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**Application Preview** 

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Application Details

Edit Application

**X** Withdraw

# 33772 - Bomb containment Blanket - Copy

# **Application Details**

**Funding Opportunity:** 

33639-FY 2024 SHSP Law Enforcement Terrorism Prevention Activities (LETPA)

**Funding Opportunity Due Date:** 

Sep 20, 2024 5:00 PM

**Program Area:** 

State Homeland Security Program

Status:

Editing

Stage:

**Final Application** 

**Initial Submit Date:** 

**Initially Submitted By:** 

**Last Submit Date:** 

Last Submitted By:

# **Contact Information**

# **Primary Contact Information**

Name:

Email\*:

Salutation Adam

Swon

First Name

Last Name

Job Title\*:

Community Policer Officer

Aswon@moberlypd.com

Mailing Address\*:

300 n Clark

300 n Clark

MOBERLY Missouri

65270

City

State/Province Postal Code/Zip

Phone\*:

(660) 651-8728 Ext.

Phone

###-###-####

Fax:

(660) 263-0346

###-###-####

Organization Information

Applicant Agency\*:

Moberly, Police Department

Organization Type\*:

Government

Organization Website:

http://www.moberlypd.com

Federal Tax ID#\*:

436002348

00

9 digits (no hyphen) Tax ID Extension

DUNS #:

080020845

9-digit number

Unique Entity ID\*:

ZFDYKNHMPTK9

SAM/CCR CAGE Code:

6SBK1 01/08/2023

Valid Until Date

Mailing Address\*:

300 N. Clark Street

Moberly Missouri

65270

5211

City

State/Province Postal Code/Zip + 4

County\*:

Randolph

Congressional District\*:

09

Hold 'CTRL" to add additional districts

Phone\*:

(660) 263-0346 Ext.

###-###-####

Fax:

(660) 263-8540

###-###-####

**Contact Information** 

**Contact Information** 

### **Authorized Official**

The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicant's elected or appointed chief executive. For example:

- If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official
- If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official
- If the applicant agency is a State Department, the Director shall be the Authorized Official
- If the applicant agency is a college/university, the President shall be the Authorized Official
- If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official
- If the applicant agency is an Regional Planning Commission or Council of Government, the Executive Director shall be the Authorized Official
- If the applicant agency is a special district, such as Fire Protection District or Ambulance District, the Board Chair/President shall be the Authorized Official
- If the applicant agency is a school district, the Superintendent or School Board President shall be the Authorized Official

\*\*If the Authorized Official has a different title, than those listed above, official documentation naming that position as the Authorized Official for your agency must be included in the application attachments or your application will not be considered for funding\*\*

\*\*This is not an all-inclusive list. If your agency does not fall into the above categories or you are unsure of who the Authorized Official should be for your agency, please contact the Missouri Department of Homeland Security (DPS)/Office of Homeland Security (OHS) at (573) 522-6125\*\*

Authorized Official\*:

Mayor

**Brandon Lucas** 

Title (Mr.Ms.etc) First Name Last Name

Job Title\*:

Mayor

Agency\*:

**City of Moberly** 

Mailing Address\*:

101 W Reed

Street Address 1:

**Street Address 2:** 

Moberly Missouri 65270

City

State

Zip Code

Email\*:

blucas@cityofmoberly.com

Phone\*:

660-269-8705 2062 Cell

Office

Ext.

Fax:

660-263-4992

# **Applicant Project Director**

**Applicant Project Director\*:** 

Officer

Adam

Swon

Title (Mr.Ms.etc) First Name Last Name

Job Title\*:

**Community Policing Officer** 

Agency\*:

**Moberly PD** 

Mailing Address\*:

300 N Clark

Street Address 1:

**Street Address 2:** 

Moberly Missouri 65270

City

State

Zip Code

Email\*:

aswon@moberlypd.com

Phone\*:

660-263-0346 Ext. Cell

Office

Fax:

660-263-8540

**Fiscal Officer** 

Fiscal Officer\*:

**CFO** 

Greg

Hodge

Title (Mr.Ms.etc) First Name Last Name

Job Title\*:

**City Financial Director** 

Agency\*:

City of Moberly

Mailing Address\*:

101 W Reed

**Street Address 1:** 

Street Address 2:

Moberly Missouri 65270

City

State

Zip Code

Email\*:

gregh@cityofmoberly.com

Phone\*:

660-269-7601 Ext. Cell

Office

Fax:

660-263-8540

# **Project Contact Person**

**Project Contact Person:** 

Officer

Adam

Swon

Title (Mr.Ms.etc) First Name Last Name

Job Title:

Community Police Officer

Agency:

**Moberly PD** 

**Mailing Address:** 

300 N Clark

**Street Address 1:** 

**Street Address 2:** 

Moberly Missouri 65270

City

State

Zip Code

Email:

ajswon@gmail.com

Phone:

660-651-8781 Ext. Cell

Office

Fax:

660-263-8540

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# **SHSP LETPA Project Package**

## Section A.1 through B.4

A.1 Region\*:

В

A.2 County\*:

Randolph

A.3 Project Location Zip Code\*:

65270

A.4 Project Activity Type\*:

Establish/enhance explosive ordnance disposal units/bomb squads

A.5 Was this project previously

No

funded with State Homeland

Security Program (SHSP) funds?\*:

A.6 Does this project increase

**Build/Enhance** 

capabilities (build/enhance), or does this project sustain

capabilities at the current level?\*:

A.6.a If you answered

Coordination example: contacted other agencies within your region to see if this capability/asset currently exists and is available.

Build/Enhance to question A.6, has your agency coordinated with other agencies to determine if the resources requested are currently available within the region/state?:

A.7 Provide a brief overall description of the project.\*:

We are asking for funding for a "Bomb Blanket". This device can be used to secure explosive devices and reduce the damage they cause. It would allow us to contain a device until a disposal team could arrive which in Region B can be quite some time.

A.8 Provide a summary of specific project actions/items that will be purchased with grant funds\*:

We need to purchase the ballistic blanket itself as well as a containment ring which not only prevents the blanket from touching the device but also directs the blast up and away from anything in the area making the blanket more effective.

A.9 Provide estimated duration of the project (how long will it take to complete this project)\*:

From the time of funding I believe we could order and have delivery of the items in under six weeks depending on the national availability of the items.

A.10 What are the objectives this project is designed to accomplish? (the purpose of the project)\*:

Currently the closest "Bomb Squad" is located in Columbia which is 40 minutes south of Region B's most southern border. This would allow a quicker response time to contain any explosive devices found north of that line.

The items can also function as a protective barrier against gun fire and other ballistic threats in addition to containing explosions.

A.11 How does this project align with/increase terrorism preparedness for your agency/region/state?\*:

Since this is a highly mobile device and requires no special training to use it could not only be used in the aftermath of investigations that involve attacks with an explosive device it could also be placed proactively for use at any event that might be threatened by a explosive device.

These items take up little room and can be transported in the back of a patrol vehicle allowing it to easily be delivered anywhere a patrol vehicle can go.

A.12 How does your project support Law Enforcement Terrorism Prevention Activities (LETPA)?\*:

Northeast Missouri does not have its own police demolition team. Since "bomb blankets" are portable and easy to use could help safely contain an explosive device anywhere they are needed.

This is a specialized device and as such few departments will ever put out the funding to obtain their own, by having one inside of Region B doesn't limit its use to Region B but also other areas and departments.

A.13 Why is this project necessary for your agency/region/state?\*:

If we think back to the Boston Marathon Attack we can draw a line directly to a potential use. That bombing used a pressure cooker as the explosives vessel. A bomb blanket is designed contain these exact kinds of devices along with improvised explosive devices like a pipe bomb or hand grenade.

We as a department have recovered similar devices locally and its not a stretch that the need to contain these devices will arise again.

A.14 How does your agency plan to financially sustain the requested items in the future without grant funding?\*:

This item does not require any additional funding past purchase.

# B. Project Capability, THIRA and Dual Use

B.1 Did your agency participate in Yes the development of your respective region's Threat and Hazard Identification and Risk Assessment (THIRA)?\*:

B.1.a Please explain your agency's participation in the development of the THIRA.:

**B.2 Which Primary Core Capability** best aligns to this project?\*:

**Physical Protective Measures** 

B.3 Which POETE (Planning, Organization, Equipment, Training, and Exercise) category(s) does your project address? \*:

Equipment

**B.4** How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability selected in B.2 and the POETE category(s) selected in B.3?\*:

Complex Coordinated Terrorist Attach as outlined on page 10 of the 2022 MO THIRA

Although this item would only mitigate a single device it could prevent that device from becoming part of the larger scenario as outlined in the THIRA. The most likely use of a bomb blanket would be in the investigation or discovery of a terrorist threat prior to it being delivered. In the Columbine Active Killer attack they used explosive devices and since even more school and church attacks have included them.

B.5 Does the requested project

Yes

support dual-use activities?\*:

Dual-use activities are those that support the achievement of core capabilities related to the national priorities and terrorism preparedness while also simultaneously supporting enhanced preparedness for other hazards unrelated to acts of terrorism.

B.5.a Please describe how the project supports terrorism preparedness and how this project increases preparedness for other hazards unrelated to terrorism.:

A ballistic blanket can also be used as a mobile shield against ballistic threats. Whether that be a screening of a hallway in a school when attackers are isolated in a room or used on a vehicle to prevent gunfire from entering it.

Pubanalna the nuctaction of out towarteleversaled places

A ballistic blanket can also be used at any event to contain a suspicious bag or box until it can be thoroughly investigated including backpacks left near crowds or in school hallways.

Please review the National Priorities in the FY 2024 SHSP LETPA Notice of Funding Opportunity.

- 1. Enhancing the protection of soft targets/crowded places
- 2. Enhancing information and intelligence sharing and analysis
- 3. Combating domestic violent extremism
- 4. Enhancing cybersecurity
- 5. Enhancing community preparedness and resilience
- 6. Enhancing election security

B.6 Does your project align to a

Yes

**National Priority?\*:** 

Senct the National Priority the project aligns with from the dropdown.

#### ם.ס.א ואאנוטוואו דווטוונץ:

Ennancing the protection of soft targets/crowded places

Select the Core Capability associated with the National Priority that the project aligns with. Please ensure the Core Capability chosen in B.6.b aligns with the Core Capability chosen in B.2.

B.6.b Core Capability:

Physical protective measures

B.6.c Please describe how this project aligns with the National Priority selected in question B.6.a.:

A ballistic blanket aligns as it is a device that specifically protects people from an explosive devices. Since it is highly portable it can be requested and used by anyone in the state if they expect a crowd whether that is an concert, county fair, political protest or voting station.

## C. Project Background

C.1 Was any portion of the

No

proposed project funded with FY

2023 SHSP funds?\*:

C.2 Was any portion of the

No

proposed project funded with FY

2022 SHSP funds?\*:

C.3 Was any portion of the

No

proposed project funded with FY

2021 SHSP funds?\*:

# D. Deployable/Shareable Resources

Deployable Resource: Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.

Shareable Resource: Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).

D.1 Does this project fund

Yes

resources that are deployable or

shareable?\*:

D.1.a Please select from the dropdown if the project funds

resources that are deployable or

shareable.:

**Shareable Resource** 

List the deployable/shareable resource.

D.1.b Item Name:

**Ballistic Blanket** 

D.1.c Are there any special

No

conditions/requirements on sharing the deployable/shareable Example: Specific requirements of equipment, operator, etc.

resources(s)?:

FEMA Resource Typing Library Tool is located at https://rtlt.preptoolkit.org/Public.

D.1.d Is the deployable resource

Yes

NIMS Kind & Typed?:

D.1.d.1 Deployable Resources

Kind & Type Name(s):

Mitigation Area - Explosive

**Example: Mobile Communications Center** 

**D.1.d.2 Deployable Resources** 

Kind & Type ID(s)

(ID x-xxx-xxxx):

02EX-00-MITA Mitigation Area - Explosive

Example: ID 2-508-1053

## E. Audit Details

E.1 Has the Applicant Agency exceeded the federal expenditure threshold of \$750,000 in federal funds during agency's last fiscal year?\*:

#### Yes

If the applicant agency exceeded the federal expenditure threshold in their last fiscal year, they must have their Single Audit or Program Specific Audit completed and submitted to the DPS/OHS within nine (9) months after the end of the audited fiscal year.

E.2 Date last audit/financial statement completed.\*:

#### 06/30/2023

If an agency has never had an audit, please enter the date of their last annual financial statement.

E.3 By checking this box the applicant agency understands they are required to upload a copy of the agency's most recent completed audit (or annual financial statement) in the Named Attachments section of this application\*:

#### Yes

## F. Risk Assessment

F.1 Does the applicant agency have new personnel that will be working on this award?\*:

No

New personnel is defined as working with this award type less than 12 months.

F.2 Does the applicant agency have a new fiscal or time accounting system that will be used on this award?\*:

No

New fiscal or time accounting system is defined as a system being utilized less than 12 months within the applicant agency.

Ala ta quastiana C 1 C 11 If you anguar no to any of these quastians, avalois planned activities

F.3 Does the applicant agency receive any direct Federal awards?\*:

No

Direct grants are grants that you apply directly to the federal government for and there is no intermediary agency such as OHS.

רופאספ ספופטנ זפסואט נט קעפסנוטווס ש. ו-ש. וו you מווסשפו ווט נט מווץ טו נוופספ קעפסנוטווס, פגףומווו ףומוווופע מטנויוופט עעווווץ נוופ צומווג period to strive

towards being NIMS compliant in G.15.

If your agency is a Regional Planning Commission (RPC) or Council of Government (COG) and questions G.1-G.14 do not apply, select N/A.

G.1 Has the jurisdiction formally adopted the National Incident Management System (NIMS) throughout the jurisdiction or organization to prevent, protect against, mitigate, respond to, and recover from incidents?\*:

Yes

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?\*:

Yes

G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?\*:

Yes

G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?\*:

Yes

G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?

Yes

G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?\*:

Yes

G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS?\*:

Yes

G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel?\*:

Yes

G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock)\*:

Yes

G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders?\*: Yes

G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation?\*:

Yes

G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance?\*:

Yes

G.13 Does your agency apply plain language and clear text communications standards?\*:

Yes

G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness?\*:

Yes

If answered No to any questions G.1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.

#### **G.15 Planned Activities:**

G13 in contact with outside agencies plain language standards apply, Internally 10 codes are still used.

Day to day operations as a small department do not always use NIMS or ICS however we work with our EOC using those systems when needed.

## H. Certified Assurances

To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:

**SHSP Certified Assurances** 

H.1 By checking this box, I have read and agree to the terms and conditions of this grant\*:

Yes

In order to be considered eligible for funding, the correct Authorized Official must be designated and have knowledge of the certified assurances associated with

this funding opportunity.

If the incorrect Authorized Official is listed in H.2 and H.3 of the application, the application will be deemed ineligible for funding.

The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicant's elected or appointed chief executive. For example:

- If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official
- If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official
- If the applicant agency is a State Department, the Director shall be the Authorized Official
- If the applicant agency is a college/university, the President shall be the Authorized Official
- If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official
- If the applicant agency is an Regional Planning Commission (RPC) or Council of Government (COG), the Executive Director shall be the Authorized Official
- If the applicant agency is a special district, such as Fire Protection District or Ambulance District, the Board Chair/President shall be the Authorized Official
- · If the applicant agency is a school district, the Superintendent or School Board President shall be the Authorized Official

If a designee is being utilized to authorize the application, the Missouri Department of Public Safety (DPS) reserves the right to request documentation that indicates

the designee has the authority to legally bind the applicant into a contract in lieu of the Authorized Official at the time of application submission.

\*\*If the Authorized Official has a different title, than those listed above, official documentation naming that position as the Authorized Official for your agency must be included in the application attachments or your application will not be considered for funding\*\*

\*\*The above list is not an all-inclusive list. If your agency does not fall into the above listed categories, or if you are unsure of who the Authorized Official is for your agency,

please contact the Missouri Department of Public Safety (DPS)/Office of Homeland Security (OHS) at (573) 522-6125.\*\*

**H.2 Authorized Official Name\*:** 

**Brandon Lucas** 

H.3 Title of Authorized Official\*:

Mayor

H.4 Name of person completing

**AJ Swon** 

this application\*:

H.5 Title of person completing this Community Police Officer

application\*:

H.6 By checking this box, I certify I Yes have read and understand that the correct Authorized Official MUST be designated on this form in question H.2 and H.3 in order to be eligible for funding\*:

H.7 Date\*:

06/07/2024

# Interoperable Communications

## Radio Interoperability

Refer to the Radio Interoperability Guidelines for Interoperable Communications Equipment Requirements that MUST be met in order to be eligible for funding.

1. Are you applying for

No

interoperable communications

equipment?:

# **Budget**

#### Personnel

%of time spent

on this

**Position** Name Title

**Position Status** 

**Employment** 

**Status** 

grant funded activities

Requested

Personnel Cost Discipline Function Activity

**Allowable** 

No Data for Table

## Narrative Justification - Personnel

5000 Character Limit

Personnel Benefits

Name

**Benefits % of Salary** 

Requested Benefit Cost Discipline

**Function** 

**Allowable Activity** 

No Data for Table

### Narrative Justification - Benefits

5000 Character Limit

Travel

**Item Name** 

**Explanation of** 

Category

**Other Travel** 

**Total Cost Discipline** 

**Function** 

#### 5000 Character Limit

### **Equipment**

Line Item Name	AEL#	Qty	Unit Cost	Total Cost	Discipline	Function	Allowable Activity
6 x 6 ballistic blanket by Security PRO USA	02EX-00- MITA	1.00	\$2,831.00	\$2,831.00	Law Enforcement	Equipment	Explosive Device Mitigation and Remediation Equipment
				\$2,831.00			

## Narrative Justification - Equipment

A Ballistic blanket( bomb blanket) is a explosive containment device that covers a potential explosive device making it more safe. These devices are normally used in conjucition with a containment ring which directs any blast or fragmentation up and away from people. We have asked for a single Ballistic blanket and containment ring. The items were bid fairly as outlined by the City of Moberly with three bids being obtained.

Factors in the bidding process including it being NIJ(national institute of Justice) rating as well as a STANAG 2920 fragmentation (MIL STD 662F threats) rating which is a Military rating of armor against explosive and fragmentation. Although most companies have different size blankets and rings available we considered those roughly 5'x5' with a containment ring height of at least 7". We also wanted to buy the ballstic blanket and containment ring from the same company. The final bid selected was Security Pro USA with their 6 x 6 blanket with safety circle for \$2831 which offered a larger blanket for the lowest price. Moberly Police Department is prepared to pay for any cost increases to this item that can not be covered with grant funding and shipping costs.

Additional information is included in the attached letter....

10000 Character Limit

Supplies/Operations

		Total Supply or							
Item Name	Supply/Operation Type	Qty	<b>Unit Cost</b>	<b>Operation Expense Cost</b>	Discipline	Function	Allowable Activity		

No Data for Table

Narrative Justification - Supplies/Operations

5000 Character Limit

Contractual

Item Name Type of Contract Contract Amount Discipline Function Allowable Activity

No Data for Table

## Total Budget

**Total Personnel:** 

\$0.00

**Total Benefits:** 

\$0.00

**Total Travel:** 

\$0.00

**Total Equipment:** 

\$2,831.00

**Total Supplies/Operation:** 

\$0.00

**Total Contractual:** 

\$0.00

**Total Project Cost:** 

\$2,831.00

# **Named Attachments**

Named Attachment	Required	Description	File Name	Туре	Size	Upload Date
Audit/Financial Statement (REQUIRED)*	<b>~</b>	Last Audit Performed 06/30/22	Moberly Financial Statements FY22.pdf	pdf	2 MB	09/05/2024 03:39 PM
Quote or Cost Basis		copies of bids of all companies provided.	blanketbid.pdf	pdf	5 MB	09/05/2024 03:39 PM
Other Supporting Information		copy of description of chosen bid	winningbidsecpro.pdf	pdf	569 KB	09/05/2024 03:39 PM
Other Supporting Information		Other justifications and usage and comparison	bidspecblanket2024dhs.doc	doc	79 KB	09/05/2024 03:39 PM
Other Supporting Information						
Other Supporting Information						
Other Supporting Information						