## Ohio Bureau of Workers' Compensation

## **Application for Safety Intervention Grant**

Section V: Budget

BWC 6683 (Rev. Aug. 10, 2022)

SH-53

Step 1: Please provide the proposed budget for the project.

Note: You may only use the safety intervention grant to purchase ergonomic, safety or industrial hygiene equipment. You may not use the safety intervention grant for recouping the cost of any prior or ongoing interventions, or for rented or leased equipment. In addition, you may not use a safety intervention grant to pay for salaries, wages, internal labor, or any costs associated with preparing the application. You must make all grant purchases and implement the intervention equipment within ninety (90) days after the date on the BWC grant check or the electronic funds transfer. Note all itemized expenses associated with the project. Indicate exact costs and do not round figures. All budgets MUST have vendor price quotes attached for each individual item. You must subtract all discounts and equipment trade-ins from the project total.

Item	Quantity	Cost	Total
Key Fire Hose Pro Flow LDH 4"X 100' Yellow Hose Storz Couplings	18	\$712.00	\$12,816.00
Key Fire Hose Pro Flow LDH 4"X 50' Yellow Hose Storz Couplings	8	\$473.00	\$3,784.00
Key Fire Hose Pro Flow LDH 4"X 25' Yellow Hose Storz Couplings	6	\$356.00	\$2,136.00
Lift Gate service to off load hose from trucking company	1	\$600.00	\$600.00
Roll-n-Rack Hose Roller Effeciency Package w/ extra battery 3- coupling Jaws and Loader	1	\$12,300.00	\$12,300.00
Shipping	1	\$733 00	\$733.00
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Subtotal	\$32,369.00
Freight	\$0.00
Tax	\$0.00
Less all discounts and trade in amounts.	-\$0.00
Total budget Step 2:To determine the grant amount you are requesting, please complete the formula below.	\$32,369.00
Total amount of project (from table above)A	\$32,369.00
Total amount supplied by BWC, (either \$40,000 or less, or remaining funds in aligibility cycle)	\$24,276.75
Total amount supplied by the employer	\$8,092.25
Do you have ownership, partnership or any other affiliation with the vendor of the equipment being purchased If yes, please explain.	?
Are you planning to finance your portion of the grant project? Yes 🗆 No 🔞 If yes, you must provide a copy of the agreement with your receipt documentation once you receive the grant funds and make your purchase.	loan
By my signature, I agree to fully comply with the terms and conditions of the program and to use all fund purposes intended. I further understand I may be subject to civil, criminal and/or administrative penalties as false, fictitious, misleading, or fraudulent statements. I understand if funds are not used, misused, misappropriated, or are used for purchases and/or services not associated with the approved budget and its submitted, that I may be subject to civil, criminal, and administrative penalties.  Name of duly authorized representative (please print) Nahim Kaim	the result of any misapplied, or
Signature of duly authorized representative I, Nahim Kaim have signed this agreement on Date: 08/30/202	3
Title Lieutenant	
Employer name WILLOWICK BWC policy number 34305902	