| THE BOARD OF SUPERVISORS OF THE COUL ACTION AGENDA SUMMA DEPT: CEO Office of Emergency Services | |
|---|--|
| Urgent Routine CEO Concurs with Recommendation YES NO (Information Attached) | AGENDA DATE July 1, 2014 4/5 Vote Required YES NO |
| SUBJECT: Approval to Apply for the Fiscal Year 2014 Homeland Securit | y Grant Program |

STAFF RECOMMENDATIONS:

- 1. Approve the Chief Executive Office Office of Emergency Services to apply for funds available through the Fiscal Year 2014 Homeland Security Grant Program.
- 2. Adopt the attached Governing Body Resolution authorizing participation in the 2014 Homeland Security Grant Program.
- 3. Authorize the Chairman of the Board of Supervisors to sign the Governing Body Resolution.

FISCAL IMPACT:

The Fiscal Year 2014 Homeland Security Grant is the thirteenth in a series of terrorism grants available to local government. There is no impact to the General Fund associated with this grant. The amount of funds available for Fiscal Year 2014 is \$612,439.

| BOARD ACTION AS FOLLOWS: | No. 2014-343 | | | |
|---|---|--|--|--|
| and approved by the following vote, Ayes: Supervisors: <u>O'Brien, Chiesa, W</u> | , Seconded by Supervisor _ <u>Withrow</u> | | | |
| Noes: Supervisors: <u>Non</u> | | | | |
| Excused or Absent: Supervisors: Non | | | | |
| Abstaining: Supervisor: Nor | | | | |
| 1) X Approved as recommende | d | | | |
| 2) Denied | | | | |
| 3) Approved as amended | | | | |

4)____ Other: MOTION:

ATTEST:

CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval to Apply for the Fiscal Year 2014 Homeland Security Grant Program Page 2

DISCUSSION:

The Fiscal Year 2014 (FY14) Homeland Security Grant is the thirteenth in a series of grants from the federal Department of Homeland Security and administered by the State of California. The Stanislaus Operational Area (Stanislaus County) has successfully applied for funds since Fiscal Year 2003, receiving a total of \$12,133,914. The Board of Supervisors approved the County's application and acceptance of the previous Homeland Security Grants.

At this time, the amount of funding available to Stanislaus County through the Fiscal Year 2014 Homeland Security Grant is \$612,439, a \$75,790 increase over the Fiscal Year 2013 allocation. The local application for this grant is due to the State on August 1, 2014.

The federal grant funding is intended to build, sustain and deliver core capabilities to achieve a secure and resilient nation that prepares for, responds to and recovers from complex and far-reaching hazards. The grant provides funding for equipment, planning, training, exercises and management and administration. The State of California requires that the Approval Authority Body, consisting of the County Public Health Officer, County Fire Chief, Municipal Fire Chief, County Sheriff and City Police Chief, has final approval of the application for the Homeland Security Grant. The Homeland Security Workgroup consisting of representatives from first responder agencies is currently reviewing grant parameters and making recommendations for the application. The Approval Authority Body will review and approve the application prior to its submittal to the California Office of Emergency Services. Once the application has been approved by the State, staff will bring the detailed application back to the Board of Supervisors for review and approval.

The Stanislaus Operational Area is the eligible applicant for the FY14 Homeland Security Grant. The Board is requested to authorize the Operational Area to apply for the grant and approve the Governing Body Resolution that must be submitted with the grant application. The Governing Body Resolution identifies the authorized agents to execute any actions necessary on behalf of Stanislaus County for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Security and sub-granted through the State of California. The authorized agents identified by position for Stanislaus County are: Director of Emergency Services, Stan Risen; Assistant Director of Emergency Services, Dale Skiles and Program Manager, Deborah Thrasher.

Once Stanislaus County's application is approved by the California Governor's Office of Emergency Services, an agenda item requesting approval to accept the award will be submitted to the Board of Supervisors.

POLICY ISSUES:

This grant supports the Board's priorities of A Safe Community, A Healthy Community and Effective Partnerships by ensuring local and regional disaster preparedness.

Approval to Apply for the Fiscal Year 2014 Homeland Security Grant Program Page 3

STAFFING IMPACT:

There is no staffing impact associated with this item, as existing staff will administer the grant.

CONTACT PERSON:

Dale Skiles, Assistant Director of Emergency Services, 552-3600

GOVERNING BODY RESOLUTION

| (Name of Applicant) Director of Emergency Services OR (Name or Title of Authorized Agent) OR Assistant Director of Emergency Services OR (Name or Title of Authorized Agent) OR Program Manager of Emergency Services OR (Name or Title of Authorized Agent) OR is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this1st | | DBY THE Board of | | (Governing Bod | y) | | |
|--|-------------------------|------------------------|----------------------|----------------|--------------------|---|--------|
| (Name of Applicant) Director of Emergency Services OR (Name or Title of Authorized Agent) OR Assistant Director of Emergency Services OR (Name or Title of Authorized Agent) OR Program Manager of Emergency Services OR (Name or Title of Authorized Agent) OR s hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this1st day ofJuly, 201 Certification I, | | 1 0 | | | | | |
| Director of Emergency Services OR (Name or Title of Authorized Agent) OR Assistant Director of Emergency Services OR (Name or Title of Authorized Agent) OR Program Manager of Emergency Services OR (Name or Title of Authorized Agent) OR Program Manager of Emergency Services , (Name or Title of Authorized Agent) , s hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this tay, 201 Certification (I, | OF THE <u>Stanis</u> | laus County | (Name of Appli | cant) | | | THAT |
| (Name or Title of Authorized Agent) Assistant Director of Emergency Services (Name or Title of Authorized Agent) Program Manager of Emergency Services (Name or Title of Authorized Agent) result of Authorized Agent) Program Manager of Emergency Services (Name or Title of Authorized Agent) result of Authorized Agent) (Name or Title of Authorized Agent) (Name or Title of Authorized Agent) (Name) Chairman (Title) (Name) Chairman (Title) (Name) (Governing Body) (Signature) (Signature) | | | (round or reprin | | | | |
| (Name or Title of Authorized Agent) Assistant Director of Emergency Services (Name or Title of Authorized Agent) Program Manager of Emergency Services (Name or Title of Authorized Agent) is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved thislst | Director of Eme | rgency Services | | | | | OR |
| <u>Program Manager of Emergency Services</u> (Name or Title of Authorized Agent) is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this <u>lst</u> day of <u>July</u> , 201 <u>Certification</u> I, <u>Jim De Martini</u> (Name) <u>Chairman</u> of the <u>Board of Supervisors</u> (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Stanislaus</u> on (Governing body) <u>Chairman</u> (Official Position) <u>Chairman</u> (Official Position) <u>Chairman</u> (Official Position) <u>July 1</u> , 2014 | <u>Director of Line</u> | (Nam | e or Title of Author | ized Agent) | | | |
| <u>Program Manager of Emergency Services</u> (Name or Title of Authorized Agent) is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this <u>lst</u> day of <u>July</u> , 201 <u>Certification</u> I, <u>Jim De Martini</u> (Name) <u>Chairman</u> of the <u>Board of Supervisors</u> (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Stanislaus</u> on (Governing body) <u>Chairman</u> (Official Position) <u>Chairman</u> (Official Position) <u>Chairman</u> (Signagent) <u>July 1</u> , 2014 | Assistant Direct | or of Emergency Ser | vices | | | | OR |
| (Name or Title of Authorized Agent) is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this <u>lst</u> day of <u>July</u> , 201 | | (Nam | e or Title of Author | ized Agent) | | | • |
| (Name or Title of Authorized Agent) is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Secur and sub-granted through the State of California. Passed and approved this <u>lst</u> day of <u>July</u> , 20.1 | Program Manag | er of Emergency Ser | vices | | | | • |
| I, <u>Jim De Martini</u> , duly appointed (Name) <u>Chairman</u> of the <u>Board of Supervisors</u> (Title) (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Starislaus</u> on (Governing body) <u>Ist</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) <u>Supervisors</u> (Official Position) <u>Supervisors</u> (Signature) <u>July</u> 1, 2014 | | (Nam | e or Title of Author | ized Agent) | | | • |
| Certification I, | and sub-granted th | rough the State of C | California. | | | | |
| I,, duly appointed | Passed and approv | /ed this <u>1st</u> | day o | f <u>July</u> | | <u>, , , , , , , , , , , , , , , , , , , </u> | 2014 |
| (Name) <u>Chairman</u> of the <u>Board of Supervisors</u> (Title) (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Stanislaus</u> on (Governing body) (Name of Applicant) <u>lst</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) <u>July</u> 1, 2014 | | | Certifica | tion | | | |
| <u>Chairman</u> of the <u>Board of Supervisors</u> (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Stanislaus</u> on (Governing body) <u>lst</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) (Signatur) July 1, 2014 | I, <u>Jim De Mar</u> | tini | | | , | duly appoin | nted a |
| (Tite) (Governing Body) do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Stanislaus</u> on (Governing body) (Name of Applicant) <u>lst</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) <u>July 1, 2014</u> | | | (Name) | | | | |
| do hereby certify that the above is a true and correct copy of a resolution passed and approved the <u>Board of Supervisors</u> of the <u>County of Starislaus</u> on (Governing body) of the <u>County of Starislaus</u> on (Name of Applicant) on <u>Ist</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) (Signature) July 1, 2014 | | | of the <u></u> | ard of Supe | | | |
| the <u>Board of Supervisors</u> of the <u>County of Starislaus</u> on (Governing body) (Name of Applicant) <u>lst</u> day of <u>July</u> , 2014 <u>Chairman of the Board of Supervisors</u> (Official Position) <u>Supervisors</u> <u>(Signature</u>) <u>July</u> 1, 2014 | (1) | ue) | | | (Governing Body |) | |
| (Governing body) <u>lst</u> day of <u>July</u> , 20 <u>14</u> <u>Chairman of the Board of Supervisors</u> (Official Position) <u>(Signature</u>) <u>July</u> 1, 2014 | do hereby certify | that the above is a tr | ue and correc | t copy of a re | esolution pass | ed and appr | oved l |
| (Governing body) <u>lst</u> day of <u>July</u> , 20 <u>14</u> <u>Chairman of the Board of Supervisors</u> (Official Position) <u>(Signature</u>) <u>July</u> 1, 2014 | the Board of | Supervisors | of the | County of | Stariclaw | • | on th |
| Chairman of the Board of Supervisors (Official Position) (Signature) | | | | <u></u> | (Name of Applica | ant) | • |
| Chairman of the Board of Supervisors (Official Position) (Signature) | lst | day of | July_ | | | , 20 <u>14</u> | |
| (Official Position) (Signature) (Signature) | | | | | | | |
| (Signature) July 1, 2014 | GUDD | (Offi | icial Position) | () | <u>a of Superv</u> | visors | |
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