

EMPG Application Form

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2019 EMPG Application 🕡

Please refer to the most recent state guidance for a list of eligibility requirements as well as information on EMPG. For additional information on EMPG refer to the Notice of Funding Opportunity put out by FEMA. For information on receiving Federal Awards refer to 2 CFR 200.

Do not complete this application until you have read, at least, the current guidance.

Applicant Jurisdiction & Address 2

Jurisdiction: San Juan County EOC

Mailing Address

Address: PO Box 9

> City: Monticello

County: San Juan

Utah State:

84535 Zip Code:

Reimbursement Address

Same As

Yes Above:

PO Box 9 Address: City: Monticello State: Utah Zip Code: 84535

Grant Officials

CURRENT FISCAL YEAR DESIGNATION OF EMPG GRANT OFFICIALS

Emergency Management Program Director

Name: Tammy Gallegos

Daytime Phone Number: 435-587-3225

Email Address: tgallegos@sanjuancounty.org

Grant Financial Officer

Name: Tammy Gallegos

Daytime Phone Number: 435-587-3225

Email Address: tgallegos@sanjuancounty.org

Authorized Official

Name: Willie Greyeyes

Daytime Phone Number: 435-587-3225

Email Address: wgreyeyes@sanjuancounty.org

Grant Point of Contact

Name: Tammy Gallegos

Daytime Phone Number: 435-587-3225

Email Address: tgallegos@sanjuancounty.org

EMPG Staffing Pattern & Emergency Manager Certification 2

CURRENT FISCAL YEAR EMPG STAFFING PATTERN

FULL TIME EMPLOYEES (38+ hours per

week)

THREE QUARTER TIME EMPLOYEES (32

hours per week)

Status

Is this Employment person PDS Certified?

Yes

Yes

Yes

Has this person completed the National **Emergency Management Basic**

Training?

In Progress

Yes

Yes

Tammy NAME: Gallegos

Emergency

POSITION: Manager

Natalie NAME: Freestone

> Assistant Emergency Manager

David NAME: Gallegos

POSITION: Logisitics

NAME:

POSITION:

POSITION:

NAME:

POSITION:

Budget Detail Worksheet 🕡

Per 2 CFR 200. jurisdictions must certify: charges for their salaries and wages will be supported by periodic certifications that the employees worked solely on that program for the period covered by the certification. These certifications will be prepared at least semi annually and will be signed by the employee or supervisory official having first hand knowledge of the work performed by the employee.

Expense Type	Estimated Cost
Emergency Manager Salary and Benefits	\$ 47879
Travel	\$ 5000
Administrative Expenses (3% max)	\$ 5500
Community Outreach	\$ 3000
Planning Expenses	\$ 2000
Training Expenses	\$ 3000
Exercise Expenses	\$ 1000
Emergency Management Support Staff Expenses	\$ 28704
Other Funds	\$ 10000
Total Emergency Management Budget	\$ 106,083.00
FUNDING AVAILABLE TO MEET 50/50 MATCH	\$ 53,041.50

Cost sharing and matching shall be accepted from the applying jurisdiction by submitting a signed Match Certification Form and by meeting all of the following criteria:

- 1. Verifiable from the sub-recipient's records
- 2. Are not included as a match for another federal grant program
- 3. Are necessary and reasonable for accomplishment of program objectives
- 4. Are allowable under applicable cost principles
- 5. Are not paid by another federal award
- 6. Are provided for in the approved budget by FEMA

Please submit additional match if circumstances allow. The additional funds make it possible for other jurisdictions to continue with their Emergency Management Program.

Base Funding Eligibility Requirements Required

Yes By checking this box, you are indicating that you will complete each base requirement necessary to receive EMPG funding.

- 1. Employ a fulltime or part time emergency manager. (cannot be a contracted position)
- 2. Meet all Federal requirements such as Equal Opportunity Employer, Drug-Free Workplace, Single Audits, Federal Funding Accountability and Transparency Reporting, comply with <u>2 CFR 200.</u> policies, etc.
- 3. Cities shall submit a letter/E-mail from their respective County EM endorsing their participation in EMPG with their application.
- 4. New applicants must complete IS 100, 200, 700, 800 and submit a Training and Exercise Plan spanning the current year prior to submitting their application. Exceptions will be considered on a case by case basis.
- 5. Complete and report on all performance standards listed within the current guidance.
- 6. Full participation and compliance with DEM's Grant Monitoring Program.

Required Attachments 2

Required Documents to be submitted with the application:

FFATA is required before Progress can be filled out.

For FFATA and Match Certification:

- 1. Click on the download link for the reqiured document.
- 2. Choose the save option.

For all attachments:

- 1. Open file from saved location.
- 2. Fill out form (ensure it is complete).
- 3. Attach the completed form below.

Submit your signed FFATA
Submit your signed Match
Certification
Submit a copy of your
jurisdictions most recent
Training and Exercise Plan
Submit a copy of your
jurisdiction's most recent
signed promulgation letter
(signature page) from your
EOP.

Complete and pass the Pre-

Award Risk Assessment

Survey

Miscellaneous Attachments
Miscellaneous Attachment1

Miscellaneous Attachment2

Miscellaneous Attachment3

Miscellaneous Attachment4

(View any of these attachments in Application Summary page after saving this application form.)

Certification 2

CERTIFICATION: This Application, together with the attachments constitutes the annual work plan for the emergency management program of the applicant listed below. The undersigned certify that all grant requirements have been met and agree to exert their best efforts to accomplish all activities listed in the work plan and progress reports.

Click to digitally sign
Signature Acquired
Click to digitally sign
Signature Acquired
Original Signature

EMPG Administrator

Amount Awarded:

0.00

EMPG Fiscal Year:
2021

Remove Record:

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