

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
**Staffing for Adequate Fire and Emergency Response
Recruitment and Retention of Volunteer Firefighters Application
(Questions and Narrative)**

OMB No.: 1660-0135
Expiration Date: August 31 2017

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average up to 7.5 hours per response for FEMA Form 080-0-4b "Staffing for Adequate Fire and Emergency Response Recruitment and Retention of Volunteer Firefighters Application (Questions and Narrative)." The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472-3100, Paperwork Reduction Project (1660-0135) NOTE: Do not send your completed form to this address.



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Request Details

Application **70%** complete

Activity Selection

Please use this section to select the activity for which you are applying and provide the additional information requested.

If you are a Volunteer Department or a Combination Department and are interested in applying under both the Hiring of Firefighters Activity and the Recruitment and Retention of Volunteer Firefighters Activity you will need to submit separate applications - one for each activity.

Note: Career departments are only eligible for the Hiring of Firefighters Activity and National, State, Local, or Tribal Volunteer Firefighter Interest Organizations are only eligible for the Recruitment and Retention of Volunteer Firefighters Activity.

To begin building your project, select the Activity which you are applying for and then click the View Details link.

* Select an activity for which you are applying.

| Activity Name | Eligible Organizations: |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="radio"/> Hiring of Firefighters | [Volunteer Fire Departments] [Combination Fire Departments] [Career Fire Departments] |
| <input checked="" type="radio"/> Recruitment and Retention of Volunteer Firefighters | [Volunteer Fire Departments] [Combination Fire Departments] [National, State, Local, or Tribal Volunteer Firefighter Interest Organizations] |

Click View Details link below to build your program budget.

| Activity | Number of Entries | Total Cost | Action |
|---------------------------------------------------------------------|-------------------|------------|------------------------------|
| Recruitment and Retention of Volunteer Firefighters | 0 | 0 | View Details |

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Request Details

Please answer the questions below and then click Add Recruitment and Retention Activity to begin.

You must answer all of the project specific questions and specify at least one budget item. Once you have added your project, the list of the budgeted line items and the costs for each line item will be listed in the table below. You can come back and modify this area at any point before you submit your application to FEMA.

You may update or delete the information by clicking the appropriate link under the Action column.

When you have finished, press the Return to Summary button below.

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| <p>* In cases of demonstrated economic hardship, and upon the request of the grant recipient, the FEMA Administrator may waive or reduce a SAFER Recruitment and Retention (R&R) minimum budget requirement. Is it your department's intent to apply for an economic hardship waiver, if awarded?</p> | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| <p>* Is there a grant-writing fee associated with the preparation of this request? (if yes, you must add the cost as a budget item below in order to be reimbursed with grant funds)</p> | <input type="radio"/> Yes <input type="radio"/> No |

| Activity | Action |
|----------------------------------------------------------|--------|
| No line items are currently specified for this activity. | |

[Return to Summary](#)



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Recruitment and Retention of Volunteer Firefighters Activity

Please provide the following additional information that pertains to your fire department.

As a reminder, the purpose of these grants is to assist fire departments with the recruitment and retention of **volunteer firefighters who are involved with, or trained in, the operations of firefighting and emergency response**. The grants are intended to create a net increase in the number of trained, certified, and competent firefighters capable of safely responding to emergencies within the grantee's geographic response area.

Career fire departments are not eligible for this activity.

Note: Fields marked with an asterisk (*) are required.

| Recruitment and Retention of Volunteer Firefighters | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| * 1. What is the ideal number of active volunteer firefighters needed by your department to adequately comply with NFPA 1710 (Section 5.2.4.1 - Single-Family Dwelling Initial Full Alarm Assignment Capability) or NFPA 1720 (Section 4.3 - Staffing and Deployment)? (Note: Include only operational volunteer firefighters; administrative or EMS only members should not be included) | <input type="text"/> (Whole Numbers only) Help |
| * 2. What is the total number of current active volunteer firefighters in your department? (Note: Include only operational volunteer firefighters; administrative or EMS only members should not be included) | <input type="text"/> (Whole Numbers only) Help |
| * 3. How many active volunteer operational firefighters joined your department over the last three years? | <input type="text"/> (Whole Numbers only) |
| * 4. How many active volunteer operational firefighters left your department over the last three years? | <input type="text"/> (Whole Numbers only) |
| * 5. Will your department periodically evaluate your proposed program's impact? | <input type="radio"/> Yes <input type="radio"/> No Help |
| 5a. If Yes, please provide an explanation of how the evaluation will be conducted (800 characters) . | <div style="border: 1px solid black; height: 40px; width: 100%;"></div> 800 characters left |
| * 6. Do you currently have a Recruitment and Retention Coordinator or Program Manager position? | <input type="radio"/> Yes <input type="radio"/> No, but will appoint one outside of the grant <input type="radio"/> Included in this request <input type="radio"/> No |
| * 7. Do you currently have a marketing plan as part of your recruitment and/or retention program? | <input type="radio"/> Yes <input type="radio"/> No, but will be developing one as part of this grant <input type="radio"/> No |
| * 8. Does your department currently offer worker's compensation/accidental death and dismemberment (AD&D) insurance for active volunteer firefighters? | <input type="radio"/> Yes <input type="radio"/> Included in this request <input type="radio"/> No Help |
| * 9. Will your grant have a regional and/or local impact beyond your fire department? | <input type="radio"/> Yes, the activities requested will be shared directly with other departments <input type="radio"/> Yes, other departments will benefit indirectly from the recruitment or retention activities <input type="radio"/> No, other departments will not benefit Help |



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| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>* 7. Do you currently have a marketing plan as part of your recruitment and/or retention program?</p> | <p> <input type="radio"/> Yes <input type="radio"/> No, but will be developing one as part of this grant <input type="radio"/> No </p> |
| <p>* 8. Does your department currently offer worker's compensation/accidental death and dismemberment (AD&D) insurance for active volunteer firefighters?</p> | <p> <input type="radio"/> Yes Help <input type="radio"/> Included in this request <input type="radio"/> No </p> |
| <p>* 9. Will your grant have a regional and/or local impact beyond your fire department?</p> | <p> <input type="radio"/> Yes, the activities requested will be shared directly with other departments Help <input type="radio"/> Yes, other departments will benefit indirectly from the recruitment or retention activities <input type="radio"/> No, other departments will not benefit <input type="radio"/> N/A (Requesting assistance to retain current members only) </p> |
| <p>9a. If Yes, please list the departments and describe how they will benefit from this application. (Note: If awarded, you may be required to provide documentation of the fire department's consent to participate in the application).</p> <p>If additional space is needed for your response, please include it in the Project Description section of the application Narrative (1000 characters).</p> | <div style="border: 1px solid #ccc; height: 40px; width: 100%;"></div> <p style="text-align: right; font-size: small;">1000 characters left</p> |
| <p>9b. If Yes, do you certify that you will ensure that the fire departments benefiting from this application have not received grants for similar items/activities?</p> | <p> <input type="radio"/> Yes <input type="radio"/> No </p> |
| <p>* 10. If awarded a grant, will you provide the new recruits with entry-level physicals in accordance with NFPA 1582, Standard on Comprehensive Occupational Medical Program for Fire Departments 2003 Edition, Chapter 6?</p> | <p> <input type="radio"/> Yes, NFPA 1582 compliant Help <input type="radio"/> No, but will provide other physicals not to NFPA 1582 specifications <input type="radio"/> No </p> |
| <p>* 11. Do you currently provide annual medical/physical exams in accordance with NFPA 1582, Standard on Comprehensive Occupational Medical Program for Fire Departments 2003 Edition, Chapter 6?</p> | <p> <input type="radio"/> Yes, NFPA 1582 compliant Help <input type="radio"/> No, but will provide other physicals not to NFPA 1582 specifications <input type="radio"/> No </p> |
| <p>* 12. What is the minimum level of training and certification standard required by your locality/state?</p> | <p> <input type="radio"/> None <input type="radio"/> First responder <input type="radio"/> FF I <input type="radio"/> FF I/EMT <input type="radio"/> FF II <input type="radio"/> FF II/EMT </p> |
| <p>* 13. Will the personnel recruited meet the minimum local or State fire and EMS training and certification requirements for firefighters within 24 months of appointment?</p> | <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A - (Requesting assistance to retain current members only) </p> |



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Add Budget Item

Please provide the following information. You may request additional line items by clicking on the "Add Budget Item" link.

NOTE: The cost figures you provide do not have to be firm quotes from your vendors, but they should be estimated based on research of current prices (i.e., check with at least two vendors for your estimates) before you submit your estimated costs. If you do not have these estimates, you can come back and modify this area at any point before you submit your application to FEMA. Only whole dollar amounts should be provided (no cents please).

Fields marked with an asterisk (*) are required.

| | | | | | | | | | | | | | |
|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|-------------------------------------|----|-------------------------------|--------------------------------------|----|-------------------------------|-------------------------------------|----|-------------------------------|--------------------------------------|
| * Category | <input type="text" value=""/> | | | | | | | | | | | | |
| If you selected Other, above, please specify: | <input type="text" value=""/> | | | | | | | | | | | | |
| * Sub-Category | <input type="text" value=""/> | | | | | | | | | | | | |
| If you selected Other, above, please specify: | <input type="text" value=""/> | | | | | | | | | | | | |
| * Select Object Class: | Select Object Class <input type="text" value=""/> | | | | | | | | | | | | |
| If you selected Other, above, please specify: | <input type="text" value=""/> | | | | | | | | | | | | |
| *Cost | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; border: 1px solid black; text-align: center;">\$</td> <td style="width: 15%; border: 1px solid black; text-align: center;"><input type="text" value=""/></td> <td style="padding-left: 5px;">First 12-Month Period of Your Grant</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;">\$</td> <td style="border: 1px solid black; text-align: center;"><input type="text" value=""/></td> <td style="padding-left: 5px;">Second 12-Month Period of Your Grant</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;">\$</td> <td style="border: 1px solid black; text-align: center;"><input type="text" value=""/></td> <td style="padding-left: 5px;">Third 12-Month Period of Your Grant</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;">\$</td> <td style="border: 1px solid black; text-align: center;"><input type="text" value=""/></td> <td style="padding-left: 5px;">Fourth 12-Month Period of Your Grant</td> </tr> </table> | \$ | <input type="text" value=""/> | First 12-Month Period of Your Grant | \$ | <input type="text" value=""/> | Second 12-Month Period of Your Grant | \$ | <input type="text" value=""/> | Third 12-Month Period of Your Grant | \$ | <input type="text" value=""/> | Fourth 12-Month Period of Your Grant |
| \$ | <input type="text" value=""/> | First 12-Month Period of Your Grant | | | | | | | | | | | |
| \$ | <input type="text" value=""/> | Second 12-Month Period of Your Grant | | | | | | | | | | | |
| \$ | <input type="text" value=""/> | Third 12-Month Period of Your Grant | | | | | | | | | | | |
| \$ | <input type="text" value=""/> | Fourth 12-Month Period of Your Grant | | | | | | | | | | | |
| At least one box must have a value greater than zero. | | | | | | | | | | | | | |
| * Description | <p>Use the space to the right to provide specific details on the items/activities requested under this budget line item and how costs were determined. Provide a simple, yet descriptive explanation of the costs. Some examples are provided below:</p> <ul style="list-style-type: none"> If requesting turnout gear/personal protective equipment, you should identify the number of new recruits that will receive gear under this award, a list of each item being requested (and associated cost per item), and the total cost of one full set of gear for each new recruit; If requesting salary costs for a recruitment coordinator, you should identify whether the position is part-time or full-time, the number of hours that will be worked per week, and the tasks that the individual will perform as part of the award; If requesting funds for member awards or incentives, you should include the type of award or incentive, the amount requested for each, and how the members will qualify to receive the incentive; If requesting station duty uniforms for new members, you should identify the number of new recruits that will receive uniforms under this award, a list of each item being requested, and the cost of each item. | | | | | | | | | | | | |
| | <div style="border: 1px solid black; height: 100px; width: 100%; position: relative;"> <div style="position: absolute; right: -20px; top: 50%; transform: translateY(-50%); font-size: 1.2em;"> ^ v </div> </div> <p style="font-size: 0.8em; margin-top: 5px;">2000 characters left</p> | | | | | | | | | | | | |



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Budget

Application **70%** complete

Recruitment and Retention of Volunteer Firefighters:

There is no local match requirement for this activity and there are no maximum Federal share limits. Therefore, any items requested under Recruitment and Retention will be 100% Federally funded.

Please review the budget information below. If you need to change any of the budget amounts on the matrix, you will need to change the budget information on the previous Request Details screen.

Using the information you entered for your item's please enter and review the budget information below. Include totals in the right hand column and bottom row.

| | First 12-Month Period | Second 12-Month Period | Third 12-Month Period | Fourth 12-Month Period | Total |
|----------------------------------|--------------------------|---------------------------|--------------------------|---------------------------|---------------|
| Personnel | 0 | 0 | 0 | 0 | 0 |
| Fringe Benefits | 10,000 | 10,000 | 10,000 | 10,000 | 40,000 |
| Travel | 0 | 0 | 0 | 0 | 0 |
| Equipment | 0 | 0 | 0 | 0 | 0 |
| Supplies | 0 | 0 | 0 | 0 | 0 |
| Contractual | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 |
| Indirect Charges | 0 | 0 | 0 | 0 | 0 |
| Federal Share | 10,000 | 10,000 | 10,000 | 10,000 | 40,000 |
| Applicant Share | 0 | 0 | 0 | 0 | 0 |
| Total: | 10,000 | 10,000 | 10,000 | 10,000 | 40,000 |

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Narrative Statement for Volunteer Recruitment and Retention Activity

Application **80%** complete

The narrative statements must provide all the information necessary for you to justify your needs and for FEMA to make an award decision. A panel of peer reviewers will perform the second phase of the applications' evaluations by using the narrative statements below, along with the answers to the general and the activity-specific application questions, to determine the worthiness of the request for an award.

Please ensure that your narrative clearly addresses each of the following evaluation criteria elements to the best of your ability, with detailed but concise information. Each element will be evaluated independently by the peer review panelists. The relative weight of the evaluation criteria in the determination of the grant award is listed below.

You may either type your narrative elements in the spaces provided below; or create the text in your word processing system and then copy it into the appropriate spaces provided below. Please note the narrative block does not allow for formatting. Do not type your narrative using only capital letters. Additionally, do not include tables, special fonts (i.e., quotation marks, bullets, etc.), or graphs.

Note: Fields marked with an asterisk (*) are required. Each element must have a minimum of 200 characters and each element will have a character limit; the limit varies based on the questions being asked. The character count will be listed below each text box.

* Element #1 - Project Description (30%):

* 1a. What problems and/or issues is the department experiencing in recruiting new volunteer firefighters (i.e., why are you unable to recruit members)? What are the problems and/or issues the department is experiencing in retaining current members (i.e., why are the current volunteer firefighters leaving)? (3000 characters)

3000 characters left

* 1b. What is the department's implementation plan to directly address the problems and/or issues discussed above? What are the methods and specific steps that will be used to achieve this plan? (3000 characters)

3000 characters left

* 1c. How will the recruitment of new volunteer firefighters and/or retention of current volunteer firefighters impact the department's operational needs or capabilities? (1500 characters)



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*** 1c. How will the recruitment of new volunteer firefighters and/or retention of current volunteer firefighters impact the department's operational needs or capabilities?** (1500 characters)

1500 characters left

*** 1d. What are the specific benefits the new volunteer firefighters and/or retention of current volunteer firefighters will provide for the fire department(s) and community?** (1000 characters)

1000 characters left

*** 1e. If your grant will have a regional impact, which activities are part of the regional request and which activities are exclusive to the host applicant, if applicable.** (2000 characters)

2000 characters left

***Element #2 - Impact on Daily Operations (30%):**

*** 2a. How are the community and the current volunteer firefighters in the department at risk without the items/activities requested in this application? How will that risk be reduced if awarded?** (2000 characters)



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***Element #2 - Impact on Daily Operations (30%):**

*** 2a. How are the community and the current volunteer firefighters in the department at risk without the items/activities requested in this application? How will that risk be reduced if awarded? (2000 characters)**

2000 characters left

*** 2b. How often does your department currently comply with the applicable NFPA 1710 or NFPA 1720 standards? What impact will the recruitment of new volunteer firefighters and/or the retention of current volunteer firefighters have on the departments NFPA compliance, if awarded? (2000 characters)**

2000 characters left

***Element #3 - Financial Need (30%):**

*** 3a. Please provide additional details on the department's current operating budget. This must include an income verse expenses breakdown of the current annual budget indicated in the Applicant Characteristics section of the application. If you were unable to provide the department's operating budget for the 2001, 2002, and 2003 fiscal years, please provide details on why you were not able to provide the information. (2000 characters)**

2000 characters left



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*** 3b. Please describe the department's budget shortfalls and the inability to address the financial needs without federal assistance. What other actions have you taken to obtain funding elsewhere (i.e., state assistance programs, other grant programs, etc.)? How have similar projects been funded in the past? (2000 characters)**

2000 characters left

*** 3c. How are the critical functions of your department affected without this funding? (1000 characters)**

1000 characters left

***Element #4 - Cost Benefit (10%):**

*** Please describe the benefits (i.e., anticipated savings, efficiencies) the department and community will realize if awarded the items/activities requested in this application. (3000 characters)**

3000 characters left

Element #5 - Additional Information : If you have any additional information you would like to include about the department and/or this application in general, please provide below. (2000 characters)



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*** 3c. How are the critical functions of your department affected without this funding? (1000 characters)**

1000 characters left

***Element #4 - Cost Benefit (10%):**

*** Please describe the benefits (i.e., anticipated savings, efficiencies) the department and community will realize if awarded the items/activities requested in this application. (3000 characters)**

3000 characters left

Element #5 - Additional Information : If you have any additional information you would like to include about the department and/or this application in general, please provide below. (2000 characters)

2000 characters left