

**FEMA Form 080-0-0-4, Staffing for Adequate Fire and Emergency Response
(General Questions All Applicants)**

LOCATION	CURRENT TEXT	REVISED TEXT
p. 1, Question Added	New Question	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.
p. 1, Question Added	New Question	As required per 2 CFR § 25, 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 valid and active at time of submission.
p. 1, Question Added	New Question	I certify that the applicant organization has consulted the appropriate Notice of Funding Opportunity and that all requested activities are programmatically allowable, technically feasible and can be completed within the award's Period of Performance (POP).
p. 1, Question Added	New Question	I certify that the applicant organization is aware that this application period is open from 01/09/2016 to 01/01/2018 and will close at 5 PM ET; further that the applicant organization is aware 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.
p. 1, Question Added	New Question	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-data/1431970163011-80ce3cd907072a91295b1627c56d8fd2/gpd_ehp_screening_form_51815.pdf
p. 1, Question Added	New Question	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.
p. 1, Question Added	New Question	I certify that the applicant organization is aware that the grants awarded under this funding opportunity are provided a recru

		<p>itment period, which begins when the application is approved for award. The recruitment period for grants awarded under the Hiring of Firefighters Activity is 180-days and the period of performance automatically starts after the recruitment period, regardless of whether the grantee has successfully hired the requested firefighters. The recruitment period for Recruitment & Retention of Volunteer Firefighters Activity is 90-days and the period of performance automatically starts after the recruitment period.</p>
p. 1, Question Added	New Question	<p>I certify that the applicant organization will, to the extent practicable, seek, recruit, and hire members of racial and ethnic minority groups and women to increase their ranks within their organization.</p>
p. 1, Question Added	New Question	<p>I certify that, if awarded under the Hiring of Firefighters Activity, the applicant organization, will assure a policy will be put into place, or is currently in place, ensuring that positions filled under this grant are not discriminated against, or prohibited from, engaging in volunteer firefighting activities in another jurisdiction during off-duty hours. (If applying under the Recruitment and Retention of Volunteer Firefighters Activity, this does not apply, however, in order to move forward in the application process, you must complete th is question).</p>
p. 1, Question Added	New Question	<p>By checking the box below and providing your password, you are providing your digital signature.</p> <ul style="list-style-type: none"> • Password: • I am hereby providing my signature for this application as of 20-Mar-2017.
p. 2, Question Added	New Question	<p>Primary Phone</p>
p. 2, Question Added	New Question	<p>Email</p>
p. 5, Question Added	New Question	<p>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.</p>
p. 5, Question Added	New Question	<p>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.</p>

p. 5, Question Added	New Question	<ul style="list-style-type: none"> • Mailing Address 1
p. 5, Question Added	New Question	<ul style="list-style-type: none"> • Mailing Address 2
p. 5, Question Added	New Question	<ul style="list-style-type: none"> • City
p. 5, Question Added	New Question	<ul style="list-style-type: none"> • State
p. 5, Question Added	New Question	<ul style="list-style-type: none"> • Zip
p. 5	* Are you sharing an EIN with another organization?	<ul style="list-style-type: none"> • Is your organization using the DUNS number of your Jurisdiction?
p. 5	If yes, please enter the name of the entity with whom you share an EIN	<ul style="list-style-type: none"> • 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)
	If yes, please enter the name of the entity with whom you share an EIN	<p>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.</p> <p>Note: This is only required if you are using your Jurisdiction's DUNS number and have a separate bank account from I I Helpyour 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.</p>
p. 5 Question Removed	* Have you registered with the Central Contractor Registry (CCR)?	Question Removed
p. 7 Question Removed	* Are you a member of a Fire Department or authorized representative of a Fire Department? Fire Department – An agency or organization that has a formally recognized arrangement with a territory, tribe, or local authority (city, county, parish, fire district, township, town, or other governing body) to provide fire suppression on a first-due basis to a fixed geographical area. Fire departments may be comprised of members who are all volunteer, all career, or combination of volunteer and career	Question Removed
p. 7	* Are you a member of a Federal Fire Department or contracted by the Federal government and solely responsible for suppression of fires on Federal property?	<ul style="list-style-type: none"> • Is this application being submitted on behalf of a Federal Fire Department or organization contracted by the Federal government which is solely responsible for the suppression of fires on Federal property?
	New Questions	<p>Does your organization protect critical infrastructure? If Yes, please describe the critical infrastructure protected (3000 characters).</p>
		<ul style="list-style-type: none"> • Do you have a seasonal increase in population? 0 Yes 0 No If Yes what is your seasonal increase in

		population?
p. 8	* Staffing levels as of January 1, 2008	• Staffing levels at one year prior to the start of the application period
	* Staffing levels as of June 30, 2012	• Staffing levels at two years prior to the start of the application period
	* If awarded this grant, how many authorized and funded active, full-time uniformed career positions will be in your department? (Whole Numbers only)	• If awarded this grant, what will the staffing levels be in your department? (Whole Numbers only)
p. 9 Question Removed	* If awarded the number of positions requested in this application, will this restore your department's staffing level to the level that existed before the department lost positions to layoffs or attrition?	Question Removed
p. 9 Question Removed	* At the time of application, how many positions in your department are filled with part-time paid firefighters? (Whole Numbers only) Note: If you utilize part-time firefighters, please explain, in your narrative, the number of part-time firefighters, the number of NFPA support positions that these part-time firefighters occupy, and how they are scheduled to meet your staffing needs.	Question Removed
p. 9 Question Removed	* If awarded this grant, how many active volunteer firefighters will be in your department? (Whole Numbers only)	Question Removed
p. 9, New Question	New Question	• Please provide details on the department's existing staffing model (i.e., number of shifts, number of positions per shift, contracted work hours, etc.) (3000 characters)
p. 9, New Question	New Question	• Does your department utilize part-time paid firefighters? If Yes, please provide details on how the part-time firefighters are used within your department to include the number of part-time firefighters, the number of full-time, NFPA compliant positions these part-time firefighters occupy, if applicable, and how they are scheduled to meet your staffing needs (3000 characters) .
p. 9, New Question	New Question	• Does your department utilize reserve/ relief paid firefighters? If yes, please provide details on how the reserve/relief firefighters are used within your department to include the number of reserve/relief firefighters, the number of full-time, NFPA compliant positions these part-time firefighters occupy, if applicable, and how they are scheduled to meet your staffing needs (3000 characters)

		<ul style="list-style-type: none"> • What was your department's operating budget (i.e., personnel, maintenance of apparatus, equipment, facilities, utility costs, purchasing expendable items, etc.) for the 2001, 2002, and 2003 fiscal years? If you are unable to provide the information, please enter 0 into each budget field and explain, in the Financial Need section of the narrative, why you are unable to provide this information.
		<ul style="list-style-type: none"> • What percentage of your operating budget is dedicated to personnel costs (salary, benefits, overtime costs, etc.)?
		<ul style="list-style-type: none"> • Does your department have any rainy day funds, rainy day reserves, or emergency funds If yes, what is the total amount currently set aside? If yes, what are the funds ear-marked for (1000 characters)?
p. 11, New Question	New Question	Bond Issues?
p. 11, New Question	New Question	EMS Billing?
p. 13	Structural Fires includes cooking fires, chimney fires, smoke odor calls, unauthorized burning calls, and trash and rubbish fires that spread to a structure(s).	Of the NFIRS Series 100 calls, how many are "Structure Fire" (NFIRS Codes 111-120)
p. 13	Vehicle Fires includes all vehicle fires except those that were inside a structure.	Of the NFIRS Series 100 calls, how many are "Vehicle Fire" (NFIRS Codes 130-138)
p. 13	Vegetation Fires includes wildland fires, brush fires, and grass fires.	Of the NFIRS Series 100 calls, how many are "Vegetation Fire" (NFIRS Codes 140-143)
p. 13	EMS includes medical assists, EMS calls, vehicle accident EMS calls, sickness/injuries, vehicle/pedestrian EMS calls, etc.	Of the NFIRS Series 100 calls, how many are "Vegetation Fire" (NFIRS Codes 140-143)
p. 13	Rescue includes searches, water and ice rescues, and extrications of trapped victims.	Of the NFIRS Series 300 calls, how many are "Rescues" (NFIRS Codes 300, 351, 353-381)
p. 13	Hazardous Condition/Materials Calls includes spills and leaks, chemical releases, electrical transmission and service lines down.	Hazardous Condition (No Fire) - NFIRS Series 400
p. 13	Service Calls includes persons in distress calls, water problem calls, smoke odor calls, animal rescue calls, public service assist calls, and unauthorized burning calls.	Service Call - NFIRS Series 500
p. 13	Good Intent Calls includes canceled enroute, authorized burning calls, prescribed fire calls, smoke scares.	Good Intent Call - NFIRS Series 600
p. 13	False Alarms making a false report of a fire or other emergency via telephone to 911 or other emergency number, the false	False Alarm & False Call - NFIRS Series 700

	activation of a manual or automatic fire alarm system, and/or the transmission of a malicious false alarm via a dedicated public alarm system (telephone, telegraph, or radio call box).	
p. 13	Other Calls and Incidents anything that doesn't fit in another category.	Special Incident Type - NFIRS Series 900