



**COLORADO**  
 Division of Homeland Security  
 & Emergency Management  
 Department of Public Safety

**2024 EMPG-LEMS Annual Program Paper**  
**Part II Jurisdiction Information and Signatures (v.010118)**  
 Note: This document serves to meet the requirements of §24-33.5-707(7), C.R.S.

**Jurisdiction Name:**

**Emergency Program Manager**

Name: Brittney Ciarlo  
 Job Title: Emergency Manager

Mailing Address: 401 Main St Walsenburg Co 81089

Physical Address (if different): same as above

**Phone Contact Information**

Office Phone number: 719-738-3000 x 121  
 24 Hour Emergency Line: 719-738-1044  
 Office Fax: 719-738-3996  
 Cellular: 719-989-8977  
 Pager:  
 E-Mail Address: bciarlo@huerfano.us

Employment Status (Please indicate how many)

Paid Full Time: 1    Paid Part Time:    Volunteer:    Other:

Jurisdiction Job Title Program Manager Reports to: County Administrator

Hours worked per week for jurisdiction in all job titles: 40

Hours worked per week devoted to Emergency Management: 40

**Additional Emergency Management Staff**

Type of Employment	How many?	Total staff hours/week	Total E.M. hours/week
Paid full time professional			
Paid full time clerical			
Paid part time professional			
Paid part time clerical			
Volunteer			
Other personnel			

Senior Elected Official (Name and Title) \_\_\_\_\_

Chief Executive Officer (if different from above) \_\_\_\_\_

Signature/Chief Executive \_\_\_\_\_

Signature/Emergency Manager/Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Signature/DHSEM Regional Field Manager \_\_\_\_\_ Date \_\_\_\_\_



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**Emergency Management Program Grant (EMPG)  
 Local Emergency Manager Support (LEMS)  
 Program Funding Application: Part III (v.0922)**

**Staffing Pattern Worksheet**


Note: This worksheet is provided for internal reference only and will not be accepted as part of the application

**JURISDICTION: Huerfano County**

1a) Employee Name	2) Classification Specification/Full Position Title	3) Date of Appointment or Date Hired	4) Employee Status- Type of Appointment
Brittney Ciarlo	Emergency Manager		Full Time

1b) PAID Employee Name	5) Jurisdiction Gross Annual salary (All job titles)	6) Gross Annual Employer-Provided Benefits	7) Total Hours/Week	8) LEM Hours/Week	9) Percent LEM Hours/Week	10) LEMS Eligible Salary	11) LEMS Eligible Benefits
Brittney Ciarlo	\$71,500	\$22,204	40	40	100%	\$71,500	\$22,204
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
					0%	\$0	\$0
<b>Totals</b>	<b>\$ 71,500.08</b>	<b>\$ 22,204.00</b>				<b>\$71,500</b>	<b>\$22,204</b>

Enter in Slot A On Funding Request	Enter in Slot B On Funding Request
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**Emergency Management Program Grant (EMPG)  
 Local Emergency Manager Support (LEMS)  
 Program Funding Application: Part III (v.0922)**

**Staffing Pattern and Program Funding Worksheet**

Note: This for MUST be resubmitted *whenever the jurisdiction has personnel changes.*

**JURISDICTION:**

Salaries & Benefits		
<b>A</b>	LEMS Eligible Salary (Staffing Report Block 10 Total):	\$71,500
<b>B</b>	LEMS Eligible Benefits (Staffing Report Block 11 Total):	\$22,204
<b>C</b>	<b>Total Salary and Benefits (a+b): \$</b>	<b>\$93,704</b>
Travel Expenses		
<b>D</b>	Local Travel (mileage, fleet expense, or other):	\$ 3,500.00
<b>E</b>	Out of State Travel:	
<b>F</b>	Conference & Seminars (Registration Fees, Hotels, etc.):	
<b>G</b>	Training (Registration Fees, hotels, etc.):	\$ 4,000.00
<b>H</b>	Per Diem:	\$ -
<b>I</b>	Other (Dues, Certifications and Membership Fees):	
<b>J</b>	<b>Total Travel Expenses (D+E+F+G+H+I): \$</b>	<b>\$ 7,500.00</b>
Office Support Expenses (more than \$200 for year)		
<b>K</b>	Office Supplies and Materials:	\$ 5,000.00
<b>L</b>	Equipment Purchase:	\$ 5,000.00
<b>M</b>	Equipment Lease:	
<b>N</b>	Rent, Utilities, etc.:	
<b>O</b>	Printing & Copying:	\$ 1,000.00
<b>P</b>	Postage:	
<b>Q</b>	Other (Advertising, Cell Phones, Aircards, etc.):	\$ 1,440.00
<b>R</b>	<b>Total Office Support Expenses (K+L+M+N+O+P+Q): \$</b>	<b>\$ 12,440.00</b>
<b>S</b>	<b>Total Request (C+J+R): \$</b>	<b>\$ 113,644.08</b>
<b>T</b>	<b>Federal (Eligible for Reimbursement) Amount (One half of S): \$</b>	<b>\$ 56,822.04</b>

\_\_\_\_\_  
 Jurisdiction Emergency Manager Signature \_\_\_\_\_ Date

\_\_\_\_\_  
 Jurisdiction Chief Financial Officer Signature \_\_\_\_\_ Date

\_\_\_\_\_  
 Jurisdiction Chief Financial Officer Printed Name \_\_\_\_\_ Email

\_\_\_\_\_  
 COEM Regional Field Manager Signature \_\_\_\_\_ Date

# Application - Huerfano County EMPG 2024

Draft

## Application Summary

This form outlines all project details, including Scope of Work, all costs, and location worksheets.

**Title:** Huerfano County EMPG 2024

**Total Project Cost:** \$113,644.08

**Eligible Amount:** \$113,644.08

**Funding Sources:** Federal - \$0.00

State - \$0.00

Local - \$0.00

**FEMA Obligation Data:** Federal Number - < no value >

Edit

## Workflow Summary

**Current Step:** 1) Unsubmitted  
Description: Submission

 **Draft**

## Grant

### EMPG-24 Emergency Management Performance Grant (EMPG)

Emergency Management Performance Grant

Start Date: January 1, 2024

End Date: December 31, 2024

Work Deadline: September 30, 2026

CFDA Number: 97.042

## Applicant

### Huerfano (County)

Huerfano County (Region - South, Statewide, Service Area - South Region)

UEI: DL84BCKRKZC7

FIPS: 055-99055

DUNS #: 014846562 Type: County

Physical/Mailing: 401 Main Street, Suite 201

Walsenburg, CO, 81089

Senior Elected Official Name:

Senior Elected Official Title:

Chief Executive Official:

Additional Emergency Management Staff			
Type	Number	Total Staff Hours/Week	Total EM Hours/Week
Full Time Professional	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Time Clerical	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part Time Professional	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part Time Clerical	<input type="text"/>	<input type="text"/>	<input type="text"/>
Volunteer	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Personnel	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Jurisdiction Information**

Agency or Jurisdiction DUNS #:

Parent Organization DUNS #:

Unique Entity Identifier (UEI):

Congressional District:

**Agency or Jurisdiction Physical Address**

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

**Agency or Jurisdiction Mailing Address**

# Personnel

## Staffing Pattern

Employee Details	Gross Annual Salary	Gross Annual Benefits	Total Hours Per Week	EM Hours Per Week	% EM Hours Per Week	EMPG Eligible Salary	EMPG Eligible Benefits	
Name: Brittney Ciarlo								
Title: Emergency Manager	\$71,500.08	\$22,204.00	40.00	40.00	100.00%	\$71,500.08	\$22,204.00	Edit
Type: Full-Time Employee								
Start Date: May 19, 2019								
<b>Grand Total</b>	<b>\$71,500.08</b>	<b>\$22,204.00</b>				<b>\$71,500.08</b>	<b>\$22,204.00</b>	

[Add Employee](#)

## EMPG Required Training

Certificate Date	Employee	Course Name or Number	Certificate
	Brittney Ciarlo	All Required EMPG Training Tracker	

Certificate Date and Upload are not required at time of Application.

## Certifications

### Federal Funding Accountability and Transparency Act Certification (FFATA)

You shall report the names and total compensation of each of the five most highly compensated executives for the preceding completed fiscal year, if:

- a. in the sub-grantee's preceding fiscal year, the sub-grantee received
  - i. 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and
  - ii. \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and
- b. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

Are all of the above statements true?

No

## Certifications

By checking this box and typing my name below, I am electronically signing this application and certifying that the information provided is true, accurate, and complete to the best of my knowledge. I also certify that:

- The funds requested will be utilized in accordance with federal and state laws and regulations;
- The request does not supplant other funds;
- Requesting entity is NIMS compliant.

Name of Agency Authorized Representative:

Brittney Ciarlo

Date:

Dec 20, 2023

101, Version 2.0, fostering partnerships with EOP stakeholder agencies and organizations.

- **Quarter 2 Action/Deliverables:** Review status of EOP and components after CPG-101 review. Determine development and update priorities including critical components and annexes..
- **Quarter 3 Action/Deliverables:** Review status of EOP and components after CPG-101 review. Determine development and update priorities including critical components and annexes.
- **Quarter 4 Action/Deliverables:** Review status of EOP and components after CPG-101 review. Determine development and update priorities including critical components and annexes..

#### EMF #: 6 - Recovery Plans

Edit

- **Project Name:** Recovery Plans
- **Project Objective:** Development/upgrades of local/tribal recovery plans, fostering partnerships with recovery stakeholder agencies and organizations
- **Quarter 1 Action/Deliverables:** Recovery Plan is complete at this time.
- **Quarter 2 Action/Deliverables:** Recovery Plan is complete at this time.
- **Quarter 3 Action/Deliverables:** Recovery Plan is complete at this time.
- **Quarter 4 Action/Deliverables:** Recovery Plan is complete at this time.

#### EMF #: 7 - Training

Edit

- **Project Name:** Training
- **Project Objective:** NIMS training delivery, staff professional development, development of an Integrated Preparedness Plan (IPP)
- **Quarter 1 Action/Deliverables:** Planned Activities: Implement the CY23 TEP Develop CY24 IPP. This plan should include required training for EMPG funded personnel
- **Quarter 2 Action/Deliverables:** EOC training and development. Attend EM offered training. Work towards CEM certification and apply for Basic Academy
- **Quarter 3 Action/Deliverables:** Work with HMAc group to determine training and exercise goals for 2024 and 2025. Participate in IPP. Complete NQS Phase 2
- **Quarter 4 Action/Deliverables:** Continue EOC training and development. Attend EM offered training Complete NQS Phase 2

#### EMF #: 8 - Exercises

Edit

- **Project Name:** Exercises
- **Project Objective:** Participation in exercises as "Sponsoring" and/or "Participating" agencies. Conduct at least one resource management drill/functional exercise. Mandatory Federal Activities for this EMF: (1) All EMPG program funded personnel (State/Tribal/Local) must participate in at least three exercises in a 12-month period. Sub-grantees may sponsor and/or participate in other sponsor's exercises to fulfill this requirement, (2) all grantees and sub-grantees are required to develop a Multi-Year Integrated Preparedness Plan (IPP) that incorporates linkages to core capabilities and update it annually.
- **Quarter 1 Action/Deliverables:** Implement exercise program as outlined in the IPP Develop plan to meet grant exercise requirement and review with FM. Report on completed exercises include AAR or CAP Begin TTX preparation for School/Multi Agency Active Shooter
- **Quarter 2 Action/Deliverables:** Implement exercise program as outlined in the IPP Develop plan to meet grant exercise requirement and review with FM. Report on completed exercises include AAR or CAP COOP Plan TTX and review
- **Quarter 3 Action/Deliverables:** Implement exercise program as outlined in the IPP Develop plan to meet grant exercise requirement and review with FM. Report on completed exercises include AAR or CAP TTX will be held with School/Multi-Agency Active Shooter
- **Quarter 4 Action/Deliverables:** Implement exercise program as outlined in the IPP Develop plan to meet grant exercise requirement and review with FM. Report on completed exercises include AAR or CAP

#### EMF #: 9 - Incident Management

Edit

- **Project Name:** Incident Management
- **Quarter 1 Action/Deliverables:** Hold monthly HMAc meeting



- **Quarter 4 Action/Deliverables:** Coordinate outside agency CRRF updates as well as internal.

**EMF #: 14 - Facilities Management**

Edit

- **Project Name:** Facilities Management
- **Project Objective:** Monitoring & maintenance of EOC/Alternate EOC facilities and equipment
- **Quarter 1 Action/Deliverables:** RFP will be posted for contractor to begin EOC remodel
- **Quarter 2 Action/Deliverables:** Construction will begin
- **Quarter 3 Action/Deliverables:** Work will continue. Final radio updates and EOC furnishings will take place.
- **Quarter 4 Action/Deliverables:** Move into completed EOC.

**EMF #: 15 - Crisis Communication, Public Information and Education**

Edit

- **Project Name:** Crisis Communication, Public Information and Education
- **Project Objective:** Development/maintenance of Joint Information System (JIS) protocols and procedures, web page management, and procedures for utilizing social media. Development and maintenance of Alert and Warning Plans and procedures.
- **Quarter 1 Action/Deliverables:** Use DHSEM assessment tool to score current A&W plan. Continue public outreach and preparedness through our website and social media outlets.
- **Quarter 2 Action/Deliverables:** Start updating identified gaps in the A&W plan. Continue public outreach and preparedness through our website and social media outlets.
- **Quarter 3 Action/Deliverables:** Continue work on updating the A&W plan. Continue public outreach and preparedness through our website and social media outlets.
- **Quarter 4 Action/Deliverables:** Complete and have A&W plan approved as an EOP annex. Continue public outreach and preparedness through our website and social media outlets.

Add Project



# COLORADO

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## Signature Authorization Form

All fields on this form must be completed to be accepted.

All authorizations require two (2) or more signatures depending on the authorization purpose. This form allows saving for single signatures to supplement for three (3) or more required signatures.

For Application authorizations ONLY:

- Please indicate the Grant Program and Year in place of the award agreement encumbrance number below.
- Applications which require more than two (2) signatures, please complete additional forms as necessary to fulfill the requirements for signatures as outlined in the instructions for the grant application.

SUBRECIPIENT NAME: Huerfano County

AWARD AGREEMENT \_\_\_\_\_

ENCUMBRANCE NUMBER: \_\_\_\_\_

Please select the authorization purpose for this signature submission: Authorize Application

The Subgrantee and responsible signatories certify by signing that they have read and understand the Application including the grant requirements, and if awarded, are fully cognizant of their duties and responsibilities for this grant and will comply with, and follow, all requirements established in Federal and DHSEM grant guidance. The Subgrantee understands and agrees that any subgrant award received as a result of this application shall incorporate by reference the information contained herein.

### Signature Authorization Section:

PRINTED: Signature #1 Name	<u>John Galusha</u>	PRINTED: Signature #2 Name	<u>Kim Trujillo</u>
TITLE for Signature #1	<u>Chairman of the BOCC</u>	TITLE for Signature #2	<u>Chief Finance Officer</u>
EMAIL for Signature #1	<u>jgalusha@huerfano.us</u>	EMAIL for Signature #2	<u>ktrujillo@huerfano.us</u>
PHONE for Signature #1	<u>(719) 738-3000</u>	PHONE for Signature #2	<u>(719) 738-3000</u>
DATE of Signature #1	<u>01/02/2024</u>	DATE of Signature #2	<u>01/02/2024</u>

Signature #1

Signature #2