



December 29, 2017

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

COPY

SUBJECT: NOTIFICATION OF SUBRECIPIENT APPLICATION APPROVAL
FY 17 Emergency Management Performance Grant
Subaward #: 2017-0007, Cal OES ID: 057-00000

Dear Mr. Monaghan:

The California Governor's Office of Emergency Services (Cal OES) has approved your FY 17 Emergency Management Performance Grant application in the amount of \$145,086. You may not expend grant funds until all required documents are received and approved. Once the required documents are received and approved, you may begin to expend grant funds and request reimbursement of eligible grant expenditures using the Cal OES Financial Management Forms Workbook (FMFW).

This grant is subject to all policies and provisions set by Cal OES. Any funds received in excess of current needs, approved amounts, or those found owed as a result of a final review or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal OES.

For additional information, please contact your Cal OES Program Representative.

Homeland Security & Emergency Management Grants Processing

Enclosure

cc: Subrecipient file

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	\$27,838,209	\$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 ☒

(Cal OES Use Only)

Cal OES #

FIPS #

057-00000

VS#

00

Subaward #

2017-0007

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

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: 10014 North Bloomfield 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: Emergency Management Performance Grant 6. Performance Period: 07/01/17 to 06/30/18
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
2017	8. EMPG		\$145,086		\$145,086		\$145,086	\$290,172
Select	9. Select							
Select	10. Select							
Select	11. Select							
	12. TOTALS		\$145,086	\$145,086	\$145,086		\$145,086	12G. Total Project Cost: \$290,172

13. **Certification** - 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. **CA Public Records Act** - Grant applications are subject to the California Public Records Act, Government Code section 6250 et seq. Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

I believe there is information in the application that is exempt from the Public Records Act and have attached a document to support it.
(Initials)

15. Official Authorized to Sign for Subrecipient:

16. Federal Employer ID Number:

Name: Steve MonaghanTitle: Director of Emergency ServicesTelephone: (530) 265-1515
(area code)FAX: (530) 265-7087
(area code)Email: steve.monaghan@co.nevada.ca.usPayment Mailing Address: 950 Maidu AveCity: Nevada CityZip+ 4: 95959-8600Signature: [Signature]Date: 08/25/17

(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.

Cal OES Fiscal Officer

Date

Cal OES Director (or designee)

Date

17 LA0080

Yr. / Chapter: 2017-18/14

PCA No: 14857

Item: 0690-101-0890

Component: 40

FAIN#: EMF-2017-EP-00007

CFDA#: 97.042

Federal Award Date: 10/01/16 to 09/30/18

Fund: Federal Trust

Program: Emergency Management Performance Grant

Match Req.: 50% on TPC

Project No.: 17EMPG

Amount: \$145,086

RECEIVED
DEC 12 2017
BY: 644510

PROJECT LEDGER

Alterations to this document may result in delayed application approval, modification requests, or reimbursement requests. Subrecipients 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
2017-0007

CFDA #

EMPG 97.042

LEDGER
TYPE:

Initial Application

August 7, 2017

[illegible]

REF ID: A66087

12/19/2017 (MC)