

Entire Application

Applicant's Acknowledgements

- * I certify the DUNS number in this application is our only DUNS number and we have confirmed it is active in SAM.gov as the correct number.
- * As required per 2 CFR § 25.205, I certify that prior to submission of this application I have checked the DUNS number listed in this application against the SAM.gov website and it is a correct and active at time of submission.
- * I certify that the applicant organization has consulted the appropriate Funding Opportunity Announcement and that all requested activities are programmatically allowable, technically feasible and can be completed within the award's one (1) year Period of Performance (POP).
- * I certify that the applicant organization is aware that this application period is open from 11/03 to 12/05/2014 and will close at 5 PM EST; further that the applicant organization is aware that that once an application is submitted, even if the application period is still open, a submitted application cannot be changed or released back to the applicant for modification.
- * I certify that the applicant organization is aware that it is solely the applicant organization's responsibility to ensure that all activities funded by this award (s), comply with Federal Environmental planning and Historic Preservation (EHP) regulations, laws, and Executive Orders as applicable. The EHP Screening Form designed to initiate and facilitate the EHP Review is available at: <http://www.fema.gov/media-library/assets/documents/30521?id=6906>
- * I certify that the applicant organization is aware that the applicant organization is ultimately responsible for the accuracy of all application information submitted. Regardless of the applicant's 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, an existing award being locked pending investigation, or referral to the Office of the Inspector General.

Signed by **Ken Gilliam** on **2014-12-05**

Overview

***Did you attend one of the workshops conducted by an AFG regional fire program specialist?**

Yes, I have attended workshop

***Did you participate in a webinar that was conducted by AFG?**

Yes

***Are you a member, or are you currently involved in the management, of the fire department or nonaffiliated EMS organization or a State Fire Training Academy applying for this grant with this application?**

Yes, I am a member/officer of this applicant

If you answered "No", please **complete** the information below. If you answered "Yes", please skip the Preparer Information section.
Fields marked with an * are required.

Preparer Information

* Preparer's Name

* Address 1

Address 2

* City

* State

* Zip

-
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In the space below please list the person your organization has selected to be the primary point of contact (POC) for this grant. This should be a department officer or member of the organization who will see this grant through completion, to include closeout. Reminder: if this person changes at any time during the period of performance please update this information. Please list only phone numbers where we can reach the POC.

Primary Point of Contact

* Title

Deputy Chief

Prefix (select one)

Mr.

* First Name

Ken

Middle Initial

* Last Name

Gilliam

* Primary Phone (e.g. 123-456-7890)

651-900-1476 Ext. Type cell

* Secondary Phone (e.g. 123-456-7890)

651-644-9133 Ext. 1 Type work

Optional Phone (e.g. 123-456-7890)

Type Select

Fax (e.g. 123-456-7890)

651-632-5054

* Email (e.g. user@xyz.org)

ken.gilliam@ci.stpaul.mn.us

Contact Information

	Alternate Contact Information Number 1
* Title	Fire Chief
Prefix (select one)	Mr.
* First Name	Tim
Middle Initial	
* Last Name	Butler
* Primary Phone	651-224-7811 Ext. 1 Type work
* Secondary Phone	651-775-6752 Ext. Type cell
Optional Phone	Type
Fax	651-228-6255
* Email	tim.butler@ci.stpaul.mn.us
	Alternate Contact Information Number 2
* Title	Assistant Chief
Prefix (select one)	Mr.
* First Name	Tom
Middle Initial	
* Last Name	McDonough
* Primary Phone	651-224-7811 Ext. 2 Type work
* Secondary Phone	651-788-6429 Ext. Type cell
Optional Phone	Type
Fax	651-228-6255
* Email	thomas.mcdonough@ci.stpaul.mn.us

Applicant Information

EMW-2014-FR-00287

Originally submitted on 12/05/2014 by Ken Gilliam (Userid: spdfss)

Contact Information:

Address: 645 Randolph Avenue
 City: Saint Paul
 State: Minnesota
 Zip: 55102
 Day Phone: 6516449133X1
 Evening Phone: 6512707811
 Cell Phone: 6519001476
 Email: ken.gilliam@ci.stpaul.mn.us

Application number is EMW-2014-FR-00287

- * Organization Name Saint Paul Fire Department
- * Type of Applicant Regional Request Fire
- * Fire Department/District, Nonaffiliated EMS, and Regional applicants, select type of Jurisdiction Served City
 If "Other", please enter the type of Jurisdiction

[SAM.gov](#) (System For Award Management)

- * What is the legal name of your Entity as it appears in [SAM.gov](#)?
 Note: This information must match your [SAM.gov](#) profile if your organization is using the DUNS number of your Jurisdiction.
 SAINT PAUL, CITY OF
- * What is the legal business address of your Entity as it appears in [SAM.gov](#)?
 Note: This information must match your [SAM.gov](#) profile if your organization is using the DUNS number of your Jurisdiction.
- * Mailing Address 1 645 Randolph Ave
- Mailing Address 2
- * City Saint Paul
- * State Minnesota
- * Zip 55102 - 3523
[Need help for ZIP+4?](#)
- * [Employer Identification Number](#) (e.g. 12-3456789) 41-6005521
 Note: This information must match your [SAM.gov](#) profile.
- * Is your organization using the DUNS number of your Jurisdiction? Yes
- I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application. (Required if you select Yes above)
- * What is your 9 digit [DUNS number](#)? 153857347
 (call 1-866-705-5711 to get a DUNS number)

If you were issued a 4 digit number (DUNS plus 4) by your Jurisdiction in addition to your 9 digit number please enter it here.
 Note: This is only required if you are using your

Jurisdiction's DUNS number and have a separate bank account from your Jurisdiction. Leave the field blank if you are using your Jurisdiction's bank account or have your own [DUNS number](#) and bank account separate from your Jurisdiction.

* Is your [DUNS Number](#) registered in [SAM.gov](#) (System for Award Management previously CCR.gov)? Yes

* I certify that my organization/entity is registered and active at [SAM.gov](#) and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate, current and consistent with my organization's/entity's [SAM.gov](#) record.

Headquarters or Main Station Physical Address

* Physical Address 1 645 Randolph Avenue

Physical Address 2

* City Saint Paul

* State Minnesota

* Zip 55102 - 3523
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Mailing Address

* Mailing Address 1 645 Randolph Avenue

Mailing Address 2

* City Saint Paul

* State Minnesota

* Zip 55102 - 3523
[Need help for ZIP+4?](#)

Bank Account Information

* The bank account being used is: (Please select one from right) Note: If this is selected, a 4 digit DUNS plus 4 is required if you answered "YES" to using the DUNS number of your Jurisdiction.
Maintained by my Jurisdiction

Note: The following banking information must match your SAM.gov profile.

* Type of bank account Checking

* Bank routing number - [9 digit](#) number on the bottom left hand corner of your check 091000022

* Your account number 180111054532

Additional Information

* For this fiscal year (Federal) is your organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request? No

* If awarded, will your organization expend more than \$750,000 in Federal funds during your organization's fiscal year? If "Yes", your organization may be required to undergo an A-133 audit. Reasonable costs incurred for an A-133 audit are an eligible expenditure and should be included in the applicant's proposed budget. Please enter audit costs only once under any "Additional Funding" in the "Request Details" section of the application. Yes

* Is the applicant [delinquent on any Federal debt](#)? No

If you answered "Yes" to any of the additional questions above, please provide an explanation in the space provided below:

If awarded this regional grant, we will expend more than \$750,000.

Regional Request Department Characteristics (Part I)

- * What kind of organization do you represent? All Paid/Career
- If you answered "Combination" above, what is the percentage of career members in your organization? %
- * What type of community will your regional project serve (what is the make up of the majority of the region affected by the project)? Urban
- * Is your Organization considered a Metro Department? Yes
- * What is the square mileage of the region affected by the project? 116
- * In what county/parish is the host applicant physically located? If you have more than one station, in what county/parish is your main station located? Ramsey
- * Does your region protect critical infrastructure of the state? Yes
- * How much of your region's land use is for agriculture, wildland, open space, or undeveloped properties? 2 %
- * What percentage of your region's land use is for commercial and industrial purposes? 21 %
- * What percentage of your region's land is used for residential purposes? 77 %

* What is the permanent resident population of your region served? *Remember this is the combined population for all departments/agencies included in this application* 675024

* Do you have a seasonal increase in population? No

If "Yes" what is your seasonal increase in population?

* What is the total membership in your region? *Remember this is the combined personnel of all departments/agencies included in this application.* 839

* How many active members are trained to Firefighter I? 839

* How many active members are trained to Firefighter II? 839

* How many active BLS providers does your region have? 839

* How many active ALS providers does your region have? 140

* How many active Emergency Medical Responders does your region have? 839

* How many personnel are trained to the [Community Paramedic](#) level? 2

* How many stations are in your region? 35

* If you (the host applicant) are a fire department, do you report to the National Fire Incident Reporting System (NFIRS)? Yes

If yes, please enter your [FDIN/FDID](#) 62210

* How many regional partners will directly participate in this project? 2

* Please list each participating organization by name along with a point of contact, to include a phone number. All regional participants must be eligible as defined by the AFG Funding Opportunity Announcement (e.g., Fire Departments or nonaffiliated EMS organizations)

Participating Organization Name	First Name	Last Name	Phone Number	Action
Minneapolis Fire Department	Chuck	Brynteson	612-919-7702 Ext:	View
Saint Paul Fire Department	Ken	Gilliam	651-900-1476 Ext:	View

* Do all departments in this request report to NFIRS? Yes

* Do all agencies meet the regional minimum for NIMS compliancy? Yes

* What services are provided by your organization and the organizations participating in the regional application?

Advanced Life Support Non-Transport	Advanced Life Support Transport	Community Paramedic
Rescue Fire Suppression	Airport Rescue Firefighting (ARFF)	Haz-Mat Operational Level
Rescue Operational Level	BLS/ALS Schedule Transport	Haz-Mat Technical Level
Rescue Technical Level	Basic Life Support Non-Transport	Maritime Response
Structural Fire Suppression	Basic Life Support Transport	Medical First Response
Swift Water Rescue		

* Please describe your organization and/or community that you serve. We recommend typing your response in a Word Document outside of this application, then copying and pasting it into the written field. There is a 4000 character limit.

This Regional Grant application is hosted by the Saint Paul Fire Department in cooperation with our primary mutual-aid neighbor, the Minneapolis Fire Department. Our two departments are the largest departments in the state of Minnesota. We provide service to a significant percentage of the total Twin Cities metropolitan area. While our departments run independently of each other, we are utilizing more mutual-aid and currently discussing auto-aid responses. While there are many differences between the two departments, there are far more similarities. The most important that this grant request focuses on is our joint effort to raise awareness of firefighter cancer statistics and provide necessary equipment, PPE, and training to better protect our personnel.

Our departments provide fire, rescue, and emergency medical services to a resident population of approximately 670,000 residents in both the state's capitol city (Saint Paul) and the state's largest city (Minneapolis). Our response area is home to critical infrastructure including our state capitol building and associated government facilities, many miles of main line railway and interstate freeway, the Mississippi River and associated commercial port activity, airports, hospitals, arenas, public water, power and telecommunications systems, chemical facilities, petroleum and natural gas transmission pipelines, and major business and commercial facilities that support the surrounding Twin Cities metro area of 3.6 million people, as well as the entire state of Minnesota.

Our combined departments have a total of 839 sworn positions operating out of 35 stations. In addition to the ranks of chief officers, we operate 35 engine companies, 13 ladder companies, 5 heavy rescue squads. Fourteen of the SPFD engine companies also dual-staff ALS ambulances and all fire companies run first response on medical and rescue calls. We staff specialty units including the state's only Hazmat Emergency Response Entry team, a Chemical Assessment team, the MART state-wide Helicopter Rescue Team, four boats, and we have 120 members on the state's USAR Collapse Rescue team MN Task Force 1.

In 2013, our departments responded to 85,353 Fire and EMS incidents. We have a combined average response time of less than 4 minutes. We provide mutual-aid to multiple departments. Our two Training Divisions are used as regional training facilities and we support the training initiatives of numerous smaller suburban departments. Considering the Hazardous Materials, Helicopter Rescue, and Structural Collapse Team responsibilities of both departments, our response area expands to include the entire state of Minnesota as well as neighboring states. This grant would not only benefit our department, but also any fire department in the state requiring our assistance.

Per program guidance, we do have a MOU between Fire Chiefs that they will both support this grant and that each department would share the cost match requirements on a per capita basis. City management at both cities is aware of this application and upon notice of award, the formal MOU will be routed through both City Councils for formal adoption and acceptance of the grant.

Regional Characteristics (Part II)

	2013	2012	2011
* What is the total number of line of duty member fatalities in your region over the last three calendar years?	0	0	0
* What is the total number of line of duty member injuries in your region over the last three calendar years?	355	342	279
* What is the cumulative total of the three-year average budgets of all participating organizations in this project?	11033334	10945458	10887474
* What percentage of this declared budget is dedicated to personnel costs (salary, fringe, and overtime)?	88%	88%	88%
* What percentage of the declared operating budget is derived from: Enter numbers only, percentages must sum up to 100%	2013	2012	2011
Taxes?	88 %	88 %	88 %
Bond Issues	0 %	0 %	0 %
EMS Billing?	9 %	9 %	9 %
Grants?	2 %	2 %	2 %
Donations?	0 %	0 %	0 %
Fund drives?	0 %	0 %	0 %
Fee for Service?	1 %	1 %	1 %
Other?	0 %	0 %	0 %

If you entered a value into Other field (other than 0), please explain

Does your organization intend to provide a cost share greater than the required amount? No

If yes, how much additional funding in excess of the required cost share is your organization willing to contribute? Enter the amount in the box to the right. \$

Note: This figure will not affect the budget calculations .

* Please describe your organization's need for Federal financial assistance. We recommend typing your response in a Word Document outside of this application, then copying and pasting it into the written field. There is a 4000 character limit.

Our two departments have had considerable financial difficulties over the past decade and the current fiscal climate in Minnesota has hampered our ability to keep up with our essential operational needs. A clear example is this grant effort to provide NFPA compliant PPE, training, and associated maintenance equipment. It is impossible to deal with the expanding mission of the fire service and increasing operational costs, with shrinking budgets every year. Unfortunately, both of our cities have not been able to adequately keep up with our PPE needs due to recent high turnover rates and other budgetary setbacks explained below. Considering our increasing operations costs and increased call loads, compounded by diminishing returns on EMS ambulance revenues and zero-increase budgets, we often fall financially short. To balance this problem, cuts are made throughout the budget that bring us to where we are today, playing catch up to properly protect our personnel.

More broadly, the unemployment rate for our metro region has reached its highest rate in the last 20 years. The number of people living in poverty is also on the rise, especially among our youngest residents. Home values in our metro area fell drastically during 2010-2013 and more than 40 percent of all homes that sold during this period were sold at a financial loss. Nearly all of the funds appropriated for fire and emergency services come from

personal property tax or local income tax. Foreclosures, reductions in home values, and the loss of jobs have severely affected municipal incomes. As in most states, the public is staunchly resistant to tax increases, while at the same time expecting a wider array of services.

Minneapolis' and Saint Paul's combined fire departments have a total current operating budget of over \$109-million, yet our personnel costs make up about 88% of the combined budgets. Our cities are fortunate to be able to staff and support full-time fire, rescue, and emergency medical services, but due to the associated operating costs and the number of services that our departments provide, our available funding for training and equipment is limited.

To compound our financial situations, the State of Minnesota has had consecutive budget shortfalls for the past several legislative sessions and they have made large cuts to Local Government Aid (LGA) programs, including \$65 million over the past five years alone. The State LGA cut of 46% has had a devastating impact on both city budgets. LGA has historically been the primary funding sources for both of the cities' general funds and the general funds are the primary source of funding for public safety. Many communities have reached a point where maintaining essential services, even with reduced staffing, may be the only alternative. Given the reality of the grave economic situation, both of our municipalities are dealing with mandated budget freezes and/or reductions. Many of the smaller departments surrounding us rely on our support and there is not a single service that is not feeling the effects of the situation.

That being said, our two fire departments have continued to remain positively focused on our long-term goals, even in the face of measurable setbacks. As with many departments around the nation, we find ourselves being asked to do more with less and many times this ultimately compromises firefighter safety. We have set a goal to increase funding in the areas of training and equipment through outside sources, but the current economy has not been helpful. This grant was developed through open communications between our two organizations as we looked for way to collaboratively succeed together. We believe that this regional grant project is exactly what the Assistance to Firefighters Act Grants were intended for, as relying on traditional means to fund essential projects of this nature is, unfortunately, no longer a practical option.

*** How many vehicles are operational within the region in each of the type or class of vehicle listed below? You must include vehicles that are leased or 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. (Enter numbers only and enter 0 if you do not have any of the vehicles below)**

Type or Class of Vehicle	Number of Front Line Apparatus	Number of Reserve Apparatus	Number of Seated Riding Positions
Engines or Pumpers (pumping capacity of 750 gpm or greater and water capacity of 300 gallons or more): Pumper, Pumper/Tanker, Rescue/Pumper, Foam Pumper, CAFS Pumper, Type I, Type II Engine Urban Interface	35	8	187
Ambulances that are used for transport:	15	8	140
Tankers or Tenders (pumping capacity of less than 750 gallons per minute (gpm) and water capacity of 1,000 gallons or more):	0	0	0
Aerial Apparatus: Aerial Ladder Truck, Telescoping, Articulating, Ladder Towers, Platform, Tiller Ladder Truck, Quint	13	5	76
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	0	0	0
Rescue Vehicles: Rescue Squad, Rescue (Light, Medium, Heavy), Technical Rescue Vehicle, Hazardous Materials Unit	16	3	86
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, Bariatric Ambulance	23	5	112

Regional Call Volume

	2013	2012	2011
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, Enter 0)			
Structural Fires	1419	1149	1124
False Alarms/Good Intent Calls	6427	6009	6373
Vehicle Fires	368	381	420
Vegetation Fires	134	295	207
EMS-BLS Response Calls	39421	36427	33380
EMS-ALS Response Calls	15972	15053	14272
EMS-BLS Scheduled Transports	0	0	0
Community Paramedic Response Calls	0	0	0
EMS-ALS Scheduled Transports	0	0	0
Vehicle Accidents w/o Extrication	697	534	508
Vehicle Extrications	368	317	291
Other Rescue	12707	8471	7748
Hazardous Condition/Materials Calls	1953	1674	1781
Service Calls	5408	5098	4798

Other Calls and Incidents	479	3494	3633
Total	85353	78902	74535
* How many responses per year by category? (Enter whole numbers only. If you have no calls for any of the categories, Enter 0)			
What is the total acreage of all vegetation fires?	20	12	14

Regional Request Information

1. Select a program for which you are applying. **Regional applications are not eligible for modification of facilities or wellness and fitness programs.** You can apply for as many activities within a program as you need.

Program Name

Regional Request

2. Enter grant-writing fee associated with the preparation of this request. Enter 0 if there is no fee.

\$0

Request Details

The activities for program **Regional Request** are listed in the table below.

Activity	Number of Entries	Total Cost	Additional Funding
Equipment	3	\$ 540,000	\$ 216,000
Personal Protective Equipment	2	\$ 786,000	\$ 0
Training	1	\$ 20,000	\$ 0

Grant-writing fee associated with the preparation of this request. \$0

Equipment

Equipment Details

- 1. What equipment will you purchase with this grant? PPE Washer/Extractor/Dryer
 * Please provide a detailed description of the item selected above. Commercial Turnout Gear Washer/Extractor for each fire station in need.
- 2. Number of units: 27 (whole number only)
- 3. Cost per unit: \$ 10000
(whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)
- 4. Generally the equipment purchased under this grant program will:
 Buy equipment for the first time (never owned before)
- 5. Will the equipment being requested bring the organization into voluntary compliance with a national standard, e.g. compliance with NFPA, OSHA, etc?
 In your Narrative Statement, please explain how this equipment will bring the organization into voluntary compliance. Yes
- 6. Is your department trained in the proper use of the equipment being requested? No
- 7. Are you requesting funding to be trained for these item(s)? Funding for requested training shall be entered in the corresponding Additional Funding section. (Under the Action column select Update Additional Funding) Yes
- 8. If you are not requesting training funds through this application, will you obtain training for this equipment through other sources?

Equipment

Equipment Details

- 1. What equipment will you purchase with this grant? PPE Washer/Extractor/Dryer
 * Please provide a detailed description of the item selected above. Turnout Gear Dryer System for each fire station
- 2. Number of units: 36 (whole number only)
- 3. Cost per unit: \$ 7500
(whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)
- 4. Generally the equipment purchased under this grant program will:
 Buy equipment for the first time (never owned before)

- 5. Will the equipment being requested bring the organization into voluntary compliance with a national standard, e.g. compliance with NFPA, OSHA, etc? Yes
In your Narrative Statement, please explain how this equipment will bring the organization into voluntary compliance.
- 6. Is your department trained in the proper use of the equipment being requested? No
- 7. Are you requesting funding to be trained for these item(s)? Funding for requested training shall be entered in the corresponding Additional Funding section. (Under the Action column select Update Additional Funding) Yes
- 8. If you are not requesting training funds through this application, will you obtain training for this equipment through other sources?

Equipment

Equipment Details

- 1. What equipment will you purchase with this grant? PPE Washer/Extractor/Dryer
* Please provide a detailed description of the item selected above. Set of Washing Machine and Dryer Machine for use on uniforms and bedding. Set for each station in need.
- 2. Number of units: 0 (whole number only)
- 3. Cost per unit: \$ 1000
(whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)
- 4. Generally the equipment purchased under this grant program will:
Buy equipment for the first time (never owned before)
- 5. Will the equipment being requested bring the organization into voluntary compliance with a national standard, e.g. compliance with NFPA, OSHA, etc? Yes
In your Narrative Statement, please explain how this equipment will bring the organization into voluntary compliance.
- 6. Is your department trained in the proper use of the equipment being requested? No
- 7. Are you requesting funding to be trained for these item(s)? Funding for requested training shall be entered in the corresponding Additional Funding section. (Under the Action column select Update Additional Funding) Yes
- 8. If you are not requesting training funds through this application, will you obtain training for this equipment through other sources?

Regional Equipment - Additional Funding (optional unless you're applying for Training funds)

[Budget Object Class Definitions](#)

Additional Funding

a. Personnel	Help	\$ 0
b. Fringe Benefits	Help	\$ 0
c. Travel	Help	\$ 0
d. Equipment	Help	\$ 0
e. Supplies	Help	\$ 0
f. Contractual	Help	\$ 216000
g. Construction	Help	\$ 0
h. Other	Help	\$ 0
i. Indirect Charges	Help	\$ 0
j. State Taxes	Help	\$ 0

Explanation

Personnel Costs - Base rate reimbursement to temporarily detail one officer from each department to oversee project management issues related to grant; to include purchase specifications and procurement, installation, and training program development/coordination.

Contractual Costs - Estimated and averaged installation costs (from our building maintenance divisions) for all extractor, washer, and dryer units. Includes certified electrician work, saw cutting floors and plumbing as necessary for drainage lines in older stations, dryer exhaust vents, floor mounting and other miscellaneous installation costs. All work done to meet city codes.

Regional Equipment - Narrative

*** Section # 1** Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. ***4000 characters**

This grant activity was developed by our "Cancer Awareness Task Force" committee who formed to address the alarming rates of firefighter cancers and new state presumptive death from cancer laws. Firefighters are at a greater risk than the general population for developing prostate cancer, colon cancer, multiple myeloma, and non-Hodgkin's lymphoma; in fact, firefighters are at a greater risk of developing all types of cancer. This increased risk is a result of exposure to the products of combustion. Evidence indicates that the residual particulates from fire have a long term effect on overall health. Not until recently did we relate the long term exposure of those materials found on firefighter turnout gear. There is compelling evidence that suggests it is not the exposure to fire and its byproducts during an incident that is dangerous, as much as the long-term, daily exposure to those materials off-gassing and absorbing from dirty turnout gear.

The Cancer Task Force did analysis of current equipment and also polled the membership of the organization to determine why firefighters were not washing their gear on a regular basis as prescribed by department policy, industry best practice, and manufacturer recommendations. A majority of the personnel responded and it overwhelmingly pointed out that the limited access to washers/extractors/dryers were a major road block to PPE and clothing cleanliness. The poll expanded beyond carcinogens to bloodborne pathogens and other health hazards and supports the critical needs for gear cleaning and decontamination immediately following each and every incident.

This activity of the grant provides a commercial extractor for turnout gear, a specialized gear drying system for turnout gear (and other firefighting equipment as added bonus), and standard washer and dryers for each fire station that does not already have one. We also included dryers for each of the two training division locations. Saint Paul has only three extractors, no dryers, and three city provided washing machines. Minneapolis only has three extractors, no dryers, and three city owned washer/dryers.

The budget includes:

- 27 Commercial Washer/Extractors for Turnout Gear. Quoted at \$10,000 per unit for a total of \$270,000.
- 36 Turnout Gear Dryers (also used for ice rescue, rope, and other equipment drying). Quoted at \$7,500 per unit for a total of \$270,000.
- 27 Standard Washing Machines and Dryers for cleaning on-duty clothing, bedding, and other decontamination needs. Quoted at \$1,000 per set for a total of \$27,000.
- Additional Funding for Contractual Costs – Estimated and averaged installation costs for all extractor, washer, and dryer units. Includes certified electrician work, saw cutting floors for drainage lines in older stations, floor mounting and other miscellaneous installation costs. Total budget \$216,000 for total project completion.
- Personnel Costs – Base rate reimbursement to temporarily detail one officer from each department to oversee project management issues related to grant; to include purchase specifications and procurement, installation, and training program development/coordination. Total budget \$90,000.

*** Section # 2** Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. ***4000 characters**

The investment in this grant funded project will better equip our firefighters to respond to the fires and other emergency incidents to which we are summoned. This significant investment in protecting our personnel will pay off in long-term results by safely protecting our firefighters from the toxic and cancer causing effects of wearing contaminated PPE. It will further protect our departments, the cities, and the taxpayers from the long-term costs associated with lawsuits and liability costs for exposure injuries and line-of-duty deaths.

This equipment will bring us into compliance with Minnesota State Statute 182.653 regarding workplace safety and known hazards to employees. Equipment purchased will comply with NFPA 1851 Standard on Selection, Care and Maintenance of Protective Ensembles for Structural Firefighting. The equipment will also bring us into compliance with local standards developed to address State of Minnesota line-of-duty-death protection based on Presumptive Cancer death benefits. We will also gain compliance with Minnesota OSHA Fire Brigade Standards, and specifically the General Duty clause of that law.

The costs are reasonable and we anticipate that the larger regional purchasing power will more effectively keep product and installation costs lower than a station-by-station approach over many budget cycles. This grant will further allow us to replace some "illegal" washers and dryers that have been purchased privately by station funds and installed incorrectly by station personnel and which violate city electrical and safety codes. All of this equipment will allow us to better maintain the PPE currently owned and that which is also requested by this grant, which will expand the life expectancy of the PPE in addition to the life expectancy of the wearers. There are positive budget impacts made by properly maintaining the PPE itself, in addition to the health cost savings.

Every member of both departments will benefit from the long-term investment of this grant designed to protect them from the dangers of their job. This entire grant award will additionally be a long-term financial win for our communities and the state-wide response commitments, as we save them the impact of significant financial burdens and at the same time better prepare ourselves to protect them. The savings afforded to our short-range budget needs will allow us to prioritize many other smaller, yet equally deserving projects over the next few years. This award will allow us to do more by eliminating several cost burdens that would otherwise be priority above other important goals.

*** Section # 3** Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? ***4000 characters**

The equipment and PPE requested by this grant are the outcome of joint departmental research on how to make our jobs safer while providing a better

level of service to our community. In an attempt to provide the best service possible, while at the same time promoting firefighter safety, we believe that we have identified an achievable solution to known life-safety problems that we face on a daily basis. The award of this grant will allow us to overcome the financial restraints that are prohibiting us from doing our job in the safest way possible. We truly believe that this grant will allow us to set a benchmark for firefighter safety in our city and even our state. We believe the ripple effect of this project will far exceed our goals as we put this plan into action.

There is a high degree of sensitivity among firefighters to the notion of having clean turnout gear. The prevailing cultural consensus is that dirty turnout gear symbolizes experience, bravery, and firefighting knowledge. Unfortunately, today's residential fires contain carcinogenic gases and particulate substances from burning plastics and synthetics, commercial and vehicle fires have highly concentrated toxicants, and dumpster fires contain completely unknown substances. These gases and particulates saturate firefighter's turnout gear, equipment, and clothes. These toxins, in turn, are transferred to fire rigs and stations where they remain in place, increasing the long term exposure of firefighters to these substances.

To enforce a policy which standardizes turnout gear, equipment, and fire vehicle cleaning and institutionalize organizational behaviors which counteract noncompliance, we need to provide firefighters with the proper equipment to effectively deal with the identified problems. This equipment will enable policy which will address compliance and deal with firefighter behaviors which lead to engaging in unhealthy rituals and activities, such as continually wearing dirty turnout gear and contaminated duty clothing.

Admittedly, if this grant is not awarded, we will still respond when called to do the best job we can with the equipment that we have available. Firefighters and civilians alike will share the risk potential if we cannot significantly address the inadequacies described in this grant request. All of the equipment that we have requested will greatly enhance our ability to protect our communities and our neighboring communities to which we respond. It will further enable us to perform our job better and with a higher level of safety, pride, and confidence.

While our fire departments are supported by our respective city management groups, the budget challenges gridlock our safety efforts as there are only so many available funds to distribute between many of the city's essential services. We realize that you will undoubtedly see thousands of equally qualified requests from departments of all sizes. We understand that not all of these departments will be fortunate enough to receive a grant this year and we hope that we have convinced you of our project's unique worthiness and merit. This grant will save lives and is in the true spirit of what the Assistance to Firefighters Act Grants were intended.

Personal Protective Equipment

Personal Protective Equipment Details

1. Select the PPE that you propose to acquire

Coats

Please provide a detailed description of the item selected above.

NFPA Compliant Structural Turnout Coat. Will meet most recent NFPA standard at time of grant award.

2. Number of units:

393 (whole number only)

3. Cost per unit:

\$1200 (whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)

4. Please provide your percentage for the appropriate question below:

100%

- For protective clothing, what percentage of your on-duty active members **will have** PPE that meets applicable NFPA and OSHA standards if this grant is awarded?
- If you are requesting new SCBA, what percentage of your seated riding positions **will have** compliant SCBA assigned to it if this grant is awarded?
- If you are asking for specialized PPE (e.g., Haz-Mat), what percentage of applicable members **will have** specialized PPE that meets applicable NFPA and OSHA standards if this grant is awarded?

5. What is the purpose of this request?

To replace or upgrade obsolete/damaged PPE/SCBA (must be a minimum of 10 years or older and two NFPA cycles)

If you have indicated you are requesting PPE (any PPE other than SCBA/Cylinders/Face Pieces) in Question 1, what are the specific ages of your PPE in years? If requesting SCBA/Cylinders/Face Pieces, please select "N/A", do not provide ages here but continue on to the next question.

Please assure that you've accounted for ALL gear for ALL members declared in Department Characteristics - not just the gear you wish to replace. If you have 30 members then account for 30 sets of PPE.

Age (in Years)	Current Inventory	Being Replaced
Less than 1	6	0
1	94	0
2	195	0
3	21	0
4	4	0
5	274	0
6	438	0
7	97	0
8	101	0
9	55	0

10	4	4
11	35	35
12	44	44
13	22	22
14	13	13
15	24	24
16 or more	90	90
Number of members without PPE	161	161

6. Are you requesting Face Pieces only? No

If yes, how many?

If you have indicated you are requesting SCBA/Cylinders/Face Pieces in Question 1, to which edition(s) of the NFPA 1981 standard are your SCBA/Cylinders/Face Pieces compliant? If not requesting SCBA/Cylinders/Face Pieces, please select "N/A" and continue on to the next question. Please account for ALL SCBA/Cylinders/Face Pieces currently in your department's inventory - not just the SCBA/Cylinders/Face Pieces you wish to replace. If you have damaged or inoperable SCBA/Cylinders/Face Pieces please list them in the "Obsolete/Damaged" section.

N/A

Year	Current Inventory			Being Replaced		
	SCBA	Cyl	FP	SCBA	Cyl	FP
2013 Edition						
2007 Edition						
2002 Edition and older						
Obsolete/damaged						

7. If awarded SCBAs, will you be requesting additional Face Pieces? No

If yes, how many?

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

9. Are you requesting funding for training for this PPE/SCBA? (Funding for requested training should be requested in the PPE Additional Funding section). No

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

Personal Protective Equipment

Personal Protective Equipment Details

1. Select the PPE that you propose to acquire: Pants

Please provide a detailed description of the item selected above. NFPA Compliant Structural Turnout Pants. Will meet most recent NFPA standard at time of grant award.

2. Number of units: 393 (whole number only)

3. Cost per unit: \$800 (whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)

4. Please provide your percentage for the appropriate question below: 100%

- For protective clothing, what percentage of your on-duty active members **will have** PPE that meets applicable NFPA and OSHA standards if this grant is awarded?
- If you are requesting new SCBA, what percentage of your seated riding positions **will have** compliant SCBA assigned to it if this grant is awarded?
- If you are asking for specialized PPE (e.g., Haz-Mat), what percentage of applicable members **will have** specialized PPE that meets applicable NFPA and OSHA standards if this grant is awarded?

5. What is the purpose of this request? To replace or upgrade obsolete/damaged PPE/SCBA (must be a minimum of 10 years or older and two NFPA cycles)

If you have indicated you are requesting PPE (any PPE

other than SCBA/Cylinders/Face Pieces) in Question 1, what are the specific ages of your PPE in years? If requesting SCBA/Cylinders/Face Pieces, please select "N/A", do not provide ages here but continue on to the next question.

Please assure that you've accounted for ALL gear for ALL members declared in Department Characteristics - not just the gear you wish to replace. If you have 30 members then account for 30 sets of PPE.

Age (in Years)	Current Inventory	Being Replaced
Less than 1	6	0
1	94	0
2	195	0
3	21	0
4	4	0
5	274	0
6	438	0
7	97	0
8	101	0
9	55	0
10	4	4
11	35	35
12	44	44
13	22	22
14	13	13
15	24	24
16 or more	90	90
Number of members without PPE	161	161

6. Are you requesting Face Pieces only? No

If yes, how many?

If you have indicated you are requesting SCBA/Cylinders/Face Pieces in Question 1, to which edition(s) of the NFPA 1981 standard are your SCBA/Cylinders/Face Pieces compliant? If not requesting SCBA/Cylinders/Face Pieces, please select "N/A" and continue on to the next question. Please account for ALL SCBA/Cylinders/Face Pieces currently in your department's inventory - not just the SCBA/Cylinders/Face Pieces you wish to replace. If you have damaged or inoperable SCBA/Cylinders/Face Pieces please list them in the "Obsolete/Damaged" section.

N/A

Year	Current Inventory			Being Replaced		
	SCBA	Cyl	FP	SCBA	Cyl	FP
2013 Edition						
2007 Edition						
2002 Edition and older						
Obsolete/damaged						

7. If awarded SCBAs, will you be requesting additional Face Pieces? No

If yes, how many?

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

9. Are you requesting funding for training for this PPE/SCBA? (Funding for requested training should be requested in the PPE Additional Funding section). No

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

Regional PPE - Narrative

* Section # 1 Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. *4000 characters

The goal of this grant activity was developed by our "Cancer Awareness Task Force" committee who joined to address the alarming rates of firefighter cancers and new state presumptive death from cancer laws. Firefighters are at a greater risk than the general population for developing prostate cancer, colon cancer, multiple myeloma, and non-Hodgkin's lymphoma; in fact, firefighters are at a greater risk of developing all types of cancer. This increased risk is a result of exposure to the products of combustion. Evidence indicates that the residual particulates from fire have a long term effect on overall health. Much research on the subject stresses the health dangers of combustible materials, but not until recently did we relate the long term exposure of

those materials found on firefighter turnout gear, equipment, and helmets. There is compelling evidence that suggests it is not the exposure to fire and its byproducts during an incident that is dangerous as much as the long term, daily exposure to those materials off-gassing and absorbing from dirty turnout gear.

The Cancer Awareness Task Force analyzed a department-wide inventory of Turnout Gear from both departments. They also polled the membership of the organizations to determine why firefighters were not washing their gear on a regular basis as prescribed by department policy, industry best practice, and manufacturer recommendations. In addition to the lack of cleaning equipment requested by this grant, the analysis clearly demonstrated that many of our firefighters only have one set of turnout gear and no spare set available to use during cleaning and decontamination procedures.

We became aware that due to budget cuts over the past decade, we have fallen behind (more so at Saint Paul than Minneapolis) on our policy of issuing two NFPA compliant sets of turnout gear for every firefighter. Two sets of gear has been determined to be essential due to the frequency of our annual call volume and decontamination needs. Additionally, Minnesota has some of the coldest and longest winters in the United States and turnout gear used at fires from November through April is often frozen and requires longer cleaning and drying time. This turn-around time mandates that every member be issued two sets of gear. We have been providing this to all recently hired personnel, but many in our ranks have fallen through the cracks due to PPE damages caused by usage, body size changes, and a host of other excuses that are unacceptable from a firefighter safety standpoint.

The full inventory count showed that 262 (SPFD 262/MFD 0) firefighters had at least one set of turnouts that was older than 10 years and two NFPA cycles. Even more alarming, it showed that 161 personnel (SPFD 104/MFD 57) had no second set available to them. This grant would provide the required 393 sets to gain us compliance with our current policies and best practice. Addressing future policy sustainment concerns, this grant will allow us to jump start our budget to address the future need to replace another 253 sets of gear in the two years immediately following this grant award through normal budget measures as that PPE will fall into NFPA non-compliance based on age as well. If we could ask for those sets, we would, but we are limited by program guidance. We have been assured that this grant will get us back on track and future consistency will be a budget priority of both fire chiefs.

The activity budget includes:

- 393 Turnout Coats. Cost is based on recent specs at \$1,300 for a grant total of \$510,900.
- 393 Turnout Pants. Cost is based on recent specs at \$900 for a grant total of \$353,700.
- Matching fund requirements will be paid per capita by SPFD (336 sets) and MFD (57 sets).

*** Section # 2 Cost/Benefit:** In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. ***4000 characters**

The investment in this PPE will better equip our firefighters to respond to the fires and emergency incidents to which we are summoned. This significant investment in protecting our personnel will pay off in long-term results by safely protecting our firefighters from the significant carcinogen and toxic exposures related to fire incidents. It will further protect our departments, the cities, and the taxpayers from the long-term costs associated with lawsuits and liability costs for exposure injuries and line-of-duty deaths.

This PPE will bring us into compliance with Minnesota State Statute 182.653 regarding workplace safety and known hazards to employees. The PPE purchased will comply with NFPA 1851 Standard on Selection, Care and Maintenance of Protective Ensembles for Structural Firefighting, as well as NFPA 1971 Standard on Protective Ensembles. The PPE will also bring us into compliance with local standards developed to address State line-of-duty-death protections based on Presumptive Cancer death benefits. It will also gain us compliance with Minnesota OSHA Fire Brigade Standards, specifically the General Duty clause regarding known hazards.

The costs are reasonable and based on current gear spec pricing. Every member of both departments will benefit from the long-term investment of this grant designed to protect them from the dangers of their job. Additionally, this entire grant award will be a long-term financial win for our communities and the state-wide response commitments, as we save them the fiscal impact of significant financial burdens and at the same time better prepare ourselves to protect them. The savings afforded to our short-range budget needs will allow us to prioritize many other smaller, yet equally deserving projects over the next few years. This award will allow us to do more by eliminating significant cost burden that would otherwise be priority above other equally important goals.

*** Section # 3 Statement of Effect:** How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? ***4000 characters**

The equipment and PPE requested by this grant are the outcome of joint departmental research on how to make our jobs safer while providing a better level of service to our community. In an attempt to provide the best service possible, while at the same time promoting firefighter safety, we believe that we have identified an achievable solution to known life-safety problems that we face on a daily basis. The award of this grant will allow us to overcome the financial restraints that are prohibiting us from doing our job in the safest way possible. This grant will financially position us so that we will be able to commit to a future replacement budget that will not find us in the same situation years from now. We truly believe that this grant will allow us to set a benchmark for firefighter safety in our cities and state.

There is a high degree of sensitivity among firefighters to the notion of having clean turnout gear. The prevailing cultural consensus is that dirty turnout gear symbolizes experience, bravery, and firefighting knowledge. Unfortunately, today's residential fires contain carcinogenic gases and particulate substances from burning plastics and synthetics, commercial and vehicle fires have highly concentrated toxicants, and dumpster fires contain completely unknown substances. These gases and particulates saturate firefighter's turnout gear, equipment, and clothes. These toxins, in turn, are transferred to fire rigs and stations where they remain in place, increasing the long term exposure of firefighters to these substances.

To enforce a policy which standardizes turnout gear cleaning and institutionalize organizational behaviors which counteract noncompliance, we need to provide firefighters with the two NFPA compliant sets of proper PPE needed to effectively deal with the identified problems. This PPE standard will enable policy which will address compliance and deal with firefighter behaviors which lead to engaging in unhealthy rituals and activities, such as continually wearing dirty turnout gear.

If this grant is not awarded, we will still respond when called to fight fires and handle emergencies with the PPE that we have available. Firefighters and civilians alike will share the risk potential if we cannot significantly address the inadequacies described in this grant request. All of the PPE that we have requested will greatly enhance our ability to protect our communities and our neighboring communities to which we respond. It will further enable us to perform our job better and with a higher level of safety and confidence.

Both of our fire departments are supported by our respective city management groups, but due to budget constraints there are only so many available funds to distribute between many of the city's essential services. We realize that you will see thousands of equally qualified requests from departments of all sizes. We understand that not all of these departments will be fortunate enough to receive a grant this year and we hope that we have convinced you of our project's unique worthiness. The PPE provided by this grant will have immediate and long-lasting effects on firefighter safety. We look forward to

your positive response.

Training Program

Training Details

1. What type of training are you requesting?

Firefighter Safety and Survival Training (NFPA 1407/29 OSHA 1910.146)

Please provide a detailed description of the Training Program you selected.

Cancer Awareness Training Program. Will provide information on firefighter cancer statistics, state law changes, and proper PPE and equipment cleaning procedures. Grant provides forty (4-hour) classroom sessions contracted through state technical college system and using certified instructors at standard instructional rate.

2. Generally, this program can best be categorized as:

Training that is evaluated/tested using a national, state or local standard

3. What percentage of personnel will be trained by this program?

100 %

4. Generally, the training program provided under this grant:

Will bring your region into compliance with mandated training requirements, please specify:

Explanation:

Will bring us into compliance with local standards developed to address State line of duty death protection based on Presumptive Cancer death benefits. Students will learn about FF cancer statistics, gear cleaning policy, and necessary documentation involved with new laws. Also brings us into compliance with MN OSHA Fire Brigade Standards, specifically the "General Duty" clause. Additionally, allows compliance with State Statute 182.653 regarding safe workplaces and known hazards to employees.

5. Will this training enhance your ability to provide Mutual Aid?

If you answered Yes to the question above, please explain.

Yes

MFD and SPFD are primary mutual aid partners and have mutual aid agreements with over 100 fire departments in 11 counties surrounding our two cities. Additionally, the MN Task Force 1 USAR team has state-wide response capabilities. This grant will benefit every department in the state of Minnesota by fully protecting our responders to back up our mutual aid partners.

6. Will this training be:

Instructor-led

Budget Item - Firefighter Safety and Survival Training (NFPA 1407/29 OSHA 1910.146)

*Item	Specialized
*Please provide a detailed description of the item selected above.	Four-hour classroom presentation, to include validation testing, on topics of State Cancer Presumptive Line of Duty Death law, Firefighter Cancer Awareness, PPE and Equipment cleaning, and will reinforce the proper use of decontamination and cleaning equipment purchased by this AFG grant. Will be contracted through state technical college system using certified instructors. See project narrative.
* Select Object Class	Contractual
If you selected other above, please specify	
* Number of units	40 (Whole number only)
* Cost per unit	\$ 500 (whole dollar amounts only; this amount should reflect any volume discounts, rebates, etc.)

Regional Training - Narrative

* **Section # 1** Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. *4000 characters

The goal of this grant activity was developed by a department "Cancer Awareness Task Force" committee who joined to address the alarming rates of firefighter cancers and new state presumptive death laws. Firefighters are at a greater risk than the general population for developing prostate cancer, colon cancer, multiple myeloma, and non-Hodgkin's lymphoma; in fact, firefighters are at a greater risk of developing all types of cancer. This increased risk is a result of exposure to the products of combustion. Evidence indicates that the residual particulates from fire have a long term effect on overall health. Much research on the subject stresses the health dangers of combustible materials, but not until recently did we relate the long term exposure of

those materials found on firefighter turnout gear, equipment, and helmets. There is compelling evidence that suggests it is not the exposure to fire and its byproducts during an incident that is dangerous as much as the long term, daily exposure to those materials off-gassing and absorbing from dirty turnout gear.

This grant will support development of, and training on, a policy which standardizes turnout gear, equipment, and apparatus cleaning and will institutionalize organizational behaviors which counteract existing noncompliance. The training will be sensitive to an understanding of the role that cultural behavior, groupthink, compliance, and internalization play in perpetuating firefighter behaviors which lead to engaging in unhealthy rituals and activities, such as continually wearing dirty turnout gear and contaminated duty clothing.

This activity of the grant provides contractual costs for training for 100% of firefighting personnel at both departments. Training will be presented to on-duty personnel as part of scheduled training rotations so that there are no overtime or backfill costs needed. This four-hour classroom presentation will address topics of new State Cancer Presumptive Line-of-Duty-Death law, Firefighter Cancer Awareness, PPE and Equipment cleaning, and will reinforce the use of PPE and cleaning equipment purchased by this AFG grant. Training will be contracted through a state technical college system using certified instructors and utilize standard pay rates as outlined in the AFG program guidance. Training will be validated through written testing to confirm comprehension of content and policy.

The budget includes:

- 40 four-hour classes. Cost per class is \$500, for total budget of \$20,000.

*** Section # 2 Cost/Benefit:** In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the costs incurred? Are the costs reasonable? Provide justification for the budget items relating to the costs of the requested items. ***4000 characters**

The investment in this grant funded training will better prepare our firefighters to respond to the fires and emergency incidents to which we are summoned. This investment in training our personnel will pay off in long-term results by safely protecting our firefighters. It will further protect our departments, the cities, and the taxpayers from the long-term costs associated with lawsuits and liability costs for preventable exposure injuries and line-of-duty deaths.

This training will bring us into compliance with Minnesota State Statute 182.653 regarding workplace safety and known hazards to employees, and gain compliance with local standards developed to address State line-of-duty-death protections based on Presumptive Cancer death benefits. Additionally, it will allow us to gain compliance with Minnesota OSHA Fire Brigade Standards and the General Duty clause regarding known hazards.

The costs are reasonable and support a positive relationship with fire training programming at the state technical college system level. We will open additional seats to other area departments throughout our mutual aid network based on space availability beyond our on-duty training capacity. This is standard practice for most training evolutions. The on-duty training will be done within established daily staffing goals so that no additional stress is put on normal response operations.

All class attendees will benefit from the long-term investment of this grant designed to protect them from the dangers of their job. This entire grant award will be a long-term financial win for our communities and the state-wide response commitments, as we save them the impact of significant financial burdens and at the same time better prepare ourselves to protect them.

*** Section # 3 Statement of Effect:** How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? ***4000 characters**

The training program requested by this grant is the outcome of joint departmental research on how to make our jobs safer while providing a better level of service to our community. In an attempt to provide the best service possible, while at the same time promoting firefighter safety, we believe that we have identified an achievable solution to known life-safety problems that we face on a daily basis. The award of this grant will allow us to overcome the financial restraints that are prohibiting us from doing our job in the safest way possible. We believe that this grant will allow us to set a benchmark for firefighter safety and firefighter cancer awareness in our state. We believe the ripple effect of this project will far exceed our goals as we put this plan into action and multiple organizations benefit from this award.

There is a high degree of sensitivity among firefighters to the notion of having clean turnout gear. The prevailing cultural consensus is that dirty turnout gear symbolizes experience, bravery, and firefighting knowledge. Unfortunately, today's residential fires contain carcinogenic gases and particulate substances from burning plastics and synthetics, commercial and vehicle fires have highly concentrated toxicants, and dumpster fires contain completely unknown substances. These gases and particulates saturate firefighter's turnout gear, equipment, and clothes. These toxins, in turn, are transferred to fire rigs and stations where they remain in place, increasing the long term exposure of firefighters to these substances.

To enforce a policy which standardizes turnout gear, equipment, apparatus cleaning and institutionalize organizational behaviors which counteract noncompliance, we need to train firefighters to understand and effectively deal with the identified problems. This training will address compliance issues and discourage firefighter beliefs which lead to engaging in unhealthy rituals and activities, such as continually wearing dirty turnout gear and contaminated duty clothing.

If this grant is not awarded, we will still respond when called to do the best job we can with the equipment that we have available. Firefighters and civilians alike will share the risk potential if we cannot significantly address the inadequacies described in this grant request. All of the training, equipment and PPE that we have requested will greatly enhance our ability to protect ourselves, our communities, and our neighboring communities to which we respond. It will further enable us to perform our job better and with a higher level of safety and confidence.

Both of our fire departments are supported by our respective city management groups. However, due to events affecting the budget there are only so many available funds to distribute between many of the city's essential services. Even in the face of setbacks, we have continued to make positive progress over the past few years and we will continue to move forward toward our goals. We understand that not all fire departments will be fortunate enough to receive a grant this year and we hope that we have convinced you of our project's unique worthiness. This investment will save lives and we look forward to your positive response.

Budget

Budget Object Class

a. Personnel	\$ 0
b. Fringe Benefits	\$ 0
c. Travel	\$ 0
d. Equipment	\$ 1,326,000
e. Supplies	\$ 0
f. Contractual	\$ 236,000
g. Construction	\$ 0
h. Other	\$ 0
i. Indirect Charges	\$ 0
j. State Taxes	\$ 0
Federal and Applicant Share	
Federal Share	\$ 1,420,000
Applicant Share	\$ 142,000
Applicant Share of Award (%)	10
* <u>Non-Federal Resources</u> <i>(The combined Non-Federal Resources must equal the Applicant Share of \$ 142,000)</i>	
a. Applicant	\$ 142,000
b. State	\$ 0
c. Local	\$ 0
d. Other Sources	\$ 0

If you entered a value in Other Sources other than zero (0), include your explanation below. You can use this space to provide information on the project, cost share match, or if you have an indirect cost agreement with a federal agency.

Total Budget **\$ 1,562,000**

Narrative Statement

For 2011 and on, the Narrative section of the AFG application has been modified. You will enter individual narratives for the Project Description, Cost-Benefit, Statement of Effect, and Additional Information in the Request Details section for each Activity for which you are requesting funds. Please return to the Request Details section for further instructions. You will address the Financial Need in Applicant Characteristics II section of the application. We recommend that you type each response in a Word Document outside of the grant application and then copy and paste it into the spaces provided within the application.

Assurances and Certifications

FEMA Form SF 424B

You must read and sign these assurances. These documents contain the Federal requirements attached to all Federal grants including the right of the Federal government to review the grant activity. You should read over the documents to become aware of the requirements. The Assurances and Certifications must be read, signed, and submitted as a part of the application.

Note: Fields marked with an * are required.

O.M.B Control Number 4040-0007

Assurances Non-Construction Programs

Note: 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:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) 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. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen 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. Sections 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. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 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 Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) 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 Title 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 interest 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 amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 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. Section 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.

Signed by **Ken Gilliam** on **12/04/2014**

Form 20-16C

You must read and sign these assurances.

Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters and Drug-Free Workplace Requirements.

Note: Fields marked with an * are required.

O.M.B Control Number 1660-0025

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 44 CFR Part 17, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Homeland Security (DHS) determines to award the covered transaction, grant, or cooperative agreement.

1. Lobbying

A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons (entering) into a grant or cooperative agreement over \$100,000, as defined at 44CFR Part 18, 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 extension, continuation, renewal amendment or modification of any Federal grant or cooperative agreement.

(b) If any other funds 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 the sub awards at all tiers (including sub grants, contracts under grants and cooperative agreements and sub contract(s)) and that all sub recipients shall certify and disclose accordingly.

2. Debarment, Suspension and Other Responsibility Matters (Direct Recipient)

A. As required by Executive Order 12549, Debarment and Suspension, and implemented at 44CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A, the applicant certifies that it and its principals:

(a) 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.

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

(c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification: and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause 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 44CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17.615 and 17.620:

(A) The applicant certifies that it will continue to provide a drug-free workplace by:

(a) 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 specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about:

- (1) The dangers of drug abuse in the workplace;
- (2) The grantees policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

- (1) Abide by the terms of the statement and
- (2) Notify the employee 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.

(e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable DHS awarding office, i.e. regional office or DHS office.

(f) Taking one of the following actions, against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) 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

(2) 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.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

(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

City

State

Zip

Action

If your place of performance is different from the physical address provided by you in the Applicant Information, press **Add Place of Performance** button above to ensure that the correct place of performance has been specified. You can add multiple addresses by repeating this process multiple times.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for DHS funding. States and State agencies may elect to use a Statewide certification.

Signed by **Ken Gilliam** on 12/04/2014

FEMA Standard Form LLL

Only complete if applying for a grant for more than \$100,000 and have lobbying activities. See Form 20-16C for lobbying activities definition.

Submit Application

Application 100% complete, Submitted

Please click on any of the following links to visit a particular section of your application. Once all areas of your application are complete, you may submit your application.

Application Area	Status
Applicant's Acknowledgements	Complete
Overview	Complete
Contact Information	Complete
Applicant Information	Complete
Applicant Characteristics (I)	Complete
Applicant Characteristics (II)	Complete
Department Call Volume	Complete
Request Information	Complete
Request Details	Complete
Budget	Complete
Assurances and Certifications	Complete

PLEASE READ THE FOLLOWING STATEMENTS BEFORE YOU SUBMIT.

- **YOU WILL NOT BE ALLOWED TO EDIT THIS APPLICATION ONCE IT HAS BEEN SUBMITTED.** If you are not yet ready to submit this application, save it, and log out until you feel that you have no more changes.
- **When you submit this application, you, as an authorized representative of the organization applying for this grant, are certifying that the following statements are true:**

To the best of my knowledge and belief, all data submitted in this application are true and correct.

This application has been duly authorized by the governing body of the applicant and the applicant will comply to the Assurances and Certifications if assistance is awarded.

To sign your application, check the box below and enter your password in the space provided. To submit your application, click the Submit Application button below to officially submit your application to FEMA.

Note: The primary contact will be responsible for signing and submitting the application. Fields marked with an * are required.

I, Ken Gilliam, am hereby providing my signature for this application as of 04-Jun-2015.