has been executed and approved by the same parties who executed and approved the original grant agreement, or their successors in office.

If the State fails to enforce any provision of the grant agreement, that failure does not waive the provision or its right to enforce it.

The grant agreement contains all negotiations and agreements between the State and the Grantee. No other understanding regarding the grant agreement, whether written or oral, may be used to bind either party.

9. Liability

Grantee must indemnify, save and hold the State, its agents, and employees harmless from any claims or causes of action, including all attorneys' fees incurred by the State arising from the performance of the grant agreement by the Grantee or the Grantee's agents or employees. This clause will not be construed to bar any legal remedies the Grantee may have for the State's failure to fulfill its obligations under the grant agreement and subsequent grant agreements. The liability for Grantees that are municipalities is governed by Minn. Stat. § 466 and any other applicable law, rule or regulation.

10. Audits

Under Minn. Stat. § 16B.98, subd. 8, the books, records, documents, and accounting procedures and practices of the Grantee or other party that are relevant to the grant agreement or transaction are subject to examination by the State, and/or the State Auditor or Legislative Auditor as appropriate, for a minimum of six years from the grant agreement end date, receipt and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later. Federal audits shall be governed by requirements of federal regulations.

If applicable, if the Grantee (known as the "subrecipient" in the Code of Federal Regulations) receives federal assistance from the State of Minnesota, it will comply with the Single Audit Act Amendments of 1996 and the Office of Management and Budget's Uniform Guidance: Cost Principles, Audit, & Administrative Requirements for Federal Awards, Subpart F (2 CFR 200) ; and, required audit reports must be filed with the State Auditor's Office, Single Audit Division, and with federal and state agencies providing federal assistance, and the Department of Public Safety within nine months of the Grantee's fiscal year end.

11. Government Data Practices

The Grantee and the State must comply with the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13, as it applies to all data provided by the State under the grant agreement, and as it applies to all data created, collected, received, stored, used, maintained or disseminated by the Grantee under the grant agreement. The civil remedies of Minnesota Statutes, section 13.08 apply to the release of the data referred to in this clause by either the Grantee or the State.

If the Grantee receives a request to release the data referred to in this clause, the Grantee must immediately notify the State. The State will give the Grantee instructions concerning the release of the data to the requesting party before the data is released.

12. Workers' Compensation

Grantee certifies that it is in compliance with Minnesota Statutes, § 176.181, subdivision 2, pertaining to workers' compensation insurance coverage. The Grantee's employees and agents will not be considered State employees. Any claims that may arise under the Minnesota Workers' Compensation Act on behalf of these employees and any claims made by any third party as a consequence of any act or omission on the part of these employees are in no way the State's obligation or responsibility.

13. Publicity and Endorsement

Any publicity regarding the subject matter of the grant agreement must be in accordance with the Guidelines included in this application. The Grantee must not claim that the State endorses its products or services.

14. Governing Law, Jurisdiction, and Venue

Minnesota law, without regard to its choice-of-law provisions, governs the grant agreement. Venue for all legal proceedings out of the grant agreement, or its breach, must be in the appropriate state or federal court with competent jurisdiction in Ramsey County, Minnesota.

15. Termination

Termination by the State. The State may cancel the grant agreement at any time, with or without cause, upon 30 days' written notice to the Grantee. Upon termination, the Grantee will be entitled to payment, determined on a pro rata basis, for services satisfactorily performed.

Termination by the Grantee. The Grantee may request termination upon 30 day's notice to the State's Authorized Representative. Upon termination, the Grantee is entitled to payment for services actually performed and agrees to return any unused funds to the State.

Termination for Insufficient Funding. The State may immediately terminate the grant agreement if it does not obtain funding from the Minnesota Legislature, or other funding source; or if funding cannot be continued at a level sufficient to allow for the payment of the services under the grant agreement. Termination must be by written or fax notice to the Grantee. The State is not obligated to pay for any services that are provided after notice and effective date of termination. However, the Grantee will be entitled to payment, determined on a pro rata basis, for services satisfactorily performed to the extent that funds are available. The State will not be assessed any penalty if the grant agreement is terminated because of the decision of the Minnesota Legislature, or other funding source, not to appropriate funds. The State must provide the Grantee notice of the lack of funding within a reasonable time of the State receiving that notice.

Termination for Failure to Comply. The State may cancel the grant agreement immediately if the State finds that there has been a failure to comply with the provisions of the grant award, that reasonable progress has not been made or that the purpose for which the funds were granted have not been or will not be fulfilled. The State may take action to protect the interests of the State of Minnesota, including the refusal to disburse additional funds and requiring the return of all or part of the funds already disbursed.

16. Data Disclosure

Under Minnesota Statutes, § 270C.65, and other applicable law, the Grantee consents to disclosure of its social security number, federal employer tax identification number, and/or Minnesota tax identification number, already provided to the State, to federal and state tax agencies and state personnel involved in the payment of state obligations. These identification numbers may be used in the enforcement of federal and state tax laws which could result in action requiring the Grantee to file state tax returns and pay delinquent state tax liabilities, if any, or pay other state liabilities.

17. Other Provisions be it understood:

- a. By filing of this application, the applicant has therefore obtained the necessary legal authority to apply for and receive the proposed grant;
- b. The filing of this application has been authorized by applicant's governing body, and the official who has applied his/her electronic signature to this application has been duly authorized to file this application for and on behalf of said applicant, and otherwise to act as the representative of the applicant in connection with this application;
- c. The activities and services for which assistance is sought under this grant will be administered by or under the supervision and control of applicant;
- d. Fiscal control and accounting procedures will be used to ensure proper disbursement of all funds awarded;

Agreement to Acknowledge the Terms and Conditions are Incorporated Into the Grant Agreement:

By submitting this application, I/we [name of Applicant Organization Representative] as an authorized Representative for [Applicant Organization's Name] the Applicant, acknowledge that I have read the Terms and Conditions in their entirety as stated within the Application materials and acknowledge that the Terms and Conditions will be incorporated into the Grant Agreement if funds are awarded to the Applicant under this Application. As authorized, if the Applicant is awarded funds under this Application, I will submit the required documents and certification on behalf of the Applicant Organization.

Terms and Conditions Acknowledgment *

Instructions:

- Click on the Terms and Conditions to read/print the document.

(If you are applying as a state agency, go to: Terms and Conditions for State Agencies)

- Check the acknowledgement box below.
- In addition to the Terms and Conditions, all Grantees must read and acknowledge the following:

1. Federal Audit Requirements

2. Federal Assurances



I acknowledge that I have read the Terms and Conditions in their entirety as stated within the Application materials and acknowledge that the Terms and Conditions will be incorporated into the Grant Agreement if funds are awarded to the Applicant under this Application.

As authorized, if our agency is awarded funds under this Application, we will submit the required documents and certification on behalf of the Applicant Organization.

2016 (SHSP) State Homeland Security Program

Organization: St Paul Bomb Disposal Unit

A-SHSP-2016-STPBOMB-017

Budget Line Items (POETE of Investment Areas)*: Equipment Equipment

Select the appropriate Investment Area for this budget item:

SHSP-2016-Invstmnt #03: CBRNE

Select the appropriate Budget Category for this budget item

Equipment

Provide a short description for this budget item (should be unique to this budget):

Equipment

Provide a more detailed description for this budget item:

Upgrade x ray systems, approximately 35,000.00 to 55,000.00 per unit. upgrade and maintain underwater explosive equipment, PPE and remediation equipment, approximately 20,000.00 for items needed. small boat 15,000.00.

Enter the dollar amounts associated with the budget item:

Budget Item Amount: \$85,000.00

Investment Area Planning Worksheet(s) *: SHSP-2016-Invstmnt #03: CBRNE

Select the appropriate Investment Area for this worksheet:

SHSP-2016-Invstmnt #03: CBRNE

Baseline - Description:

Describe what will be implemented and accomplished by this Investment.

Based on our city THIRA and analyzing response gaps in our current situation , we have identified areas where we need to close gaps in equipment and training. We will begin to upgrade our current xray equipment with current units to provide a faster diagnostic picture to technicians. We will also continue to fill the needs for maritime equipment based on our response region and it unique challenges.

For training, due to the current elevated threat situation we will attend training on current TTPS and trends .

Project - Goals and Objectives:

Explain how your project will measurably impact your Jurisdiction's Investments.

the current Xray systems will allow for a faster diagnostic procedure, greatly reducing time and exposure for the incident. The purchase of current underwater equipment and above water equipment will allow us to provide a more robust response capability.

Milestones:

Identify milestones and planned end dates for milestones.

Obtain quotes and delivery times.

Attachments: *Provide any additional information about your grant proposal.*

Upload supporting documentation here:

Document 1 Uploaded:

Upload supporting documentation here:

Document 2 Uploaded:

Upload supporting documentation here:

Document 3 Uploaded:

2016 (SHSP) State Homeland Security Program

Organization: St Paul Bomb Disposal Unit

A-SHSP-2016-STPBOMB-017

Investment Area(s) of Funding *

Investment Area

SHSP-2016-Invstmnt #03: CBRNE



State Homeland Security Grant Program

FFY2016 SHSP Project Application

Grant performance period: January 1 - December 31, 2017

HSEM Region 6 - Metro Jurisdiction/Agency Name Saint Paul

Contact Name Sgt. John Adamek Phone Number (651) 775-7429 Email john.adamek@ci.stpaul.mn.us

Project Name 2016 SHSP Project can start within 90 days of award date: ☒ Yes ☐ No

Select the core capability most strongly supported by this project: Threats and Hazard Identification

Project Description and Outcomes - describe the project, its outcomes and how it will improve preparedness in your jurisdiction:
To enhance and maintain the capabilities of the State Bomb Response teams

Capabilities - describe how this project sustains or maintains your current capabilities:
The requests will maintain our capability to respond to explosive related incidents throughout the state

Project Budget - break down your project cost by category

Category	Amount	Description
Planning	\$0	
Organization	\$0	
Equipment	\$85,000	Upgrade Xray systems, small portable boat for maritime port security and explosive recovery, upgrade underwater PPE and equipment
Training	\$5,000	enable training
Exercises	\$0	
M&A	\$0	
Total	\$90,000	Amount of total going directly to law enforcement, if applicable: \$90,000

Equipment Request - provide a detailed list of the equipment purchases proposed for this project

Add/Delete Row	AEL Number fema.gov/authorized-equipment-list	Title	Authorized for SHSP?	Cost Per Unit	QTY
☒ ☐	02EX-01-XRAP	Upgrade x ray equipment, including optical sights	☒ Yes ☐ No	\$55,000	1
☒ ☐	01WA-03-SUTW	Upgrade and maintain underwater explosive ppe and remediation equipment	☒ Yes ☐ No	\$20,000	9
☒ ☐	17wc-00-boat	small portable boat	☒ Yes ☐ No	\$15,000	1

Environmental and Historic Preservation

Does this project include new construction, modifications to existing structures or any activity that could affect the natural environment?

☒ No ☐ Yes If yes, please describe: _____

Project Timeline - provide a timeline of project tasks with milestones, start dates and end dates for each task

Add/Delete Row	Task (for example: hire, equip and train a planner; conduct training; purchase software)	Milestones	Start Date	End Date
☒ ☐	Obtain quotes and delivery dates		Mar 1, 16	Mar 1, 17
☒ ☐				

Please save file as: "2016 [jurisdiction] [project]" and submit completed form to Kathryn.Halling@state.mn.us

Save Form

Submit Form

For questions regarding the SHSP program or this application form, contact
HSEM Homeland Security Grant Administrator Kathryn Halling at (651) 201-7493

MINNESOTA DEPARTMENT OF PUBLIC SAFETY



Division of Homeland Security and Emergency Management



Project Contact Information Sheet

****Note:** If awarded, the Grant Agreement CONTRACT SIGNATORY must have the legal authority to sign for this organization as required by applicable articles, bylaws, resolutions, statute or delegation.

1. FISCAL AGENT *(This is the organization named in the grant agreement that will be responsible for the administration of the grant.)*

Legal Name: Saint Paul Police Department

Phone: 651 266 5588

Address: 367 Grove Street

Fax:

City/ZIP+4: Saint Paul Mn 55101

DUNS Number:

2. AUTHORIZED REPRESENTATIVE *(This is the person whose name should appear in the grant agreement and who will be responsible for ensuring that the terms and conditions of the agreement are met. This person does not have to have signature authority, but must be an employee of the fiscal agent cited in #1.)*

Name and Title: Carol Gronfors

Phone: 651 266 5588

Address: 367 Grove St.

Fax:

City/ZIP+4: Saint Paul MN 55101

E-mail:

3. PROGRAM MAIN CONTACT *(This is the person that HSEM can contact for any programmatic questions.)*

Name and Title: Sgt. John Adamek

Phone: 651 266 5768

Address: 367 Grove Street

Fax:

City/ZIP+4: Saint Paul MN 55101

E-mail:

4. FINANCIAL CONTACT *(This is the person that HSEM can contact for any financial questions.)*

Name and Title: Carol Gronfors

Phone: 651 266 5588

Address: 367 Grove Street

Fax:

City/ZIP+4: Saint Paul MN 55101

E-mail:

5. GRANT AGREEMENT E-MAIL CONTACT *(Which individual above should receive the agreement packet by e-mail and be responsible for obtaining the correct signature(s) on the agreement and completing the necessary forms?)*

Name:

Carol Gronfors at carol.gronfors@ci.stpaul.mn.us

FOR OFFICE USE ONLY: SWIFT Vendor ID# _____

SWIFT PO# _____