

Department of Homeland Security
Federal Emergency Management Agency
URBAN SEARCH AND RESCUE RESPONSE SYSTEM
Task Force Narrative Workbook

OMB 1660-0073
Expires XX XX, 20XX

PAPERWORK BURDEN DISCLOSURE NOTICE
FEMA Form FF-104-FY-21-174 (formerly 089-0-10)

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Purpose

The U.S. Department of Homeland Security (DHS) and the Federal Emergency Management Agency (FEMA) are accountable to provide support and funding for the maintenance and readiness of the National Urban Search and Rescue (US&R) Response System. The purpose of the **Readiness Cooperative Agreement** is to support the continued development and maintenance of a national urban search and rescue capability.

Specifically, the agreement provides a mechanism for distribution of Cooperative Agreement funding for certain purposes in preparation for US&R disaster response. The Cooperative Agreement allows each Sponsoring Agency of a US&R task force the opportunity to maintain a high standard and condition of operational readiness and includes guidance on key areas for task force management to focus on continued preparedness efforts.

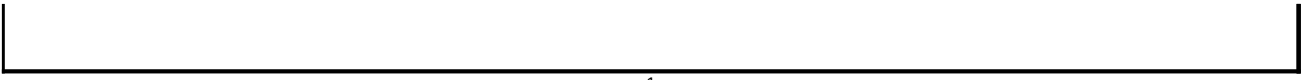
The Cooperative Agreement provides direction to the US&R task force Sponsoring Agency for the use of funding to provide: administrative and program management, training, support, equipment cache procurement, maintenance and storage. This workbook is designed for use by the Sponsoring Agencies of all current task forces within the US&R Response System when applying for the US&R Readiness Cooperative Agreement solicitation.

For more specific information and instructions for submission, refer to the applicable Notice of Funding Opportunity (NOFO) package and Statement of Work.



Urban Search & Rescue (US&R) Readiness Cooperative Agreement
Task Force Narrative Workbook
CONTENTS

Purpose.....	i
Contents.....	1
Sample Cover Letter.....	2
Preparer & Contact Information (FEMA Form 089-0-10A).....	3
Budget Summary (Detailed) (FEMA Form 089-0-10B).....	4
Sample of "Purpose of Cooperative Agreement" from Task Force.....	5
Administration and Management (FEMA Form 089-0-10C).....	6
Training (FEMA Form 089-0-10D).....	7
Equipment (FEMA Form 089-0-10E).....	8
Storage & Maintenance (FEMA Form 089-0-10F).....	9
Budget Totals (FEMA Form 089-0-10G).....	10
Position Descriptions (FEMA Form 089-0-10H).....	11
Form for Additional Budget Clarification Information (FEMA Form 089-0-10I).....	12



SAMPLE COVER LETTER FOR COOPERATIVE AGREEMENT APPLICATION

Date: [REDACTED]

US Department of Homeland Security
Federal Emergency Management Agency
Grants Management Branch
Attn: Ms. Tawana Mack
800 K Street NW - Rm: S430-5
Washington, DC 20472

Dear Ms. Mack:

Enclosed is the US&R application of **Your Sponsoring Agency Name** for the year **XXXX** Department of Homeland Security/FEMA, Urban Search & Rescue Cooperative Agreement for a total of **\$X,XXX,XXX**.

The following items have been completed electronically within ND Grants:

- . Application for Federal Assistance, SF 424
- . Budget Information-Non Construction Programs FEMA form SF 424A
- . Summary sheet for Assurances and Certifications, SF 424 B
- . SF GG/SF LLL - Lobbying Activities

The following are included in the Narrative Statement (FEMA Wbk 089-0-10) and attached with the Application:

- . Preparer & Contact Information Sheet
- . Budget Narrative (Budget Summary Sheet, four cost categories and Budget Totals)
- . Position Descriptions for all Staff paid by the Cooperative Agreement

The following are submitted as additional attachments:

- . Indirect Cost Rate Agreement
- . Specifications for all rolling transportation
- 0. Pre-Award Cost Request and Approval

Please call **"Your Point of Contact"** at **(XXX) XXX-XXX** or email at **johndoe@wa.us** or **"Alternate Point of Contact"** **(XXX) XXX-XXXX** or email at **janedoe@wa.us** for any other information that you may need.

Sincerely,

Your Agency Head
Title
Agency

PREPARER INFORMATION

FEMA Form 089-0-10A

Preparer	
Prefix	
First Name	
Middle Name	
Last Name	
Title	
Agency/Organization	
Address 1	
Address 2	
City	
State	
Zip	
Phone	
Fax	
E-mail	

CONTACT INFORMATION

Point of Contact	
Prefix	
First Name	
Middle Name	
Last Name	
Title	
Agency/Organization	
Address 1	
Address 2	
City	
State	
Zip	
Phone	
Fax	
E-mail	

APPLICANT INFORMATION

Applicant	
Task Force	
Organization Name	
Employer Identification Number	
DUNS Number	
Address 1	
Address 2	
City	
County	
State	
Zip	
Country	
Submission Date	
Type of Applicant	
Congressional District Applicant	
Congressional District Project	
Authorized Representative First Name	
Authorized Representative Middle Name	
Authorized Representative Last Name	
Authorized Representative Title	

Authorized Representative Phone Number	
Applicant Identifier (if applicable)	
State Applicant Identifier (if applicable)	
Organizational Unit:	
Department:	
Division:	
Made available for EO 12372 (Answer Y or N)	
Date Reviewed If applicable	
"Y" for not covered "N" for not selected	

COOPERATIVE AGREEMENT BUDGET SUMMARY

FEMA Form 089-0-10B

BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. US&R Readiness Cooperative Agreement	97.025	0.00	0.00	0.00	\$	0.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)	
	(1) Admin. & Mgmt.	(2) Training	(3) Equipment	(4) Storage & Maint.		
a. Personnel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
b. Fringe Benefits	0.00	0.00	0.00	0.00	0.00	
c. Travel	0.00	0.00	0.00	0.00	0.00	
d. Equipment	0.00	0.00	0.00	0.00	0.00	
e. Supplies	0.00	0.00	0.00	0.00	0.00	
f. Contractual	0.00	0.00	0.00	0.00	0.00	
g. Construction	N/A	N/A	N/A	N/A	N/A	
h. Other	0.00	0.00	0.00	0.00	0.00	
i. Total Direct Charges (sum of 6a-6h)	0.00	0.00	0.00	0.00	0.00	
j. Indirect Charges	0.00	0.00	0.00	0.00	0.00	
k. TOTALS (sum of 6i and 6j)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

7. Program Income	\$	\$	\$	\$	\$
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NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8.	\$	\$	\$	\$0.00	
9.				0.00	
10.				0.00	
11.				0.00	
12. TOTAL (sum of lines 8-11)	\$0.00	\$0.00	\$0.00	\$0.00	
FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$0.00	\$	\$	\$	\$
14. Non-Federal	0.00				
15. TOTAL (sum of lines 13 and 14)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16.	\$	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$0.00	\$0.00	\$0.00	\$0.00	
OTHER BUDGET INFORMATION					
21. Direct Charges:			22. Indirect Charges:		
23. Remarks:					

**National Urban Search & Rescue Response System
S&R Task Force Readiness Cooperative Agreement Budget Narrativ
Purpose of Agreement**

The purpose of this **Readiness Cooperative Agreement** is to continue the development and maintenance of National Urban Search and Rescue (US&R) Response System resources to be prepared for mission response and to provide qualified personnel in support of Emergency Support Function-9 (ESF-9) activities under the National Incident Management System (NIMS) and the National Response Framework (NRF).

Our Task Force agrees to manage the continued development and maintenance of this National US&R Response System resource. We will be prepared to provide qualified, competent US&R personnel in support of ESF-9 activities under the National Response Framework. Specifically, this fiscal year's US&R Notice of Funding Opportunity (NOFO) and the accompanying budget narrative provides our plan to accomplish our objectives identified by DHS/FEMA. This work plan identifies the key areas that our Task Force will focus its continued readiness efforts. These key areas are administrative and program management, training, support, equipment cache preparedness, maintenance and storage. These key areas are detailed in the Grant Guidance/Statement of Work. This Cooperative Agreement will allow our Task Force to maintain a high standard and condition of operational readiness. It is the intent of our Task Force to comply with this fiscal year's US&R NOFO throughout the duration of this agreement.

While portions of this fiscal year's US&R NOFO are included in the budget narrative, we acknowledge compliance with this fiscal year's US&R NOFO in its entirety.

Other

Notes for Other Section
 This area will cover any miscellaneous items that are not covered in the other object classes and are allowable within the Statement of Work.

Item	Quantity	Unit Cost	Total Cost
			\$0
			\$0
			\$0
			\$0
			\$0
Total			\$0

Other	Cost Basis: Please mark appropriate box(es) below.
Describe any additional supporting information for other costs below.	<input type="checkbox"/> Union Agreements <input type="checkbox"/> w/County/Organization Negotiated Agreements <input type="checkbox"/> Historical Data <input type="checkbox"/> Quotes <input type="checkbox"/> Items are in Comparison w/ other TFs for Similar Tasks or Items <input type="checkbox"/> Other (List here):
This narrative box has character limitations. For additional clarification, use tab 12.	

Indirect Costs

Notes for Indirect Costs Section
 Indirect Costs can only be listed if there is an Indirect Cost Rate Agreement that has been approved by a cognizant Federal Agency. A copy of the Indirect Cost Rate Agreement should accompany the application. The Indirect Cost Rate Agreement you provide should state what category or categories the Indirect Costs are based on, i.e. equipment, salaries, all expenses, etc. The information provided below should list the description of the cost category for the base, the amount on which it's based, the percentage, and the total. The rate or amount approved at time of award will prevail thru the term of the Cooperative Agreement.

Indirect Costs

Item/Category	Item Description	Base Amount	Percentage	Total Cost
Total				\$0

Indirect Costs	Cost Basis: Please mark appropriate box(es) below.
Describe any additional supporting information for indirect costs below. Please advise who is the Cognizant Federal Agency and the date of approval.	<input type="checkbox"/> Union Agreements <input type="checkbox"/> w/County/Organization Negotiated Agreements <input type="checkbox"/> Historical Data <input type="checkbox"/> Quotes <input type="checkbox"/> Items are in Comparison w/ other TFs for Similar Tasks or Items <input type="checkbox"/> Other (List here):
This narrative box has character limitations. For additional clarification, use tab 12.	

Other

Notes for Other Section

This area will cover any miscellaneous items that are training-related and allowable under the Statement of Work but not covered in the other object classes.

Other (If Applicable)

Item	Quantity	Unit Cost	Total Cost
			\$0
			\$0
			\$0
			\$0
			\$0
Total			\$0

Other	Cost Basis: Please mark appropriate box(es) below.
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Total				\$0

Indirect Costs	Cost Basis: Please mark appropriate box(es) below.
Describe any additional supporting information for indirect costs below. Please advise who is the Cognizant Federal Agency and the date of approval.	<input type="checkbox"/> on Agreements <input type="checkbox"/> /County/Organization Negotiated Agreements <input type="checkbox"/> orical Data <input type="checkbox"/> /Quotes <input type="checkbox"/> ts are in Comparison w/ other TFs for Similar Tasks or Items <input type="checkbox"/> er (List here):
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BUDGET TOTALS

FEMA Form 089-0-10G

This summary will be populated based on figures entered into other sections of this narrative.

Activity	Cost
Administration & Management	\$0.00
Training	\$0.00
Equipment	\$0.00
Storage & Maintenance	\$0.00
Object Class	Cost
Personnel	\$0.00
Fringe Benefits	\$0.00
Travel	\$0.00
Equipment	\$0.00
Supplies	\$0.00
Contractual	\$0.00
Other	\$0.00
Indirect Charges	\$0.00
Activity Sum	\$0.00
Object Class Sum	\$0.00
Total	\$0.00

STORAGE & MAINTENANCE
Personnel Salaries:
Fringe Benefits:
Travel:

STORAGE & MAINTENANCE
Equipment:
Supplies:
Contractual:

STORAGE & MAINTENANCE
Other:
Direct Charges

STORAGE & MAINTENANCE