

**FY16 Homeland Security Grant Programs
Proposal Coversheet for Riverside County Local Agencies
SHSGP CFDA# 97.067**

Applicant Name: City of Temecula

<small>(Whole dollar amounts ONLY)</small>		
SHSP Project 1 Amount Requested	\$ 16,514.00	Discipline: <u>FS</u>
SHSP Project 2 Amount Requested		Discipline: _____
SHSP Project 3 Amount Requested		Discipline: _____
 Total Funding Amount Requested	 \$ 16,514.00	

Authorized Agent Information: (Individual assigned by the agency's governing body to be held accountable for all SHSP related decisions)

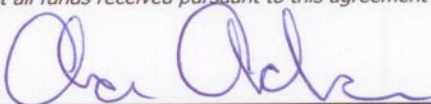
Please Print...

Name:	<u>Aaron Adams</u>
Title:	<u>Temecula City Manager</u>
Address:	<u>41000 Main Street</u>
City, State, Zip	<u>Temecula, CA 92590</u>
Phone	<u>951-694-6444</u>
Fax	_____
E-mail	<u>aaron.adams@cityoftemecula.org</u>

Statement of Certification - Authorized Agent

I hereby certify I am vested with the authority to submit this Grant Application, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body to do so. The Grant Recipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Award.

Signature: (authorized agent)



Date:

4/25/16

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Grant Manager Information: (Individual designated by the Authorized Agent to manage all grant functions)

Please Print...

Name:	<u>Matt Hayes</u>
Title:	<u>Fire Captain Paramedic</u>
Address:	<u>30650 Pauba Road</u>
City, State, Zip	<u>Temecula, CA 92592</u>
Phone	<u>951-693-0069</u>
Fax	_____
E-mail	<u>matthew.hayes@fire.ca.gov</u>

Signature: (Grant Manager)



Date:

4/21/16

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FY16 State Homeland Security Program (SHSP) Application

Agency Name:	City of Temecula
Project Name:	CERT
Amount Requested: (Whole amts only)	\$16,514
Can you accept partial funding? If so, what is the minimum you can accept?	Yes
In the event this project is eligible but not able to be funded at the beginning of cycle do you want this project to be considered for funding at a later date if additional funds become available?	Yes
How long will it take to complete this project if funded?	Purchased within 6 months of funding
Project Description please be precise and make sure to include what you are purchasing or activity you are providing	This project continues to help support Community Emergency Respons Team (CERT) throughout our county and city
Describe the need for this project (be precise):	This project helps fill the gap when public agencies become overwhelmed in times of need or when volunteer action can support city, county and state needs
How was need determined?	Through the numerous instances of natural, technological and man induced disasters that exhaust the local, state and federal resources.
Describe the terrorism-nexus of this project.	Increased public awareness through classes and educational exercises.
Is this project a multi-region project, please describe regional impact and benefit?	The education from this project is set for individuals from multiple regions and the materials provided by the project are for public safety, depending on the needs of the public.
Which Goal and Objective does this project satisfy (see last tab)?	Planning, organization, equipment, training and exercise needs to prevent, protect agents, mitigate, respond to and recover from acts of terrorism and catastrophic events

**How does this project satisfy the above
noted Goal and Objective?**

Provide supplies and equipment for the CERT team/members to fulfill the mission

