



RESOLUTION No. 17-024

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

**RESOLUTION ACCEPTING THE FISCAL YEAR 2016
EMERGENCY MANAGEMENT PERFORMANCE GRANT (EMPG)
FROM THE CALIFORNIA GOVERNOR'S OFFICE OF
EMERGENCY SERVICES FUNDED THROUGH THE U.S.
DEPARTMENT OF HOMELAND SECURITY IN THE AMOUNT OF
\$145,370 WITH A 100% MATCHING FUND REQUIREMENT FOR
USE DURING THE PERIOD JULY 1, 2016 THROUGH JUNE 30, 2017**

WHEREAS, the U.S Department of Homeland Security is funding a grant through the California Governor's Office of Emergency Services to assist state, local, and tribal governments to enhance their capability to prevent, prepare for, mitigate against, respond to, and recover from emergencies and disasters, whether natural or man-made; and

WHEREAS, Resolution 15-396 approves individuals as authorized officials to execute applications and documents for Department of Homeland Security Programs; and

WHEREAS, Nevada County's application was approved by the California Emergency Management Agency on October 11, 2016.

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of Nevada hereby directs:

1. That the County of Nevada accept the grant in the amount of \$145,370 for the grant period July 1, 2016 through June 30, 2017.
2. That the Director of Emergency Services is authorized to fulfill the requirements of the Fiscal Year 16 EMPG.
3. That the Auditor-Controller deposit grant funding in the amount of \$145,370 into the Fiscal Year 2016/2017 Emergency Management Budget: 0101-20702-414-1000/446700.

PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the 10th day of January, 2017, by the following vote of said Board:

Ayes: Supervisors Heidi Hall, Edward Scofield, Dan Miller, Hank Weston and Richard Anderson.

Noes: None.

Absent: None.

Abstain: None.

ATTEST:

JULIE PATTERSON HUNTER
Clerk of the Board of Supervisors

By: 


Hank Weston, Chair

1/10/2017 cc: OES*
AC*

82-96-11

(Cal OES Use Only)					
Cal OES #	FIPS #	057-00000	VS#	00	Subaward #
					2016-0010

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
GRANT SUBAWARD FACE SHEET**

AUG 22 2016

620252

The California Governor's Office of Emergency Services (Cal OES) hereby makes a Grant Subaward of funds to the following:

1. **Subrecipient:** County of Nevada 1a. DUNS#: 010979029

2. **Implementing Agency:** Nevada County Office of Emergency Services 2a. DUNS#: 010979029

3. **Implementing Agency Address:** 10114 North Bloomfield Rd Nevada City 95959-8402
Street City Zip+4

4. **Location of Project:** Nevada City Nevada 95959-8402
City County Zip+4

5. **Disaster/Program Title:** Fiscal Year 2016 EMPG Program 6. **Performance Period:** 07/01/16 to 06/30/17

7. **Indirect Cost Rate:** N/A; 10% de Minimis; Federally Approved ICR;

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
2016	8. EMPG		\$145,370		\$145,370		\$145,370	\$290,740
Select	9. Select							
Select	10. Select							
Select	11. Select							
	12. TOTALS		\$145,370	\$145,370	\$145,370		\$145,370	\$290,740
								126. Total Project Cost:

13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. **Official Authorized to Sign for Subrecipient:** 15. **Federal Employer ID Number:** 04-60100526

Name: Steve Monaghan Title: Director of Emergency Services

Telephone: (530) 265-1239 FAX: (530) 265-7087 Email: steve.monaghan@co.nevada.ca.us
(area code) (area code)

Payment Mailing Address: 950 Maidu Ave City: Nevada City Zip+ 4: 95959-8600

Signature: *Steve Monaghan* Date: 08/15/2016

(FOR Cal OES USE ONLY)

I hereby certify upon my personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Mary Buckler 10/4/16 Sara Stillwell 10/5/16
Cal OES Fiscal Officer Date Cal OES Director (or designee) Date

Yr / Chapter: 2016-17/23 PCA No: 14856
 Item: 0690-101-0890 Component: 40
 FAI#: EMF-2016-EP-00010 CFDA#: 97.042
 Federal Award Date: 10/01/15 to 09/30/17
 Fund: Federal Trust
 Program: Emergency Management Performance Grant
 Match Req.: 50% on TPC
 Project No.: 16EMPG Amount: \$145,370

16 LA0063-00

ACCOUNTING RECEIVED
 16 OCT -5 P 2:40

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUPPLEMENTAL GRANT SUBAWARD INFORMATION**

1. Cal OES Contact Information Section:

Governor's Office of Emergency Services
Mark S. Ghilarducci, Director
3650 Schriever Avenue
Mather, CA 95655
(916) 845-8506 phone • (916) 845-8511 fax

2. Federal Awarding Agency Section:

Federal Program Fund / CFDA #	Federal Awarding Agency	Total Federal Award Amount	Total Local Assistance Amount
Emergency Management Performance Grant (EMPG) / 97.042	US Department of Homeland Security	\$27,897,964	\$15,481,623
Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	\$	\$

3. Project Description Section:

- Project Acronym (Please choose from drop down):
N/A
- Project Description (Please type the Project Description):

Implementation of emergency management grant to provide a system of preparedness for the protection of life and property from hazards.

4. Research & Development Section:

- Is this Subaward a Research & Development grant? Yes No

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

AUTHORIZED AGENT AND CONTACT INFORMATION

Alterations to this document may result in delays application approval, modification requests, or reimbursement requests.
 Subscribers may be asked to revise and/or re-submit any altered Financial Management Forms Workbook.

CFDA #: EMPG 97.042

County of Nevada

057-00000
 2016-0010

Additional Authorized Agent Contact Information	Mailing Address	City	State	Zip	Phone	Email
Authorized Agent's Name Steve Monaghan	950 Meidu ave	Nevada City	CA	95959	530-265-1239	steve.monaghan@co.nevada.ca.us
Rick Haffey	950 Meidu ave	Nevada City	CA	95959	530-265-7170	rick.haffey@co.nevada.ca.us
Alison Lehman	950 Meidu ave	Nevada City	CA	95959	530-265-1290	alison.lehman@co.nevada.ca.us
Authorized Agent's Name John Gulserian	Mailing Address 10014 N. Bloomfield Rd	City Nevada City	State CA	Zip 95959	Phone 530-265-1515	Email john.gulserian@co.nevada.ca.us
Carol Babson	10014 N. Bloomfield Rd	Nevada City	CA	95959	530-470-2635	carol.babson@co.nevada.ca.us

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

Federal Funding Accountability and Transparency Act (FFATA) Financial Disclosure

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- Public Law (PL) 109-282 (Federal Funding Accountability and Transparency Act of 2006), as amended by Section 6202(a) of the Government Funding Transparency Act of 2008 (PL 110-252), which is outlined in FEMA GPD information Bulletin No. 350.
- If the Subrecipient in the preceding year received 80 percent or more of its annual gross revenues in Federal Awards, and \$25,000,000 or more in annual gross revenues from Federal awards, and the public does not have access to information about the compensation of the senior executives of the entity, then the Subrecipient is **subject to the FFATA Financial Disclosure requirements and will need to fill out this form.**
- FFATA Financial Disclosure is **in addition** to the Authorized Body of Five page.
- Cal OES enters FFATA information on behalf of the Subrecipient.

Executive Name	Title	Annual Salary	Annual Dollar Value of Benefits	Total Compensation

Not Subject to FFATA Financial Disclosure

CFDA # **EMPG 97.042**

LEDGER TYPE: **Initial Application**
 Today's Date: **June 15, 2016**

ECT LEDGER

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 Warning! Decimal usage is not allowed. Attempts to use decimals will prompt error message.

County of Nevada

057-00000
 2016-0010

ENTERED 6/15/16

Project	Direct/Subaward	Project Name	Funding Source	Discipline	Solution Area	Solution Area Sub-Category	Total Obligated	Amount Approved Previous	Amount This Request	Approval: Cal OES ONLY	Date & Initials (Prog. REP.):	Remaining Balance	Percentage Expended
							145,370				-	145,370	
							120,970					120,970	
A	Direct	Emergency Management	EMPG	EMG	Organization Maintenance & Sustainment	Staffing	12,500					12,500	
B	Direct	Emergency Notification	EMPG	EMG	Indirect Cost	User Fees	11,900					11,900	
C	Direct	General Expenses	EMPG	EMG		Facilities & Administration							

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

DESCRIPTIONS

CFDA # EMPG 97.042

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County of Nevada

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2016-0010

Project	NFO Mission Area	NPG Core Capabilities	Cal OES Goals	Project Description	Match Description	Need	Project Milestones & Justifications
Project A	Prevention	Operational Coordination	Goal 1: Anticipate and enhance prevention and detection capabilities to protect our state from all hazards and threats	Emergency Management: Provide representation of OA MARAC, Cal OES, CESA meetings; Conduct quarterly OA Disaster Council Meetings; Participate in a minimum of three exercises; Review and update emergency plans; Continually reduce risk through partnerships with neighboring OAs as well as government and non-government organizations; Maintain and staff the County EOC to include staff training and exercise participation.	Cash match from General Fund allocated for Nevada County OES communications vault lease, Fire Prevention Assistant Program, telephone services, Comcast service to EOC, GIS services, Firesafe Council Contract, storm response, supplies, vehicles, OES Manager backfill, copier, Information General Service support fee.	Funding necessary to ensure all-hazards emergency management operations, staffing, and other day-to-day activities in support of emergency management.	At the 6 month mark, this project will be 50% complete and \$60,485 funds will be expended. At the 12 month mark, this project will be 100% complete and \$120,970 funds will be expended. At the _____ month mark, this project will be _____% complete and \$_____ funds will be expended.
Project B	Response	Public Information and Warning	Goal 3: Effectively respond to and recover from both human-caused and natural disasters	Emergency Notification: Outbound notification system software that enables the Operational Area to quickly, accurately, and automatically send emergency message to thousands of contacts, via phone, text messaging, pager, and email. This equipment is mobile and web based with no physical installation involved. AEL#04AP-09-ALRT for the period of performance from 7/1/16-6/30/17.	Cash match from General Fund allocated for Nevada County OES communications vault lease, Fire Prevention Assistant Program, telephone services, Comcast service to EOC, GIS services, Firesafe Council Contract, storm response, supplies, vehicles, OES Manager backfill, copier, Information General Service support fee.	Funding necessary to ensure the Operational Area maintains the capability to create, target, and sent alert messages in the event of a large-scale disaster.	At the 6 month mark, this project will be 100% complete and \$6,250 funds will be expended. At the 12 month mark, this project will be _____% complete and \$12,500 funds will be expended. At the _____ month mark, this project will be _____% complete and \$_____ funds will be expended.
Project C	Response	Operational Coordination	Goal 4: Enhance the administration and delivery of all state and federal funding, and maintain fiscal and program integrity	General Expenses for Administration and Facilities	Cash match from General Fund allocated for Nevada County OES communications vault lease, Fire Prevention Assistant Program, telephone services, Comcast service to EOC, GIS services, Firesafe Council Contract, storm response, supplies, vehicles, OES Manager backfill, copier, Information General Service support fee.	To assist the sustainment of the County's Emergency Management Program.	At the 6 month mark, this project will be _____% complete and \$5,950 funds will be expended. At the 12 month mark, this project will be _____% complete and \$11,900 funds will be expended. At the _____ month mark, this project will be _____% complete and \$_____ funds will be expended.
Project D							At the 6 month mark, this project will be _____% complete and \$_____ funds will be expended. At the 12 month mark, this project will be _____% complete and \$_____ funds will be expended. At the _____ month mark, this project will be _____% complete and \$_____ funds will be expended.
Project E							At the 6 month mark, this project will be _____% complete and \$_____ funds will be expended. At the 12 month mark, this project will be _____% complete and \$_____ funds will be expended. At the _____ month mark, this project will be _____% complete and \$_____ funds will be expended.

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

LANNING

CFDA # EMPG 97.042

LEDGER TYPE: Initial Application

Today's Date: June 15, 2016

Attention: to AS (a...), may result in delayed application approval, modification requests, or reimbursement requests. Sub-subjects may be asked to revise and/or re-submit any altered Financial Management Forms Workbook. Warning! Decimal Usage is not allowed. Attempts to use decimals will prompt error message.

County of Nevada

057-00000
2015-0010

Project	Direct/Subaward	Planning Activity	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Final Product	Hold Trigger	Approval Date	PART of a Procurement over 150K	Self Source Involved	Budgeted Cost	Amount Approved Previous	Approval: Cal OES ONLY Amount This Request	Date & Initials (Prog. REP.): REIMB Request #	Total Approved	Remaining Balance
		N/A															

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

ADMINISTRATION

Alterations to this document may result in delayed application approval, modification requests, or reimbursement requests. Subscribers may be asked to revise and/or re-submit any altered financial management forms workbook.
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CFDA # **EMPG 97.042**

LEDGER TYPE:	Initial Application
Today's Date:	June 15, 2016

County of Nevada

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2016-0010

Project	Direct/Subaward	Organization	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Detail	Budgeted Cost	Amount Approved Previous	Approval: Cal OES ONLY	Date & Initials (Prog. REP.)	REIMB Request #	Total Approved	Remaining Balance
A	Direct	Nevada County OES	EMPG	EMG	Staffing	Staff Salaries	Staffing	120,970					120,970	120,970
								120,970						

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

EQUIPMENT

Approved or true. may result in delayed equipment issuance, modification requests, or management reviews. Suppliers may be asked to provide additional information and related financial management forms for OES approval. Original usage is not allowed. Reference to any records will protect your interests.

County of Nevada
 057-00000
 2015-0010

CFDA

EMPG 97.042

LEDGER TYPE: Initial Application

Task's Date: June 15, 2016

Project	Equipment Description & Quantity	A/E #	A/E Title	SAFECOM Compliance	Funding Source	Discipline	Solution Area Sub-Category	Invoice Number	Vendor	TO Tag Number	Condition & Disposition	Deployed Location	Acquired Date	Part of a Procurement over 150K	State Source Invoiced	Hold Trigger	Approval Date	Budgeted Cost	Amount Approved Through	Amount This Request	REMS Request #	Date & Initials (Proc. REP.)	Remarks	Total Approved	Balance	
	N/A																									

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

TRAINING

Admission to this class may result in a change of application approval, modification, requests, or reimbursement requires. Subscribers may be asked to re-submit and/or re-submit any altered Financial Management Plans Worksheet. Warning! Do not delete, otherwise, attempts to use documents will prompt error messages.

County of Nevada

057-00000
2016-0010

CFDA#

EMPG 97.042

LEDGER TYPE:

Initial Application

Today's Date:

June 15, 2016

Project	Direct/Subaward	Course Name	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Feedback Number	Training Activity	Hold Trigger	Approval Date	Total # Trainees(s)	Identified Host	Part of a Procurement over 150K	Sale Source Involved	Budgeted Cost	Amount Approved Previous	Approval: Cal OES ONLY	Date & Initials (Prog. REP.):	Amount This REFB Request	Total Approved	Remain Balance
		N/A																			

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

EXERCISE

Notations to the applicant may result in request application approval, modification requests, or reimbursement requests.
 Corrections may be made to the form only on the original form. Changes to the form should be made on a separate page.
 Warning: Please do not check the 'Approved' checkbox to use decimals. It will produce an error message.

CFDA #

EMPS 97.042

LEDGER TYPE:
 Today's Date:
 Initial Application
 June 15, 2016

County of Nevada
 057-00000
 2015-0010

Project	Direct/Subaward	Exercise Title	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Hold Trigger	Approval Date	Date of Exercise	Exercise Activity	Identified Host	Date RAR e-mailed to HSEEP	Part of a Procurement over 150K	Sale Source Involved	Budgeted Cost	Amount Approved Previous	Amount This Request	Approval: Cal OES ONLY		Date & Initials (Prog. REP.)
																		BEING Request #	Total Approved	
Total Approved Balance																				
		N/A																		

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

RSONNEL

Alterations to this document may result in delayed application approval, modification requests, or reimbursement requests. Subscribers may be asked to revise and/or re-submit any altered Financial Management Forms Workbook. Warning! Decimal usage is not allowed. Attempts to use decimals will prompt error message.

County of Nevada

057-00000

2016-0010

CFDA #	EMPG 97.042
LEDGER TYPE:	Initial Application
Today's Date:	June 15, 2016

Project	Employee Name	Project/Deliverable	Funding Source	Discipline	Solution Area	Solution Area Sub-Category	Dates of Payroll Period	Total Salary & Benefits charged for this Reporting Period	Total Project Hours	REIMS Request #	Date & Initials (Prog. REP.):	Total Cost Charged to Grant
A	John Gulserian	Emergency Management	EMPG	EMG	Organization	Staffing		-	-	-		-

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

AUTHORIZED AGENT

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CFDA #: EMPG 97.042

County of Nevada

057-00000
2016-0010

Supporting Information for Reimbursement/Advance of State and Federal Funds

RECEIVED
SEP 02 2016
BY: 620709

Initial Application

This request is for an/a:

This claim is for costs incurred within the grant expenditure period from and does not cross fiscal years.

(Beginning Expenditure Period Date)

through

(Ending Expenditure Period Date)

(REIMB or MOD Request #)

(Amount This Request)

Under Penalty of Perjury I certify that:

I am the duly authorized officer of the claimant herein. This claim is true, correct, and all expenditures were made in accordance with applicable laws, rules, regulations and grant conditions and assurances. Statement of Certification - Authorized Agent

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Steve Monaghan, Director of Emergency Services

Printed Name and Title

Signature of Authorized Agent

August 15, 2016

Date

Please reference the Instructions Page under the "Authorized Agent" section for instructions/address on where to mail workbook

EDMUND G. BROWN JR.
GOVERNOR



Cal OES
GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

MARK S. GHILARDUCCI
DIRECTOR

October 11, 2016

Steve Monaghan
Director of Emergency Services
Nevada County
950 Maidu Avenue
Nevada City, CA 95959

SUBJECT: NOTIFICATION OF APPLICATION APPROVAL
FY 16 Emergency Management Performance Grant
Subaward #2016-0010, Cal OES ID: 057-00000

Dear Mr. Monaghan:

The California Governor's Office of Emergency Services (Cal OES) has approved your application in the amount of \$145,370. A copy of your approved Subaward is enclosed for your records.

All payment requests must be submitted on the Financial Management Forms Workbook, In addition, expenditures can only be made for items listed on your approved Subaward.

Any activities requiring an Environmental and Historic Preservation (EHP) review and approval are prohibited from expending Subaward on those activities until an EHP clearance has been obtained. Failure to adhere to this requirement will result in the deobligation of Subaward funds.

This Subaward is subject to all policies and provisions of the Single Audit Act of 1984 and the Single Audit Act Amendments of 1996. Any funds received in excess of current needs, approved amounts, or those found owed as a result of a final inspection or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal OES.

Quarterly reports must be prepared and submitted to Cal OES for the duration of the performance period or until all activities are completed and the Subaward is formally closed. Failure to submit quarterly reports could result in grant reduction, suspension or termination.

If you have any questions regarding this letter, please contact the Grants Processing Unit at (916) 845-8423.

Grants Processing Unit

Enclosure

c: EMPG Coordinator
Inland Region
Subrecipient file

3650 SCHRIEVER AVENUE • MATHER, CA 95655
CRIMINAL JUSTICE/EMERGENCY MANAGEMENT/VICTIM SERVICES GRANTS PROCESSING UNIT
(916) 845-8423 • (916) 636-3770