



## COLUMBIA COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM REQUEST FORM

The Board of County Commissioners meets the 1st and 3rd Thursday of each month at 5:30 p.m. in the Columbia County School Board Administrative Complex Auditorium, 372 West Duval Street, Lake City, Florida 32055. All agenda items are due in the Board's office one week prior to the meeting date.

Today's Date: 7/8/2021 Meeting Date: 7/15/2021

Name: Shayne Morgan Department: Emergency Management

Division Manager's Signature:

A handwritten signature in blue ink, appearing to read "Shayne Morgan", is written over a light blue circular stamp.

### 1. Nature and purpose of agenda item:

To approve the State awarded EMPA grant for emergency management in the amount of \$105, 806. This is an annual grant from FEMA through the State that helps to fund the County Emergency Management program. The State award runs with the State fiscal year, July 1 to June 30, and not the County fiscal year.

### 2. Recommended Motion/Action:

Staff recommends approval of the EMPA grant for the fiscal year 2021-2022

### 3. Fiscal impact on current budget.

This item is currently budgeted. The account number to be charged is 001-0000-334-2104

**Agreement Number: A0195**

**STATE-FUNDED GRANT AGREEMENT  
EMERGENCY PREPAREDNESS AND ASSISTANCE GRANT**

As defined by 27P-19.002(1), "Base Grant" means "those funds allocated in accordance with the formula in Rule 27P-19.005, F.A.C., as a minimum allocation to County Emergency Management Agencies."

As defined by 27P-19.002(3), "County Emergency Management Agency" means "one of the sixty-seven (67) emergency management agencies authorized, established and maintained by each county pursuant to Section 252.38, F.S."

As defined by 27P-19.002(4), "Division" means "the Division of Emergency Management, Executive Office of the Governor."

As defined by 27P-19.005(1) Base Grants Shall be awarded to a county for the use and benefit of the County Emergency Management Agency.

As defined by 27P-19.005(2) Funds shall be allocated to implement and administer county emergency management programs including management and administration, training and operations. All allocations shall be subject to any pertinent Legislative appropriations.

**Recipient's name:** Columbia County

**Recipient's unique entity identifier (DUNS):** 065924409

**Award Date:** July 1, 2021

**Period of Performance Start and End Date:** July 1, 2021 – June 30, 2022

**Amount of State Funds Obligated by this Agreement:** \$105,806.00

**Florida Accountability Contract Tracking System (see FACTS):** Section 215.97, Florida Statutes of Florida Single Audit; note if the resources awarded to the recipient represent more than one State Project, provide the same information shown below for each State Project and show total. State Financial Assistance Awarded that is subject to section 215.97, Florida Statutes.  
Florida Division of Emergency Management

**Name of Awarding Agency:** Florida Division of Emergency Management

**Contact information for the Awarding Agency:** Jamika Jackson  
(850) 815-4344

**Catalog of State Financial Assistance (CSFA) Name:** Emergency Management-Trust Fund

**Catalog of State Financial Assistance (CSFA) Number:** 31.063

**Compliance Requirements Applicable to the Federal Resources Awarded Pursuant to this agreement are as Follows:** Federal Program: (1.) 2 C.F.R. 200 Uniform Administrative Requirements for Federal Grants

**Compliance Requirements Applicable to State Resources Awarded Pursuant to this agreement are as Follows:** State Program: (1.) Rule 27-P, Florida Administrative Code (2.) Section 215.97, Section 215.971, Section 252.371-373, and Florida Statutes (3.) Reference Guide for State Expenditures

**Matching Resources for Federal Programs:** Federal Program: N/A

THIS AGREEMENT is entered into by the State of Florida, Division of Emergency Management, with headquarters in Tallahassee, Florida (hereinafter referred to as the "Division"), and **Columbia County**, (hereinafter referred to as the "Recipient").

**THIS AGREEMENT IS ENTERED INTO BASED ON THE FOLLOWING REPRESENTATIONS:**

- A. The Recipient represents that it is fully qualified and eligible to receive these grant funds to provide the services identified herein; and
- B. The Division has received these grant funds from the State of Florida, and has the authority to subgrant these funds to the Recipient upon the terms and conditions below; and
- C. The Division has statutory authority to disburse the funds under this Agreement.

**THEREFORE, the Division AND Recipient agree to the following:**

(1) SCOPE OF WORK

- (a) The Recipient shall perform the work in accordance with the Scope of Work (Attachment A) and Proposed Budget Detail Worksheet (Attachment A (2)), of this Agreement.

(2) INCORPORATION OF LAWS, RULES, REGULATIONS, AND POLICIES

- (a) As required by section 215.971(1), Florida Statutes, this Agreement includes:
  - i. A provision specifying a scope of work that clearly establishes the tasks that the Recipient is required to perform.
  - ii. A provision dividing the agreement into quantifiable units of deliverables that must be received and accepted in writing by the Division before payment. Each deliverable must be directly related to the scope of work and specify the required minimum level of service to be performed and the criteria for evaluating the successful completion of each deliverable.
  - iii. A provision specifying the financial consequences that apply if the Recipient fails to perform the minimum level of service required by the agreement.
  - iv. A provision specifying that the Recipient may expend funds only for allowable costs resulting from obligations incurred during the specified agreement period.
  - v. A provision specifying that any balance of unobligated funds which has been advanced or paid must be refunded to the Division.
  - vi. A provision specifying that any funds paid in excess of the amount to which the Recipient is entitled under the terms and conditions of the agreement must be refunded to the Division.
- (b) In addition to the foregoing, the Recipient and the Division shall be governed by all applicable State and Federal laws, rules, and regulations, including those identified in the Scope of Work (Attachment A). Any express reference in this Agreement to a particular statute, rule, or regulation in no way implies that no other statute, rule, or regulation applies.

(3) PERIOD OF AGREEMENT

(a) This Agreement shall begin **July 1, 2021** upon execution by both parties and shall end on **June 30, 2022**, unless terminated earlier in accordance with the provisions of Paragraph (12)

TERMINATION. In accordance with section 215.971(1)(d), Florida Statutes, the Recipient may expend funds authorized by this Agreement “only for allowable costs resulting from obligations incurred during” the period of agreement.

(4) FUNDING CONSIDERATION

(a) This is a cost-reimbursement Agreement, subject to the availability of funds.

(b) The State of Florida's performance and obligation to pay under this Agreement is contingent upon an annual appropriation by the Legislature, and subject to any modification in accordance with either Chapter 216, Florida Statutes, or the Florida Constitution.

(c) The Division will reimburse the Recipient only for allowable costs incurred by the Recipient for the completion of each deliverable. The maximum reimbursement amount for each deliverable is outlined in the Proposed Budget Detail Worksheet (Attachment A (2)) and Scope of Work (Attachment A). The maximum reimbursement amount for the entirety of this Agreement is **\$105,806.00**.

(d) The Division will review any request for reimbursement by comparing the documentation provided by the Recipient against a performance measure, outlined in Scope of Work (Attachment A) and Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion (Attachment C) which clearly delineates:

- i. The required minimum acceptable level of service to be performed; and,
- ii. The criteria for evaluating the successful completion of each deliverable.

(e) The Division's Grant Manager, as required by section 215.971(2)(c), Florida Statutes, shall reconcile and verify all funds received against all funds expended during the period of agreement and produce a final reconciliation report. The final report must identify any funds paid in excess of the expenditures incurred by the Recipient.

(f) For the purposes of this Agreement, the term “improper payment” means or includes:

- i. Any payment that should not have been made or that was made in an incorrect amount (including overpayments and underpayments) under statutory, contractual, administrative, or other legally applicable requirements; and,
- ii. Any payment to an ineligible party, any payment for an ineligible good or service, any duplicate payment, any payment for a good or service not received (except for such payments where authorized by law), any payment that does not account for credit for applicable discounts, and any

payment where insufficient or lack of documentation prevents a reviewer from discerning whether a payment was proper.

(g) As required by the Reference Guide for State Expenditures, reimbursement for travel must be in accord with section 112.061, Florida Statutes. The Recipient must submit submission of the claim on either their local travel voucher with supporting documentation and their local travel policy, or on the approved state travel voucher.

(5) REPORTS

(a) The Recipient shall provide the Division with quarterly reports and a close-out report. These reports shall include the current status and progress by the Recipient and all Recipients and subcontractors in completing the work described in the Scope of Work (Attachment A) and the expenditure of funds under this Agreement, in addition to any other information requested by the Division.

(b) Quarterly reports are due to the Division no later than forty-five (45) days after the end of each quarter of the program year and shall be sent each quarter until submission of the administrative close-out report. The ending dates for each quarter of the program year are September 30, December 31, March 31, and June 30.

(c) The Form 5 - Close-Out Report is due sixty (60) days after termination of this Agreement or sixty (60) days after completion of the activities contained in this Agreement, whichever occurs first.

(d) If all required reports and copies are not sent to the Division or are not completed in a manner acceptable to the Division, the Division may withhold further payments until they are completed or may take other action as stated in Paragraph (11) REMEDIES. "Acceptable to the Division" means that the work product was completed in accordance with the Proposed Budget Detail Worksheet (Attachment A (2)) and Scope of Work (Attachment A).

(e) The Recipient shall provide additional program updates or information that may be required by the Division.

(f) The Recipient shall provide additional reports and information identified in the Quarterly Reports (Attachment A (3)).

(6) MONITORING

(a) Recipient is responsible for and shall monitor its performance under this Agreement. Recipient shall monitor the performance of its contractors, consultants, agents, and who are paid from funds provided under this Agreement or acting in furtherance of this Agreement.

(b) In addition to reviews of audits conducted in accordance with Exhibit 1 – Audit Requirements, monitoring procedures may include, but not limited to, desk reviews and on-site visits by Division staff, limited scope audits, and other procedures.

(7) SUBCONTRACTS

If the Recipient subcontracts any of the work required under this Agreement, a copy of the unsigned subcontract must be forwarded to the Division for review and approval before it is executed by the Recipient. The Recipient agrees to include in the subcontract that (i) the subcontractor is bound by the terms of this Agreement, (ii) the subcontractor is bound by all applicable state and federal laws and regulations, and (iii) the subcontractor shall hold the Division and Recipient harmless against all claims of whatever nature arising out of the subcontractor's performance of work under this Agreement, to the extent allowed and required by law. The Recipient shall document in the quarterly report the subcontractor's progress in performing its work under this Agreement.

For each subcontract, the Recipient shall provide a written statement to the Division as to whether that subcontractor is a minority business enterprise, as defined in section 288.703, Florida Statutes.

(8) AUDITS

(a) In accounting for the receipt and expenditure of funds under this Agreement, the Recipient shall follow Generally Accepted Accounting Principles ("GAAP"). As defined by 2 C.F.R. §200.49, GAAP "has the meaning specified in accounting standards issued by the Government Accounting Standards Board (GASB) and the Financial Accounting Standards Board (FASB)."

(b) When conducting an audit of the Recipient's performance under this Agreement, the Division shall use Generally Accepted Government Auditing Standards ("GAGAS"). As defined by 2 C.F.R. §200.50, GAGAS, "also known as the Yellow Book, means generally accepted government auditing standards issued by the Comptroller General of the United States, which are applicable to financial audits."

(c) If an audit shows that all or any portion of the funds disbursed were not spent in accordance with the conditions of this Agreement, the Recipient shall be held liable for reimbursement to the Division of all funds not spent in accordance with these applicable regulations and Agreement provisions within thirty (30) days after the Division has notified the Recipient of such non-compliance.

(d) The Recipient shall have all audits completed by an independent auditor, which is defined in section 215.97(2)(i), Florida Statutes, as "an independent certified public accountant licensed under chapter 473." The independent auditor shall state that the audit complied with the applicable provisions noted above. The audits must be received by the Division no later than nine months from the end of the Recipient's fiscal year.

(e) The Recipient shall send copies of reporting packages required under this paragraph directly to each of the following:

The Division of Emergency Management

[DEMSingle\\_Audit@em.myflorida.com](mailto:DEMSingle_Audit@em.myflorida.com)

DEMSingle\_Audit@em.myflorida.com

OR

Office of the Inspector General  
2555 Shumard Oak Boulevard  
Tallahassee, Florida 32399-2100

The Auditor General  
Room 401, Claude Pepper Building  
111 West Madison Street  
Tallahassee, Florida 32399-1450

(9) LIABILITY

(a) Unless Recipient is a state agency or subdivision, as defined in section 768.28, Florida Statutes, the Recipient is solely responsible to parties it deals with in carrying out the terms of this Agreement and shall hold the Division harmless against all claims of whatever nature by third parties arising from the work performed under this Agreement. For purposes of this Agreement, Recipient agrees that it is not an employee or agent of the Division but is an independent contractor.

(b) As required by section 768.28(19), Florida Statutes, any Recipient which is a state agency or subdivision, as defined in section 768.28(2), Florida Statutes, agrees to be fully responsible for its negligent or tortious acts or omissions which result in claims or suits against the Division, and agrees to be liable for any damages proximately caused by the acts or omissions to the extent set forth in section 768.28, Florida Statutes. Nothing herein is intended to serve as a waiver of sovereign immunity by any Recipient to which sovereign immunity applies. Nothing herein shall be construed as consent by a state agency or subdivision of the State of Florida to be sued by third parties in any matter arising out of any contract.

(10) DEFAULT

If any of the following events occur ("Events of Default"), all obligations on the part of the Division to make further payment of funds shall, if the Division elects, terminate and the Division has the option to exercise any of its remedies set forth in Paragraph (11) REMEDIES; however, the Division may make payments or partial payments after any Events of Default without waiving the right to exercise such remedies, and without becoming liable to make any further payment:

(a) If any warranty or representation made by the Recipient in this Agreement or any previous agreement with the Division is or becomes false or misleading in any respect, or if the Recipient fails to keep or perform any of the obligations, terms or covenants in this Agreement or any previous agreement with the Division and has not cured them in timely fashion, or is unable or unwilling to meet its obligations under this Agreement;

(b) If material adverse changes occur in the financial condition of the Recipient at any time during the period of agreement, and the Recipient fails to cure this adverse change within thirty (30) days from the date written notice is sent by the Division.

(c) If any reports required by this Agreement have not been submitted to the Division or have been submitted with incorrect, incomplete, or insufficient information;

(d) If the Recipient has failed to perform and complete on time any of its obligations under this Agreement.

(11) REMEDIES

If an Event of Default occurs, then the Division shall, after thirty (30) calendar days, provide written notice to the Recipient and upon the Recipient's failure to cure within those thirty (30) days, exercise any one or more of the following remedies, either concurrently or consecutively:

(a) Terminate this Agreement, provided that the Recipient is given at least thirty (30) days prior written notice of the termination. The notice shall be effective when placed in the United States, first class mail, postage prepaid, by registered or certified mail-return receipt requested, to the address in Paragraph (3) herein;

(b) Begin an appropriate legal or equitable action to enforce performance of this Agreement;

(c) Withhold or suspend payment of all or any part of a request for payment;

(d) Require that the Recipient refund to the Division any monies used for ineligible purposes under the laws, rules and regulations governing the use of these funds;

(e) Exercise any corrective or remedial actions, to include but not be limited to:

i. Request additional information from the Recipient to determine the reasons for or the extent of non-compliance or lack of performance;

ii. Issue a written warning to advise that more serious measures may be taken if the situation is not corrected;

iii. Advise the Recipient to suspend, discontinue or refrain from incurring costs for any activities in question or;

iv. Require the Recipient to reimburse the Division for costs incurred for any items determined to be ineligible;

(f) Exercise any other rights or remedies which may be available under law.

Pursuing any of the above remedies will not stop the Division from pursuing any other remedies in this Agreement or provided at law or in equity. If the Division waives any right or remedy in this Agreement or fails to insist on strict performance by the Recipient, it will not affect, extend or waive any other right or



remedy of the Division, or affect the later exercise of the same right or remedy by the Division for any other default by the Recipient .

(12) TERMINATION

(a) The Division may terminate this Agreement for cause after thirty (30) days written notice. Cause can include misuse of funds, fraud, lack of compliance with applicable rules, laws and regulations, failure to perform on time, and refusal by the Recipient to permit public access to any document, paper, letter, or other material subject to disclosure under Chapter 119, Florida Statutes., as amended.

(b) The Division may terminate this Agreement for convenience or when it determines, in its sole discretion, that continuing the Agreement would not produce beneficial results in line with the further expenditure of funds, by providing the Recipient with thirty (30) calendar days prior written notice.

(c) The parties may agree to terminate this Agreement for their mutual convenience through a written amendment of this Agreement. The amendment will state the effective date of the termination and the procedures for proper closeout of this Agreement.

(d) In the event this Agreement is terminated, the Recipient will not incur new obligations for the terminated portion of this Agreement after the Recipient has received the notification of termination. The Recipient will cancel as many outstanding obligations as possible. Costs incurred after receipt of the termination notice will be disallowed. The Recipient shall not be relieved of liability to the Division because of any breach of this Agreement by the Recipient. The Division may, to the extent authorized by law, withhold payments to the Recipient for the purpose of set-off until the exact amount of damages due the Division from the Recipient is determined.

(13) PROCUREMENT

(a) The Recipient shall ensure that any procurement involving funds authorized by the Agreement complies with all applicable federal and state laws and regulations, to include 2 C.F.R. §§200.318 through 200.327 as well as Appendix II to 2 C.F.R. Part 200 (entitled "Contract Provisions for Non-Federal Entity Contracts Under Federal Awards").

(b) As required by 2 C.F.R. §200.318(i), the Recipient shall "maintain records sufficient to detail the history of procurement. These records will include but are not necessarily limited to the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price."

(c) As required by 2 C.F.R. §200.318(b), the Recipient shall "maintain oversight to ensure that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders." In order to demonstrate compliance with this requirement, the Recipient shall document, in its quarterly report to the Division, the progress of any and all subcontractors performing work under this Agreement.

(d) Except for procurements by micro-purchases pursuant to 2 C.F.R. §200.320(a)(1) or procurements by small purchase procedures pursuant to 2 C.F.R. §200.320(a)(2), if the Recipient chooses to subcontract any of the work required under this Agreement, then the Recipient shall forward to the Division a copy of any solicitation (whether competitive or non-competitive) at least fifteen (15) days prior to the publication or communication of the solicitation. The Division shall review the solicitation and provide comments, if any, to the Recipient within seven (7) business days. Consistent with 2 C.F.R. §200.325, the Division will review the solicitation for compliance with the procurement standards outlined in 2 C.F.R. §§200.318 through 200.327 as well as Appendix II to 2 C.F.R. Part 200. Consistent with 2 C.F.R. §200.318(k), the Division will not substitute its judgment for that of the Recipient. While the Recipient does not need the approval of the Division in order to publish a competitive solicitation, this review may allow the Division to identify deficiencies in the vendor requirements or in the commodity or service specifications. The Division's review and comments shall not constitute an approval of the solicitation. Regardless of the Division's review, the Recipient remains bound by all applicable laws, regulations, and agreement terms. If during its review the Division identifies any deficiencies, then the Division shall communicate those deficiencies to the Recipient as quickly as possible within the seven (7) business day window outlined above. If the Recipient publishes a competitive solicitation after receiving comments from the Division that the solicitation is deficient, then the Division may:

- i. Terminate this Agreement in accordance with the provisions outlined in paragraph (12) above; and,
- ii. Refuse to reimburse the Recipient for any costs associated with that solicitation.

(e) Except for procurements by micro-purchases pursuant to 2 C.F.R. §200.320(a)(1) or procurements by small purchase procedures pursuant to 2 C.F.R. §200.320(a)(2), if the Recipient chooses to subcontract any of the work required under this Agreement, then the Recipient shall forward to the Division a copy of any contemplated contract prior to contract execution. The Division shall review the unexecuted contract and provide comments, if any, to the Recipient within seven (7) business days. Consistent with 2 C.F.R. §200.325, the Division will review the unexecuted contract for compliance with the procurement standards outlined in 2 C.F.R. §§200.318 through 200.327 as well as Appendix II to 2 C.F.R. Part 200. Consistent with 2 C.F.R. §200.318(k), the Division will not substitute its judgment for that of the Recipient. While the Recipient does not need the approval of the Division in order to execute a subcontract, this review may allow the Division to identify deficiencies in the terms and conditions of the subcontract as well as deficiencies in the procurement process that led to the subcontract. The Division's review and comments shall not constitute an approval of the subcontract. Regardless of the Division's review, the Recipient remains bound by all applicable laws, regulations, and agreement terms. If during its review the Division identifies any deficiencies, then the Division shall communicate those deficiencies to the Recipient as quickly as possible within the seven (7) business day window outlined above. If the

Recipient executes a subcontract after receiving a communication from the Division that the subcontract is non-compliant, then the Division may:

- i. Terminate this Agreement in accordance with the provisions outlined in Paragraph (12) above; and,
- ii. Refuse to reimburse the Recipient for any costs associated with that subcontract.

(f) The Recipient agrees to include in the subcontract that (i) the subcontractor is bound by the terms of this Agreement, (ii) the subcontractor is bound by all applicable state and federal laws and regulations, and (iii) the subcontractor shall hold the Division and Recipient harmless against all claims of whatever nature arising out of the subcontractor's performance of work under this Agreement, to the extent allowed and required by law.

(g) As required by 2 C.F.R. §200.318(c)(1), the Recipient shall “maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts.”

(h) As required by 2 C.F.R. §200.319, the Recipient shall conduct any procurement under this agreement “in a manner providing full and open competition.” Accordingly, the Recipient shall not:

- i. Place unreasonable requirements on firms in order for them to qualify to do business;
- ii. Require unnecessary experience or excessive bonding;
- iii. Use noncompetitive pricing practices between firms or between affiliated companies;
- iv. Execute noncompetitive contracts to consultants that are on retainer contracts;
- v. Authorize, condone, or ignore organizational conflicts of interest;
- vi. Specify only a brand name product without allowing vendors to offer an equivalent;
- vii. Specify a brand name product instead of describing the performance, specifications, or other relevant requirements that pertain to the commodity or service solicited by the procurement;
- viii. Engage in any arbitrary action during the procurement process;

or,

ix. Allow a vendor to bid on a contract if that bidder was involved with developing or drafting the specifications, requirements, statement of work, invitation to bid, or request for proposals.

(i) Except in those cases where applicable Federal statutes expressly mandate or encourage otherwise, the Recipient, as required by 2 C.F.R. §200.319(c), shall not use a geographic preference when procuring commodities or services under this Agreement.

(j) The Recipient shall conduct any procurement involving invitations to bid (i.e. sealed bids) in accordance with 2 C.F.R. §200.320(b)(1) as well as section 287.057(1)(a), Florida Statutes.

(k) The Recipient shall conduct any procurement involving requests for proposals (i.e. competitive proposals) in accordance with 2 C.F.R. §200.320(b)(2) as well as section 287.057(1)(b), Florida Statutes.

(l) FEMA has developed helpful resources for Sub-Recipients when procuring with federal grant funds because Sub-Recipients must comply with the Federal procurement standards outlined in 2 C.F.R. §§200.318 through 200.327 as well as Appendix II to 2 C.F.R. Part 200. These resources are generally *available at* <https://www.fema.gov/procurement-disaster-assistance-team>. FEMA periodically updates this resource page so please check back for the latest information. While not all the provisions discussed in the resources are applicable to this subgrant agreement, the Sub-Recipient may find these resources helpful when drafting its solicitation and contract for compliance with the Federal procurement standards outlined in 2 C.F.R. §§200.318 through 200.327 as well as Appendix II to 2 C.F.R. Part 200. FEMA provides the following hands-on resources for Recipients of federal funding:

i. 2018 PDAT Procurement Compliance Checklist for Public Assistance Applicants *available at* [https://www.fema.gov/media-library-data/1569959172327-92358d63e00d17639d5db4de015184c9/PDAT\\_ProcurementChecklist\\_11-21-2018.pdf](https://www.fema.gov/media-library-data/1569959172327-92358d63e00d17639d5db4de015184c9/PDAT_ProcurementChecklist_11-21-2018.pdf)

ii. 2019 PDAT Contract Provisions Template *available at* [https://www.fema.gov/media-library-data/1569959119092-92358d63e00d17639d5db4de015184c9/PDAT\\_ContractProvisionsTemplate\\_9-30-19.pdf](https://www.fema.gov/media-library-data/1569959119092-92358d63e00d17639d5db4de015184c9/PDAT_ContractProvisionsTemplate_9-30-19.pdf)

#### (14) ATTACHMENTS AND EXHIBITS

(a) All attachments to this Agreement are incorporated as if set out fully.

(b) In the event of any inconsistencies or conflict between the language of this Agreement and the attachments, the language of the attachments shall control, but only to the extent of the conflict or inconsistency.

(c) This Agreement has the following attachments:

Exhibit 1 – Audit Requirements

Exhibit 2 – Single Audits

Exhibit 3 – 27P-19 Administrative Code – EM Director or Part-Time Coordinator Certification

Attachment A – Scope of Work

Attachment A (1) – Allowable Costs and Eligible Activities – Budget Directions

Attachment A (2) – Proposed Program Budget Detail Worksheet

Attachment A (3) – Quarterly Reports

Attachment B – Justification of Advance Payment

Attachment C – Certification Regarding Debarment, Suspension, Ineligibility and Voluntary  
Exclusion

Attachment D – Warranties and Representations

Attachment E – Statement of Assurances

Attachment F – Statewide Mutual Aid Agreement Instructions

Attachment F (1) – Statewide Mutual Aid Agreement List

Attachment G – Response Capabilities

Attachment H – Hurricane Retrofit Shelter

Attachment I – Recovery Capabilities

Attachment J – Reporting Forms

(15) NOTICE OF CONTACT

(a) All notices provided by Recipient under or pursuant to this Agreement shall be in writing to Division's Grant Manager and delivered by standard or electronic mail using the correct information provided in Subparagraph 15(b) below.

(b) The name and address of Division's Grant Manager for this Agreement is:

| <b>Contractual Point of Contact</b>   |
|---|
| Jamika Jackson<br>Division<br>2555 Shumard Oak Blvd. Suite 330G<br>Tallahassee, FL 32399-2100<br>(850) 815-4344<br><a href="mailto:Jamika.jackson@em.myflorida.com">Jamika.jackson@em.myflorida.com</a> |

- (c) The name and address of Division's Programmatic Reviewer for this Agreement is:

| <b>Programmatic Point of Contact</b>  |
|---|
| Karla Brown<br>Division<br>2555 Shumard Oak Blvd.<br>Tallahassee, FL 32399-2100<br>(850) 815-4357<br><a href="mailto:Naytoyla.brown@em.myflorida.com">Naytoyla.brown@em.myflorida.com</a> |

- (d) The name and address of Representative of the Recipient responsible for the administration of this Agreement is:

|   |
|---|
| Name: Shayne Morgan   |
| Title: Director   |
| Address: 263 NW Lake City Avenue Lake City, FL 32056  |
| Phone: 386-758-1383   |
| Email: <a href="mailto:Shayne_morgan@columbiacountyfla.com">Shayne_morgan@columbiacountyfla.com</a> |

(16) PAYMENTS

(a) Any advance payment under this Agreement is subject to section 216.181(16), Florida Statutes. All advances are required to be held in an interest-bearing account. If an advance payment is requested, the budget data on which the request is based, and a justification statement shall be included in this Agreement as Justification of Advance Payment as Attachment B. Justification of Advance Payment (Attachment B) will specify the amount of advance payment needed and provide an explanation of the necessity for and proposed use of these funds. No advance shall be accepted for processing if a reimbursement has been paid prior to the submittal of a request for advanced payment. After the initial advance, if any, payment shall be made on a reimbursement basis as needed.

(b) Invoices shall be submitted at least quarterly and shall include the supporting documentation for all costs of the project or services. The final invoice shall be submitted within forty-five (45) days after the expiration date of the agreement. An explanation of any circumstances prohibiting the submittal of quarterly invoices shall be submitted to the Division Grant Manager as part of the Recipient's quarterly reporting as referenced in Paragraph (5) REPORTS of this Agreement.

(c) If the necessary funds are not available to fund this Agreement as a result of action by the United States Congress, the federal Office of Management and Budgeting, the State Chief Financial Officer or under Paragraph (4) FUNDING CONSIDERATION of this Agreement, all obligations on the part

of the Division to make any further payment of funds shall terminate, and the Recipient shall submit its closeout report within thirty (30) days of receiving notice from the Division.

(17) REPAYMENTS

(a) All refunds or repayments due to the Division under this Agreement are to be made payable to the order of "Division of Emergency Management," and mailed directly to the following address:

Division of Emergency Management  
Cashier  
2555 Shumard Oak Boulevard  
Tallahassee FL 32399-2100

(b) In accordance with section 215.34(2), Florida Statutes, if a check or other draft is returned to the Division for collection, Recipient shall pay the Division a service fee of \$15.00 or 5% of the face amount of the returned check or draft, whichever is greater.

(18) MANDATED CONDITIONS AND OTHER LAWS

(a) The validity of this Agreement is subject to the truth and accuracy of all the information, representations, and materials submitted or provided by the Recipient in this Agreement, in any later submission or response to a Division request, or in any submission or response to fulfill the requirements of this Agreement. All of said information, representations, and materials are incorporated by reference. The inaccuracy of the submissions or any material changes shall, at the option of the Division and with (thirty) 30 days written notice to the Recipient, cause the termination of this Agreement and the release of the Division from all its obligations to the Recipient.

(b) This Agreement shall be construed under the laws of the State of Florida, and venue for any actions arising out of this Agreement shall be in the Circuit Court of Leon County. If any provision of this Agreement is in conflict with any applicable statute or rule, or is unenforceable, then the provision shall be null and void to the extent of the conflict, and shall be severable, but shall not invalidate any other provision of this Agreement.

(c) Any power of approval or disapproval granted to the Division under the terms of this Agreement shall survive the term of this Agreement.

(d) The Recipient agrees to comply with the Americans With Disabilities Act (Public Law 101-336, 42 U.S.C. Section 12101 et seq.), which prohibits discrimination by public and private entities on the basis of disability in employment, public accommodations, transportation, State and local government services, and telecommunications.

(e) Those who have been placed on the convicted vendor list following a conviction for a public entity crime or on the discriminatory vendor list may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or

consultant under a contract with a public entity, and may not transact business with any public entity in excess of \$25,000.00 for a period of thirty-six (36) months from the date of being placed on the convicted vendor list or on the discriminatory vendor list.

(f) Any Recipient which is not a local government or state agency, and which receives funds under this Agreement from the federal government, certifies, to the best of its knowledge and belief, that it and its principals:

- i. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a federal department or agency;
- ii. Have not, within a five-year period preceding this proposal been convicted of or had a civil judgment rendered against them for fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- iii. Are not presently indicted or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any offenses enumerated in Paragraph (18)(f)(ii) of this certification; and
- iv. Have not within a five-year period preceding this Agreement had one or more public transactions (federal, state, or local) terminated for cause or default.

(g) If the Recipient is unable to certify to any of the statements in this certification, then the Recipient shall attach an explanation to this Agreement.

(h) In addition, the Recipient shall send to the Division (by email or by facsimile transmission) the completed "Certification Regarding Debarment, Suspension, Ineligibility And Voluntary Exclusion" (Attachment C) for each intended subcontractor which Recipient plans to fund under this Agreement. The form must be received by the Division before the Recipient enters into a contract with any subcontractor.

(i) The Division reserves the right to unilaterally cancel this Agreement if the Recipient refuses to allow public access to all documents, papers, letters or other material subject to the provisions of Chapter 119, Florida Statutes, which the Recipient created or received under this Agreement.

(j) If the Recipient is allowed to temporarily invest any advances of funds under this Agreement, any interest income shall either be returned to the Division or be applied against the Division's obligation to pay the contract amount.

(k) The State of Florida will not intentionally award publicly-funded contracts to any contractor who knowingly employs unauthorized alien workers, constituting a violation of the employment provisions contained in 8 U.S.C. Section 1324(a) [Section 274A(e) of the Immigration and Nationality Act ("INA")]. The Division shall consider the employment by any contractor of unauthorized aliens a violation



of Section 274A(e) of the INA. Such violation by the Recipient of the employment provisions contained in Section 274A(e) of the INA shall be grounds for unilateral cancellation of this Agreement by the Division.

(l) Section 287.05805, Florida Statutes, requires that any state funds provided for the purchase of or improvements to real property are contingent upon the contractor or political division granting to the state a security interest in the property at least to the amount of state funds provided for at least 5 years from the date of purchase or the completion of the improvements or as further required by law.

(m) The Division may, at its option, terminate the Contract if the Contractor is found to have submitted a false certification as provided under section 287.135(5), Florida Statutes, or been placed on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or been engaged in business operations in Cuba or Syria, or to have been placed on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel.

(19) FEDERAL REQUIREMENTS PERTAINING TO LOBBYING

(a) Section 216.347, Florida Statutes, prohibits “any disbursement of grants and aids appropriations pursuant to a contract or grant to any person or organization unless the terms of the grant or contract prohibit the expenditure of funds for the purpose of lobbying the Legislature, the judicial branch, or a state agency.”

(b) No funds or other resources received from the Division under this Agreement may be used directly or indirectly to influence legislation or any other official action by the Florida Legislature or any state agency.

(20) COPYRIGHT, PATENT AND TRADEMARK

**EXCEPT AS PROVIDED BELOW, ANY AND ALL PATENT RIGHTS ACCRUING UNDER OR IN CONNECTION WITH THE PERFORMANCE OF THIS AGREEMENT ARE HEREBY RESERVED TO THE STATE OF FLORIDA. ANY AND ALL COPYRIGHTS ACCRUING UNDER OR IN CONNECTION WITH THE PERFORMANCE OF THIS AGREEMENT ARE HEREBY TRANSFERRED BY THE RECIPIENT TO THE STATE OF FLORIDA.**

(a) If the Recipient has a pre-existing patent or copyright, the Recipient shall retain all rights and entitlements to that pre-existing patent or copyright unless this Agreement provides otherwise.

(b) If any discovery or invention is developed in the course of or as a result of work or services performed under this Agreement, or in any way connected with it, the Recipient shall refer the discovery or invention to the Division for a determination whether the State of Florida will seek patent protection in its name. Any patent rights accruing under or in connection with the performance of this Agreement are reserved to the State of Florida. If any books, manuals, films, or other copyrightable

material are produced, the Recipient shall notify the Division. Any copyrights accruing under or in connection with the performance under this Agreement are transferred by the Recipient to the State of Florida.

(c) Within thirty (30) days of execution of this Agreement, the Recipient shall disclose all intellectual properties relating to the performance of this Agreement that he or she knows or should know could give rise to a patent or copyright. The Recipient shall retain all rights and entitlements to any pre-existing intellectual property that is disclosed. Failure to disclose will indicate that no such property exists. The Division shall then, under Paragraph (b), have the right to all patents and copyrights that accrue during performance of this Agreement.

(d) If the Recipient qualifies as a state university under Florida law, then, pursuant to section 1004.23, Florida Statutes, any invention conceived exclusively by the employees of the Recipient shall become the sole property of the Recipient. In the case of joint inventions, that is inventions made jointly by one or more employees of both parties hereto, each party shall have an equal, undivided interest in and to such joint inventions. The Division shall retain a perpetual, irrevocable, fully-paid, nonexclusive license, for its use and the use of its contractors of any resulting patented, copyrighted or trademarked work products, developed solely by the Recipient, under this Agreement, for Florida government purposes.

(21) LEGAL AUTHORIZATION.

(a) The Recipient certifies that it has the legal authority to receive the funds under this Agreement and that its governing body has authorized the execution and acceptance of this Agreement. The Recipient also certifies that the undersigned person has the authority to legally execute and bind Recipient to the terms of this Agreement.

(22) STATEMENT AND ASSURANCES

(a) The Recipient shall comply with any Statement of Assurances incorporated as Attachment E.

(23) RECORDS

(a) As a condition of receiving state financial assistance, and as required by sections 20.055(6)(c) and 215.97(5)(b), Florida Statutes, the Division, the Chief Inspector General of the State of Florida, the Florida Auditor General, or any of their authorized representatives, shall enjoy the right of access to any documents, financial statements, papers, or other records of the Recipient which are pertinent to this Agreement, in order to make audits, examinations, excerpts, and transcripts. The right of access also includes timely and reasonable access to the Recipient's personnel for the purpose of interview and discussion related to such documents. For the purposes of this section, the term "Recipient"

includes employees or agents, including all subcontractors or consultants to be paid from funds provided under this Agreement.

(b) The Recipient shall maintain all records related to this Agreement for the period of time specified in the appropriate retention schedule published by the Florida Department of State. Information regarding retention schedules can be obtained at: <http://dos.myflorida.com/library-archives/records-management/general-records-schedules/>.

(c) Florida's Government in the Sunshine Law (section 286.011, Florida Statutes) provides the citizens of Florida with a right of access to governmental proceedings and mandates three, basic requirements: (1) all meetings of public boards or commissions must be open to the public; (2) reasonable notice of such meetings must be given; and, (3) minutes of the meetings must be taken and promptly recorded. The mere receipt of public funds by a private entity, standing alone, is insufficient to bring that entity within the ambit of the open government requirements. However, the Government in the Sunshine Law applies to private entities that provide services to governmental agencies and that act on behalf of those agencies in the agencies' performance of their public duties. If a public agency delegates the performance of its public purpose to a private entity, then, to the extent that private entity is performing that public purpose, the Government in the Sunshine Law applies. For example, if a volunteer fire department provides firefighting services to a governmental entity and uses facilities and equipment purchased with public funds, then the Government in the Sunshine Law applies to board of directors for that volunteer fire department. Thus, to the extent that the Government in the Sunshine Law applies to the Recipient based upon the funds provided under this Agreement, the meetings of the Recipient's governing board or the meetings of any subcommittee making recommendations to the governing board may be subject to open government requirements. These meetings shall be publicly noticed, open to the public, and the minutes of all the meetings shall be public records, available to the public in accordance with Chapter 119, Florida Statutes.

(d) Florida's Public Records Law provides a right of access to the records of the state and local governments as well as to private entities acting on their behalf. Unless specifically exempted from disclosure by the Legislature, all materials made or received by a governmental agency (or a private entity acting on behalf of such an agency) in conjunction with official business which are used to perpetuate, communicate, or formalize knowledge qualify as public records subject to public inspection. The mere receipt of public funds by a private entity, standing alone, is insufficient to bring that entity within the ambit of the public record requirements. However, when a public entity delegates a public function to a private entity, the records generated by the private entity's performance of that duty become public records. Thus, the nature and scope of the services provided by a private entity determine whether that entity is acting on behalf of a public agency and is therefore subject to the requirements of Florida's Public Records Law.

(e) The Recipient shall maintain all records for the Recipient and for all subcontractors or consultants to be paid from funds provided under this Agreement, including documentation of all program

costs, in a form sufficient to determine compliance with the requirements and objectives of the Attachment A(2) – Proposed Budget Detail Worksheet and Scope of Work (Attachment A) - and all other applicable laws and regulations.

**IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR’S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT: (850) 815-4156, [Records@em.myflorida.com](mailto:Records@em.myflorida.com), or 2555 Shumard Oak Boulevard, Tallahassee, FL 32399.**

(24) TERMS AND CONDITION

(a) This Agreement contains all the terms and conditions agreed upon by the parties.

(25) EXECUTION

(a) This Agreement may be executed in any number of counterparts, any one of which may be taken as an original.

(26) MODIFICATION

(a) Either Party may request modification of the provisions of this agreement. Modifications of provisions of this Agreement are valid only when reduced to writing and duly signed by the Parties.

(27) CONSTRUCTION and RENOVATION

Construction and renovation projects for a local government’s principal Emergency Operations Center (EOC), are allowable under the EMPA Program. The Division must provide written approval prior to the use of any EMPA Program funds for construction or renovation. Requests for EMPA Program funds for construction of an EOC must be accompanied by a justification to their EMPA Grant Manager for review and processing. The above examples are not intended to exclude other construction projects as potentially allowable costs. For example, construction of a facility for the storage of critical emergency supplies, as a Point of Distribution (POD) for emergency distribution, and/or to serve as a staging area for deployment of emergency response resources is potentially an allowable expense. Other construction or renovation projects, such as a secondary or local EOC, will be considered on a case-by-case basis, with advance written approval.

(28) REAL PROPERTY

**Section 287.05805, Florida Statutes, Contract requirement for use of state funds to purchase or improve real property.**—Each state agency shall include in its standard contract document a requirement that any state funds provided for the purchase of or improvements to real property are contingent upon the contractor or political subdivision granting to the state a security interest in the property at least to the amount of state funds provided for at least 5 years from the date of purchase or the completion of the improvements or as further required by law.

(29) CONTRACTING WITH SMALL AND MINORITY BUSINESSES, WOMEN'S BUSINESS ENTERPRISES, AND LABOR SURPLUS AREA FIRMS

(a) If the Sub-Recipient, with the funds authorized by this Agreement, seeks to procure goods or services, then, in accordance with 2 C.F.R. §200.321, the Sub-Recipient shall take the following affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used whenever possible:

- i. Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
- ii. Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
- iii. Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- iv. Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises;
- v. Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce; and
- vi. Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (i). through v. of this subparagraph.

(b) The requirement outlined in subparagraph a. above, sometimes referred to as "socioeconomic contracting," does not impose an obligation to set aside either the solicitation or award of a contract to these types of firms. Rather, the requirement only imposes an obligation to carry out and document the six affirmative steps identified above.

(c) The “socioeconomic contracting” requirement outlines the affirmative steps that the Sub-Recipient must take; the requirements do not preclude the Sub-Recipient from undertaking additional steps to involve small and minority businesses and women's business enterprises.

(d) The requirement to divide total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises, does not authorize the Sub-Recipient to break a single project down into smaller components in order to circumvent the micro-purchase or small purchase thresholds so as to utilize streamlined acquisition procedures (e.g. “project splitting”).

**STATE OF FLORIDA**  
**FLORIDA DIVISION OF EMERGENCY MANAGEMENT**  
**STATE - FUNDED SUBAWARD AND GRANT AGREEMENT**  
**SIGNATURE PAGE**

IN WITNESS WHEREOF, the Parties have duly executed and delivered this Agreement as of the date set forth below.

**RECIPIENT: COLUMBIA COUNTY**

By: \_\_\_\_\_

Rocky Ford, Chairman, Columbia County Board of County Commissioners  
(Name and Title)

Date: July 17, 2021

59-6000564  
Federal Identification Number

065924409  
DUNS Number

A0195  
Agreement Number

**STATE OF FLORIDA**  
**DIVISION OF EMERGENCY MANAGEMENT**

By: \_\_\_\_\_

\_\_\_\_\_  
(Kevin Guthrie, Division Director)

Date: \_\_\_\_\_

**FY 2021 – 2022 EMPA AGREEMENT  
EXHIBIT 1 – AUDIT REQUIREMENTS**

The administration of resources awarded by the Division to the Recipient may be subject to audits and/or monitoring by Division as described in this section.

**MONITORING**

Monitoring visits are performed to confirm grant requirements are being fulfilled to ensure correct and accurate documentation is being generated and to assist with any questions or concerns Recipients may have related to the grant. Recipients will be monitored programmatically and financially by the Division to ensure that all grant activities and project goals, objectives, performance requirements, timelines, milestone completion, budgets, and other related program criteria are being met.

On-site monitoring visits will be performed according to Division schedules, as requested, or as needed. At minimum, Recipients will receive monitoring from Division per year. If an on-site visit cannot be arranged, the Recipient may be asked to perform desk review monitoring. Additional monitoring visits may be conducted throughout the period of performance as part of corrective action when Recipients are demonstrating non-compliance.

(a) The Recipient shall monitor its performance under this Agreement, as well as that of its subcontractors and/or consultants who are paid from funds provided under this Agreement, to ensure that time schedules are being met, the Schedule of Deliverables and Scope of Work are being accomplished within the specified time periods, and other performance goals are being achieved. A review shall be done for each function or activity in the Proposed Budget Detail Worksheet (Attachment A(2)) and Scope of Work (Attachment A) to this Agreement and reported in Quarterly Reports (Attachment A(3)).

(b) In addition to reviews of audits, monitoring procedures may include, but not be limited to, on-site visits by Division staff, limited scope audits, and/or other procedures. The Recipient agrees to comply and cooperate with any monitoring procedures/processes deemed appropriate by the Division. If the Division determines that a limited scope audit of the Recipient is appropriate, the Recipient agrees to comply with any additional instructions provided by the Division to the Recipient regarding such audit. The Recipient further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the Florida Chief Financial Officer or Auditor General. In addition, the Division will monitor the performance and financial management by the Recipient throughout the contract term to ensure timely completion of all tasks.



## **AUDITS**

The Recipient shall comply with the audit requirements contained in 2 C.F.R. Part 200, Subpart F. In accounting for the receipt and expenditure of funds under this Agreement, the Recipient shall follow Generally Accepted Accounting Principles ("GAAP"). As defined by 2 C.F.R. §200.49, GAAP "has the meaning specified in accounting standards issued by the Government Accounting Standards Board (GASB) and the Financial Accounting Standards Board (FASB)."

When conducting an audit of the Recipient's performance under this Agreement, the Division shall use Generally Accepted Government Auditing Standards ("GAGAS"). As defined by 2 C.F.R. §200.50, GAGAS, "also known as the Yellow Book, means generally accepted government auditing standards issued by the Comptroller General of the United States, which are applicable to financial audits."

If an audit shows that all or any portion of the funds disbursed were not spent in accordance with the conditions of this Agreement, the Recipient shall be held liable for reimbursement to the Division of all funds not spent in accordance with these applicable regulations and Agreement provisions within 30 days after the Division has notified the Recipient of such non-compliance.

(a) The Recipient shall have all audits completed by an independent auditor, which is defined in section 215.97(2)(i), Florida Statutes, as "an independent certified public accountant licensed under chapter 473." The independent auditor shall state that the audit complied with the applicable provisions noted above. The audit must be received by the Division no later than nine months from the end of the Recipient's fiscal year.

(b) The Recipient shall send copies of reporting packages for audits conducted in accordance with 2 C.F.R. Part 200, by or on behalf of the Recipient, to the Division at the following address:

**DEMSingle\_Audit@em.myflorida.com**

OR

Office of the Inspector General  
2555 Shumard Oak Boulevard  
Tallahassee, Florida 32399-2100

(c) The Recipient shall send the Single Audit reporting package and Form SF-SAC to the Federal Audit Clearinghouse by submission online at:

<http://harvester.census.gov/fac/collect/ddeindex.html>

(d) The Recipient shall send any management letter issued by the auditor to the Division at the following address:

DEMSingle\_Audit@em.myflorida.com

OR

Office of the Inspector General  
2555 Shumard Oak Boulevard  
Tallahassee, Florida 32399-2100

## **REPORTS**

- (a) Consistent with 2 C.F.R. §200.328, the Recipient shall provide the Division with quarterly reports and a close-out report. These reports shall include the current status and progress by the Recipient and all subcontractors in completing the work described in the Scope of Work and the expenditure of funds under this Agreement, in addition to any other information requested by the Division.
- (b) Quarterly reports are due to the Division no later than forty-five (45) days after the end of each quarter of the program year and shall be sent each quarter until submission of the administrative close-out report. The ending dates for each quarter of the program year are September 30, December 31, March 31, and June 30.
- (c) The close-out report is due sixty (60) days after termination of this Agreement or sixty (60) days after completion of the activities contained in this Agreement, whichever first occurs.
- (d) If all required reports and copies are not sent to the Division or are not completed in a manner acceptable to the Division, then the Division may withhold further payments until they are completed or may take other action as stated in Paragraph (11) REMEDIES. "Acceptable to the Division" means that the work product was completed in accordance with the Budget and Scope of Work.
- (e) The Recipient shall provide additional program updates or information that may be required by the Division.
- (f) The Recipient shall provide additional reports and information identified in Quarterly Reports (Attachment A(3)).

**FY 2021 – 2022 EMPA AGREEMENT  
EXHIBIT 2 – SINGLE AUDITS**

| <b>AUDIT COMPLIANCE CERTIFICATION</b>  |  |
|--|--|
| <b>Email a copy of this form at the time of agreement submission to the Division at:</b><br><a href="mailto:DEMSingle_Audit@em.myflorida.com">DEMSingle_Audit@em.myflorida.com</a> .   |  |
| <b>Recipient: Columbia County</b>  |  |
| <b>FEIN:</b>   | <b>Sub- Recipient's Fiscal Year: 2020</b> 2021-22                      |
| <b>Contact Name:</b> Shayne Morgan, FPEM, FMI  | <b>Contact's Phone:</b> (386) 758-1383                                 |
| <b>Contact's Email:</b> shayne_morgan@columbiacountyfla.com  |  |
| <p>1. Did Recipient expend the State Financial Assistance, during its fiscal year, that it received under any agreement (e.g., contract, grant, memorandum of agreement, memorandum of understanding, economic incentive award agreement, etc.) between Recipient and the Florida Division of Emergency Management (Division)? <input checked="" type="checkbox"/>Yes    <input type="checkbox"/>No</p> <p>If the above answer is yes, answer the following before proceeding to item 2.</p> <p>Did Recipient exceed \$750,000 or more of State financial assistance (from DIVISION and all other sources of State financial assistance combined) during its fiscal year? <input type="checkbox"/>Yes    <input checked="" type="checkbox"/>No</p> <p><b>If yes, Recipient certifies that it will timely comply with all applicable State single or project specific audit requirements of section 215.97(2)(i), Florida Statutes, and the applicable rules of the Department of Financial Services and the Auditor General.</b></p> |  |
| <p>2. Did <b>Recipient</b> expend Federal awards during it fiscal year that it received under any agreement (e.g. contract, grant, memorandum of agreement, memorandum of understanding, economic incentive award agreement, etc.) between Recipient and Division? <input checked="" type="checkbox"/>Yes    <input type="checkbox"/>No</p> <p>If the above answer is yes, answer the following before proceeding to item 2.</p> <p>Did Recipient exceed \$750,000 or more of State financial assistance (from Division and all other sources of State financial assistance combined) during its fiscal year? <input type="checkbox"/>Yes    <input checked="" type="checkbox"/>No</p> <p><b>If yes, Recipient certifies that it will timely comply with all applicable single or program – specific audit requirements of title 2 C.F.R. part 200, subpart F, as adopted and supplement by DHS at 2 C.F.R. part 200.</b></p>  |  |
| <b>By signing below, I certify, on behalf of Recipient, that the above representations for items 1 and 2 are correct.</b>  |  |
| July 17, 2021  |  |
| <b>Signature of Authorized Representative</b><br>Rocky Ford,   | <b>Date</b><br>Chairman, Columbia County Board of County Commissioners |
| <b>Printed Name of Authorized Representative</b>   | <b>Title of Authorized Representative</b>                              |

**FY 2021 – 2022 EMPA AGREEMENT  
EXHIBIT 3– 27-19 FLORIDA ADMINISTRATIVE CODE  
EM DIRECTOR OR PART – TIME COORDINATOR CERTIFICATION**

In accordance with the 2021-2022 Emergency Management Preparedness and Assistance Grant agreement, which shall begin July 1, 2021 and shall end on June 30, 2022, and to remain consistent with Rules 27P-19.005(4) and (5), Florida Administrative Code, in order to receive EMPA funding, each County Emergency Management Agency shall annually certify their commitment to employ and maintain either a Full-time Director or Part-time Coordinator, in their efforts to serve as liaison for and coordinator of municipalities' requests for state and federal assistance during post-disaster emergency operations.

Pursuant to Rule 27P-19.004, Florida Administrative Code, if the Recipient is a county with a population of 75,000 or more, then the Recipient shall employ a full-time county emergency management director. If the Recipient is a county with a population less than 75,000, or if the Recipient is a county that is a party to an inter-jurisdictional emergency management agreement entered into pursuant to Section 252.38(3)(b), F.S., then the Recipient shall employ either:

- An Emergency Management Coordinator who works at least 20 hours a week in that capacity; or,
- A full-time director.

I, Rocky Ford (Name) certify compliance with the aforementioned requirements for the 2021-2022 Emergency Management Preparedness and Assistance grant program.

Columbia County (Recipient) has employed an Full Time Emergency Management Director (EM Director or an EM Coordinator) pursuant to Section 252.38(3)(b), Florida Statutes.

I, Rocky Ford also certify that I am the official representative for

Columbia County (Recipient) and have authority to bind Columbia County Board of County Commissioners (Recipient) to this certification of compliance.

Signed by: \_\_\_\_\_

Printed Name: Rocky Ford

Title: Chairman, Columbia County Board of County Commissioners

Date: July 17, 2021

Phone/Email: (386) 755-4100; rford@columbiacountyfla.com

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT A – SCOPE OF WORK**

**I. GENERAL POLICY**

The intent of the Emergency Management Preparedness and Assistance Grant (EMPA) is to provide state funds to assist local governments in preparing for all hazards as authorized by section 252.373, Florida Statutes. EMPA shall be awarded to a county for the use and benefit of the County Emergency Management Agency. Funds shall be allocated to implement and administer county emergency management programs including management and administration. Recipient shall designate an individual, referred to by Division as the Grant Manager, who will be responsible for ensuring that the following activities are adhered to:

- **Planning;**
- **Organization;**
- **Equipment;**
- **Training;**
- **Exercise; and**
- **Management and Administration**

Consistent with Rule 27P-19.010(11), Florida Administrative Code, the Division shall determine allowable costs in accordance with 2 C.F.R. Part 200, entitled “Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.”

**II. RECIPIENT RESPONSIBILITIES**

Recipient shall support efforts to build and sustain core capabilities across the Prevention, Protection, Mitigation, Response, and Recovery mission areas described in the National Preparedness Goal.

Counties must be able to prepare for, respond to, recover from, and mitigate against natural and man-made disasters/emergencies. Each Emergency Management staff person paid from the grant must work the number hours and assume the responsibilities for the duties in their official position description as well as provide the coordination and support for all incidents within their jurisdiction.

**TASKS AND QUARTERLY DELIVERABLES**

The Recipient must successfully complete the following tasks and deliverables throughout the period of performance. Quarterly Tasks (Form1B) will need to be provided each quarter to show completion or progress towards the completion of each task. Quarterly deliverables must be submitted to the FDEM Grants Management System.

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## TASK 1: CERTIFICATION OF COUNTY EMERGENCY MANAGEMENT STAFF

### A. EMERGENCY MANAGEMENT STAFF

Each County Emergency Management Agency must annually certify on (Exhibit 3) their commitment to employ and maintain either a Full-time Director or Part-time Coordinator consistent with Rule 27P-19.005(4) and (5), Florida Administrative Code.

Pursuant to section 252.38(1)(c), Florida Statutes, the County Emergency Management Agency shall perform emergency management functions throughout the territorial limits of the county in which it is organized. Additionally, the County Emergency Management Agency shall conduct such activities outside its territorial limits as required by law and in accordance with state and county emergency management plans and mutual aid agreements.

The County Emergency Management Agency shall serve as liaison for and coordinator of municipalities' requests for state and federal assistance during post-disaster emergency operations. If the Recipient is a county with a population of 75,000 or more, then the Recipient shall employ a full-time county emergency management director. If the Recipient is a county with a population less than 75,000, or if the Recipient is a county that is a party to an inter-jurisdictional emergency management agreement entered into pursuant to section 252.38(3)(b), Florida Statutes then the Recipient shall employ either:

- An Emergency Management Coordinator who works at least twenty (20) hours a week in that capacity; or,
- A full-time director

In order to demonstrate successful completion of task 1 for quarter 1, the Recipient must submit the following items in the Division's SharePoint portal, Salesforce system and WEBEOC:

#### **DELIVERABLES:**

- **The Division Exhibit 3**, Certification letter for the full-time Emergency Management Director or part-time Coordinator, in accordance with Rule 27P-19.004, Florida Administrative Code each quarter;
- **The Division Form 4** – Staffing Detail and position descriptions for funded emergency management staff;
- A **Quarterly Report** as outlined in Quarterly Reports (Attachment A(3)); and
- The full-time Emergency Management Director's or part-time Coordinator's **certified timesheets** or **paystubs**.

#### **Reporting Requirements:**

| Quarter 1               | Quarter 2                    | Quarter 3                    | Quarter 4                    |
|-------------------------|------------------------------|------------------------------|------------------------------|
| <b>Deliverables Due</b> | <b>Submit – Updates Only</b> | <b>Submit – Updates Only</b> | <b>Submit – Updates Only</b> |

## TASK 2: LOCAL BUDGET MATCH CERTIFICATION

### A. MATCH

Throughout the period of this Agreement, and as required by Rule 27P-19.011(1), Florida Administrative Code, the Recipient shall match EMPA grant funds “at the amount either equal to the average of the previous three years’ level of county general revenue funding for the County Emergency Management Agency budget or the level of funding for the County Emergency Management Agency budget for the last fiscal year, whichever is lower.”

**NOTE:** Rule 27P-19.011(1), Florida Administrative Code, states: “County general revenue funding for 911 services, emergency medical services, law enforcement, criminal justice, public works or other services outside the emergency management responsibilities assigned to the County Emergency Management Agency by section 252.38, Florida Statutes., shall not be included in determining the “level of county funding of the County Emergency Management Agency.”

In accordance with Rule 27P-19.011(2), Florida Administrative Code, and if “exceptional financial circumstances” exist, then the Recipient may request from the Division a match reduction.

In order to demonstrate successful completion of task 2 for quarter 2, the Recipient must submit the following items in the Division’s Salesforce system:

#### **DELIVERABLES:**

- **The Division Form 3** - Local Budget Match Certification;
- A copy of the current and accurate County Emergency Management Local Budget (General Revenue) including the budget approval date. All requests for a budget match reduction shall be requested no later than 45 days after the county budget has been approved;
- A copy of the local EM general revenue expenditure (general ledger) report.

#### **Reporting Requirements:**

| Quarter 1 | Quarter 2        | Quarter 3             | Quarter 4             |
|-----------|------------------|-----------------------|-----------------------|
| N/A       | Deliverables Due | Submit – Updates Only | Submit – Updates Only |

## TASK 3: RESPONSE CAPABILITIES

### A. STATEWIDE MUTUAL AID AGREEMENT (SMAA)

Throughout the period of this Agreement, the Recipient must maintain a list of all signatories of the Statewide Mutual Aid Agreement (SMAA) and their contact information. Please note that the SMAA form was modified on February 26, 2018 and replaced the August 20, 2007 edition; however, any and all Agreements previously executed shall remain in full force and effect. Participating parties are encouraged to take the necessary steps to execute the most recent version. Instructions on how to obtain the latest version of the SMAA 2018 agreement is provided in **Attachment F**.

**DELIVERABLES:**

- Each County must submit the current excel SMAA list (**Attachment F (1)**) for all entities (Cities, School Districts, Universities, Special Districts, Native American Tribes, etc.) in their Counties that have the latest SMAA 2018 agreement to the Mutual Aid Branch email: [MutualAid@em.myflorida.com](mailto:MutualAid@em.myflorida.com) due no later than September 30, 2021.

In order to demonstrate successful completion of task 3 for quarter 1, the Recipient must submit the following items to the Mutual Aid Branch email: [MutualAid@em.myflorida.com](mailto:MutualAid@em.myflorida.com):

**Reporting Requirements:**

| Quarter 1               | Quarter 2                    | Quarter 3                    | Quarter 4                    |
|-------------------------|------------------------------|------------------------------|------------------------------|
| <b>Deliverables Due</b> | <b>Submit – Updates Only</b> | <b>Submit – Updates Only</b> | <b>Submit – Updates Only</b> |

**B. SITE IDENTIFICATION DATA/LOCATIONS AND STATEWIDE EMERGENCY SHELTER PLAN (SESP) SHELTER INVENTORY AND RETROFIT**

Throughout the period of this Agreement, the Recipient must maintain current County Emergency Management Director and Alternate contacts and other contacts through the Division's SharePoint portal available at <https://portal.floridadisaster.org>, to include, but not limited to County Director and Alternate contacts and State Mutual Aid Agreement contacts;

The Recipient must maintain SharePoint site identification data including, but not limited to location and attribute information for fire stations, law enforcement, emergency medical services, emergency operations center(s) and call centers;

The Recipient must maintain WEBEOC (CSAs) and County Points of Distribution (PODs), and;

The Recipient must complete, and upload SESP Shelter Inventory and Retrofit information on the WEBEOC SESP Shelter Inventory board in accordance with Florida's statewide Hurricane Shelter Space Deficit Elimination program.

In order to demonstrate successful completion of task 3 for quarter 3, the Recipient must submit the following items in the Division's SharePoint Portal and WEBEOC:

**DELIVERABLES:**

- **Attachment G** - The Recipient must maintain current county emergency management and other contacts through the Division's SharePoint portal available at <https://portal.floridadisaster.org> to include County Director and Alternate contacts, State Mutual Aid Agreement contacts;
- **Attachment G** - Maintain site data in SharePoint to include location and attribute information for all fire stations, law enforcement, emergency medical services, emergency operations center(s) and call centers;
- **Attachment G** - Maintain site data in WEBEOC to include location and attribute information for all pre-identified sites for County Staging Areas (CSAs) and County Points of Distribution (PODs);
- **Attachment H** - Complete the SESP Shelter Inventory and Retrofit Items 1-8 on the WEBEOC SESP Shelter Inventory board no later than **March 31, 2022**.



**Reporting Requirements:**

| Quarter 1 | Quarter 2 | Quarter 3        | Quarter 4             |
|-----------|-----------|------------------|-----------------------|
| N/A       | N/A       | Deliverables Due | Submit – Updates Only |

**TASK 4: RECOVERY CAPABILITIES**

**A. DISASTER RECOVERY CENTER LOCATIONS**

Throughout the period of this Agreement, the Recipient must maintain potential Disaster Recovery Center (DRC) locations and provide basic information in WEBEOC which identifies physical location, contact persons, site characteristics, interior, office characteristics, phone service, and sketches.

In order to demonstrate successful completion of task 4 for quarter 4, the Recipient must submit the following items in WEBEOC:

**DELIVERABLES**

- **Attachment I** – Support of Recovery capabilities, identify potential Disaster Recovery Center (DRC) locations and provide basic information in WEBEOC.

**Reporting Requirements:**

| Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4        |
|-----------|-----------|-----------|------------------|
| N/A       | N/A       | N/A       | Deliverables Due |

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT A (1)  
ALLOWABLE COSTS AND ELIGIBLE ACTIVITIES – BUDGET DIRECTIONS**

**I. CATEGORIES AND ELIGIBLE ACTIVITIES**

The 2021 EMPA Funding Guidance allowable costs are divided into the following categories: **Planning, Organization, Equipment, Training, Exercise, and Management and Administration.**

**A. PLANNING**

Planning spans all five National Preparedness Goal (the Goal) mission areas and provides a baseline for determining potential threats and hazards, required capabilities, required resources, and establishes a framework for roles and responsibilities. Planning provides a methodical way to engage the whole community in the development of a strategic, operational, and/or community-based approach to preparedness.

**Plans should have prior review and approval from the respective DEM state program. Funds may not be reimbursed for any plans that are not approved.**

EMPA Program funds may be used to develop or enhance emergency management planning activities. Some examples include, but not limited to:

- Emergency Operation Plans/ Local Comprehensive Emergency Management Planning
- Communications Plans
- Administrative Plans
- Whole Community Engagement/Planning
- Resource Management Planning
- Sheltering and Evacuation Planning
- Recovery Planning
- Continuity Plans

For planning expenditures to qualify for reimbursement under this Agreement, the Recipient must submit a final plan to the Division and the Division's Natural Hazard Planning Manager must approve that plan. As part of any request for reimbursement for planning expenditures, the Recipient must submit the following to the Division:

- Copies of contracts or agreements prior to contracting with consultants or sub-contractors providing services;
- Invoice from any consultant/contractor involved in the planning (Note – grant agreement must be referenced on the invoice);
- Copies of all planning materials and work product (e.g. meeting documents, copies of plans);
- If a meeting was held by Recipient, an agenda and signup sheet with meeting date must be included;
- Proof of payment (e.g. canceled check, electronic funds transfer, credit card statement);
- Complete debarment form and/or Sam.gov for any contractors/consultants;
- Proof of purchase methodology (e.g. quotes, sole source, state contract, competitive bid results);
- Invoices and proof of payment for Travel costs (e.g., airfare, mileage, per diem, hotel) related to planning activities.

**B. OPERATIONAL**

EMPA Program funds may be used for all day-to-day preparedness activities in support of the four phases of emergency management (preparedness, response, recovery, and mitigation). Reimbursable personnel costs include salary, overtime, and backfill, compensatory time off, and associated fringe benefits.

Rules 27P-19.004 and 27P-19.0061, Florida Administrative Code., outline the minimum performance level (definition below). Each Emergency Management staff person must be available to work the number of hours and assume the responsibilities for the duties in their official position description as well as provide the coordination and support for all incidents within the jurisdiction on a 24-hour basis.

Personnel Cost - Rules 27P-11.004, 27P-11.0061, Florida Administrative Code:

Counties with populations of 75,000 or more must have a full-time emergency management director. Counties with populations of less than 75,000 or party to an inter-jurisdictional emergency management agreement entered into pursuant to section 252.38(3)(b), Florida Statutes, that is recognized by the Governor by executive order or rule, are encouraged to have a full-time director. However, as a minimum, such a county must have an emergency management coordinator who works at least twenty (20) hours a week in that capacity. "Full-time Emergency Management Director" means a single professional emergency management program Administrator working full-time as identified in the position description established by the governing body of the jurisdiction.

Eligible "**Operational Cost**" items include, but are not limited to:

- **Salaries and Fringe Benefits**
  - Copies of certified timesheets with employee and supervisor signature documenting hours worked or Division Form 6 - Time and Effort and proof employee was paid (paystubs, earning statements, and payroll expenditure reports).
- **Utilities (electric, water and sewage)**
- Service/Maintenance agreements (provide vendor debarment and service agreement for contractual services)
- Office Supplies/Materials
- IT Software Upgrades
- Memberships
- Publications
- Postage
- Storage
- **Other Personnel/Contractual Services**
  - Reimbursement for services by a person(s) who is not a regular or full-time employee filling established positions. This includes but is not limited to temporary employees, student or graduate assistants, fellowships, part time academic employment, board members, consultants, and other services.
  - Consultant Services require a pre-approved Contract or purchase order by the Division. Copies of additional quotes should also be supplied when requesting pre-approval. These requests should be sent to the grant manager for the Division for review.

#### **Funding for Critical Emergency Supplies**

Critical emergency supplies—such as shelf stable products, water, and basic medical supplies—are an allowable expense under EMPA. DHS/FEMA must approve a state's five-year viable inventory management plan prior to allocating grant funds for stockpiling purposes. The five-year plan should include a distribution strategy and related sustainment costs if the grant expenditure is over \$100,000.

#### **Operational Costs Supporting Documentation**

If the recipient seeks reimbursement for operational activities, then the following shall be submitted:

- For salaries, provide copies of certified timesheets with employee and supervisor signature documenting hours worked or Division Form 6 - Time and Effort and proof employee was paid (paystubs, earning statements, payroll expenditure reports).
- Expense items need to have copies of invoices, receipts and cancelled checks, credit card

statements, bank statements for proof of payment. All documentation for reimbursement amounts must be clearly visible and defined (i.e., highlighted, underlined, circled on the required supporting documentation).

### **C. EQUIPMENT**

Provided the cost of the item qualifies as reasonable and necessary for the successful completion of a task required by this Agreement, an item on the FEMA AEL that is specifically coded for the Emergency Management Performance Grant ("EMPG") Program satisfies the minimum level of service for an equipment purchase under this Agreement. If an item qualifies as reasonable and necessary, and if the item is EMPG-coded on the FEMA AEL, then the Recipient does not need to obtain permission from the Division prior to purchasing the item in order to seek reimbursement.

If the Recipient seeks reimbursement for the purchase of an item that is not EMPG-coded on the FEMA AEL, then the Recipient must receive permission from the Division prior to purchasing the item. If the Recipient purchases such an item without receiving permission from the Division beforehand, then the Division will not provide any reimbursement for that purchase.

Allowable equipment includes equipment from the following AEL categories:

- Personal Protective Equipment (PPE) (Category 1)
- Information Technology (Category 4)
- Cybersecurity Enhancement Equipment (Category 5)
- Interoperable Communications Equipment (Category 6)
- Detection Equipment (Category 7)
- Power Equipment (Category 10)
- Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) Reference Materials (Category 11)
- CBRNE Incident Response Vehicles (Category 12)
- Physical Security Enhancement Equipment (Category 14)
- CBRNE Logistical Support Equipment (Category 19)
- Other Authorized Equipment (Category 21)

The Authorized Equipment List (AEL) is a list of approved equipment types allowed under FEMA's preparedness grant programs and can be located at <https://www.fema.gov/authorized-equipment-list>.

If Recipients have questions concerning the eligibility of equipment, they shall contact their Grant Manager for clarification.

Recipients should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Large equipment purchases must be identified and explained. For more information regarding property management standards for equipment, please reference 2 C.F.R. Part 200, including 2 C.F.R. §§ 200.310, 200.313, and 200.316.

### **Equipment Acquisition Costs Supporting Documentation**

- Provide copies of invoices, receipts and cancelled checks, credit card statements, bank statements for proof of payment.
- Provide the Authorized Equipment List (AEL) # for each equipment purchase.

### **D. TRAINING**

EMPA Training funds may be used for a range of emergency management-related training activities to enhance the capabilities of state and local emergency management personnel through the establishment, support, conduct, and attendance of training. Training should foster the development of a community-oriented approach to emergency management that emphasizes engagement at the community level, strengthens best practices, and provides a path toward building sustainable resilience.

The Recipient can successfully complete an authorized course either by attending or by conducting that course.

- In order to receive payment for successfully attending a training course, the Recipient must provide the Division with a certificate of completion; additionally, the Recipient must provide the Division with all receipts that document the costs incurred by the Recipient in order to attend the course.
- In order to receive payment for successfully conducting a course, the Recipient must provide the Division with the course sign-in sheet. Additionally, the Recipient must provide the Division with all receipts that document the costs incurred by the Recipient in order to conduct the course.
- In order to receive payment for successfully conducting a workshop, the recipient must provide the Division with workshop sign-in sheets and materials used for workshop. Additionally, the Recipient must provide the Division with all receipts that document the costs incurred by the Recipient in order to conduct the workshop.

For training, the number of participants must be a minimum of fifteen (15) in order to justify the cost of holding a course. For questions regarding adequate number of participants, please contact the Division State Training Officer for course specific guidance. Unless the recipient receives advance written approval from the State Training Officer for the number of participants, then the Division must reduce the amount authorized for reimbursement on a pro-rata basis for any training with less than fifteen (15) participants.

When conducting a training that shall include meals for the attendees, the recipient shall submit a request for approval to the Division no later than twenty-five (25) days prior to the event to allow for both the Division and the Department of Financial Services to review. The request for meals must be submitted on letterhead and must include the date of exercise, agenda, number of attendees, and costs of meals.

Allowable training-related costs include the following:

- **Develop, Deliver, and Evaluate Training.** This includes costs related to administering the training: planning, scheduling, facilities, materials and supplies, reproduction of materials, and equipment. Training should provide the opportunity to demonstrate and validate skills learned, as well as to identify any gaps in these skills. Any training or training gaps, including those for children and individuals with disabilities or access and functional needs, should be identified in the Integrated Preparedness Program (IPP) and addressed in the training cycle. States are encouraged to use existing training rather than developing new courses. When developing new courses states are encouraged to apply the Analyze, Design, Develop, Implement and Evaluate (ADDIE) model for instruction design.
- **Overtime and Backfill.** The entire amount of overtime costs, including payments related to backfilling personnel, which are the direct result of attendance at FEMA and/or approved training courses and programs are allowable. These costs are allowed only to the extent the payment for such services is in accordance with the policies of the state or unit(s) of local government and has the approval of the state or FEMA, whichever is applicable. In no case is dual compensation allowable. That is, an employee of a unit of government may not receive compensation from their unit or agency of government AND from an award for a single period of time (e.g., 1:00 p.m. to 5:00 p.m.), even though such work may benefit both activities.
- **Travel.** Travel costs (e.g., airfare, mileage, per diem, and hotel) are allowable as expenses by employees who are on travel status for official business related to approved training.
- **Hiring of Full or Part-Time Staff or Contractors/Consultants.** Full or part-time staff or contractors/consultants may be hired to support direct training-related activities. Payment of salaries and fringe benefits must be in accordance with the policies of the state or unit(s) of local government and have the approval of the state or FEMA, whichever is applicable.
- **Certification/Recertification of Instructors.** Costs associated with the certification and re-certification of instructors are allowed. States are encouraged to follow the FEMA Instructor

Quality Assurance Program to ensure a minimum level of competency and corresponding levels of evaluation of student learning. This is particularly important for those courses which involve training of trainers.

### **Conferences**

The Division recognizes the important role that conferences can play in the professional development of emergency managers.

2 C.F.R. §200.432 defines the term conference as "a meeting, retreat, seminar, symposium, workshop or event whose primary purpose is the dissemination of technical information beyond the non-Federal entity and is necessary and reasonable for successful performance under the Federal award."

Rule 69I-42.002(3), Florida Administrative Code, defines the term conference as:

The coming together of persons with a common interest or interests for the purpose of deliberation, interchange of views, or for the removal of differences or disputes and for discussion of their common problems and interests. The term also includes similar meetings such as seminars and workshops which are large formal group meetings that are programmed and supervised to accomplish intensive research, study, discussion, and work in some specific field or on a governmental problem or problems. A conference does not mean the coming together of agency or interagency personnel.

For travel to a conference or convention to qualify for reimbursement, the cost must be reasonable and attendance at the conference must be necessary for the successful completion of a task required by this Agreement.

Provided the cost qualifies as reasonable and necessary for the successful completion of a task required by this Agreement, travel to a conference that complies with the requirements of Rule 69I-42.004, Florida Administrative Code, satisfies the minimum level of service for conference travel under this Agreement.

In pertinent part, Rule 69I-42.004(1), Florida Administrative Code, states "No public funds shall be expended for attendance at conferences or conventions unless:

- The main purpose of the conference or convention is in connection with the official business of the state and directly related to the performance of the statutory duties and responsibilities of the agency participating;
- The activity provides a direct educational or other benefit supporting the work and public purpose of the person attending;
- The duties and responsibilities of the traveler attending such meetings are compatible with the objectives of the conference or convention; and
- The request for payment of travel expenses is otherwise in compliance with these rules.

Provided the cost qualifies as reasonable and necessary for the successful completion of a task required by this Agreement, and provided any related travel complies with the requirements of Rule 69I-42.004, Florida Administrative Code, conferences may qualify for reimbursement under this Agreement:

Requests for reimbursement for payment of the registration fee or for a conference or convention must include:

- A statement explaining how the expense directly relates to the Recipient's successful performance of a task outlined in this Agreement;
- A copy of those pages of the agenda that itemizes the registration fee;
- A copy of local travel policy; and,
- A copy of the travel voucher or a statement that no travel costs were incurred, if applicable.

When a meal is included in a registration fee, the meal allowance must be deducted from the reimbursement claim, even if the traveler decides for personal reasons not to eat the meal. See section 112.061(6)(c), Florida Statutes (“No one, whether traveling out of or in state, shall be reimbursed for any meal or lodging included in a convention or conference registration fee paid by the state”). A continental breakfast is considered a meal and must be deducted if included in a registration fee for a convention or conference. However, in the case where a meal is provided by a hotel or airline, the traveler shall be allowed to claim the meal allowance provided by law.

#### **Class A, Class B, and Class C Travel:**

- Class A travel is continuous travel of 24 hours or more away from official headquarters. The travel day for Class A is based on a calendar day (midnight to midnight).
- Class B travel is continuous travel of less than 24 hours which involves overnight absence away from official headquarters. The travel day for Class B travel begins at the same time as the travel period.
- Class C travel is short or day trips in which the traveler is not away from his/her official headquarters overnight. Class C allowances are currently not authorized for reimbursement.

|   |
|---|
| <b>Meal Allowance and Per Diem:</b>   |
| <b>Section 112.061(6)(b), Florida Statutes, establishes the meal allowance for each meal during a travel period as follows:</b>   |
| \$6 for breakfast (when travel begins before 6 a.m. and extends beyond 8 a.m.);   |
| \$11 for lunch (when travel begins before 12 noon and extends beyond 2 p.m.);   |
| \$19 for dinner (When travel begins before 6 p.m. and extends beyond 8 p.m. or when travel occurs during nighttime hours due to special assignment.).   |
| <b>Section 112.061(a), Florida Statutes, establishes the per diem amounts.</b>  |
| All travelers are allowed: The authorized per diem for each day of travel; or,<br>If actual expenses exceed the allowable per diem, the amount allowed for meals as provided in s. 112.061(6) (b), F.S., plus actual expenses for lodging at a single occupancy rate. |

Per diem shall be calculated using four six-hour periods (quarters) beginning at midnight for Class A or when travel begins for Class B travel. Travelers may only switch from actual to per diem while on Class A travel on a midnight to midnight basis. A traveler on Class A or B travel who elects to be reimbursed on a per diem basis is allowed \$20.00 for each quarter from the time of departure until the time of return.

#### **Reimbursement for Meal Allowances That Exceed the State Rates**

The Division shall not reimburse for any meal allowance that exceeds \$6 for breakfast, \$11 for lunch, or \$19 for dinner unless:

- For counties – the requirements of section 112.061(14), Florida Statutes, are satisfied;
- The costs do not exceed charges normally allowed by the Recipient in its regular operations as the result of the Recipient’s written travel policy (in other words, the reimbursement rates apply uniformly to all travel by the Recipient); and,
- The costs do not exceed the reimbursement rates established by the United States General Services Administration (“GSA”) for that locale (see <https://www.gsa.gov/portal/content/104877>).

#### **Hotel Accommodations**

- A traveler may not claim per diem or lodging reimbursement for overnight travel within fifty (50) miles (one-way) of his or her headquarters or residence unless the circumstances necessitating the overnight stay are fully explained by the traveler and approved by the Division.

- Absent prior approval from the Division, the cost of any hotel accommodation shall not exceed \$150 per night.

#### **Training Costs Supporting Documentation**

- Copies of contracts or agreements with consultants or sub-contractors providing services;
- Copies of invoices, receipts and cancelled checks, credit card statements and bank statements for proof of payment;
- Copies of the agenda, certificates and/or sign in sheets (if using prepopulated sign in sheets they must be certified by the Emergency Management Director or Lead Instructor verifying attendance).

For travel and conferences related to EMPA activities:

- Copies of all receipts must be submitted (i.e., airfare, proof of mileage, toll receipts, hotel receipts, car rental receipts, etc.) Receipts must be itemized and match the dates of travel/conference;
- Copies of Conferences must be providing an agenda. Proof of payment is also required for all travel and conferences. If the Recipient seeks reimbursement for travel costs that exceed the amounts stated in section 112.061(6)(b), Florida Statutes (\$6 for breakfast, \$11 for lunch, and \$19 for dinner), then the Recipient must provide documentation that: The costs are reasonable and do not exceed charges normally allowed by the Recipient in its regular operations as a result of the Recipient's written travel policy; and participation of the individual in the travel is necessary to the Federal award.

#### **E. EXERCISES**

Exercises conducted with grant funds should test and evaluate performance towards meeting capability targets established in a jurisdiction's Integrated Preparedness Program (IPP) for the core capabilities needed to address its greatest risks.

#### **Allowable Exercise-Related Costs**

- **Design, Develop, Conduct and Evaluate an Exercise.** This includes costs related to planning, meeting space and other meeting costs, facilitation costs, materials and supplies, travel, and documentation. Recipients are encouraged to use free public space/locations/facilities, whenever available, prior to the rental of space/locations/facilities. Exercises shall provide the opportunity to demonstrate and validate skills learned, as well as to identify any gaps in these skills. Gaps identified during an exercise including those for children and individuals with disabilities or access and functional needs, shall be identified in the AAR/IP and addressed in the exercise cycle.
- **Hiring of Contractors or Consultants.** Contractors or Consultants may be hired to support direct exercise activities. Payment of salaries and fringe benefits must be in accordance with the policies of the state or unit(s) of local government and have the approval of the state. The services of contractors/consultants may also be procured to support the design, development, conduct and evaluation of exercises.
- **Overtime and Backfill.** The entire amount of overtime costs, including payments related to backfilling personnel, which are the direct result of time spent on the design, development and conduct of exercises are allowable expenses. These costs are allowed only to the extent the payment for such services is in accordance with the policies of the local government. In no case is dual compensation allowable. That is, an employee of a unit of government may not receive compensation from their unit or agency of government AND from an award for a single period of time (e.g., 1:00 p.m. to 5:00 p.m.), even though such work may benefit both activities.

**Travel.** Travel costs (e.g., airfare, mileage, per diem, hotel) are allowable as expenses by employees who are on travel status for official business related to the planning and conduct of the exercise activities.



- **Supplies.** Supplies are items that are expended or consumed during the course of the planning and conduct of the exercise activities (e.g., gloves, non-sterile masks, fuel, and disposable protective equipment).
- **Other Items.** These costs are limited to items consumed in direct support of exercise activities such as the rental of space/locations for planning and conducting an exercise, rental of equipment, and the procurement of other essential nondurable goods. Recipients are encouraged to use free public space/locations, whenever available, prior to the rental of space/locations. Costs associated with inclusive practices and the provision of reasonable accommodations and modifications that facilitate full access for children and adults with disabilities are allowable.

When conducting an exercise that shall include meals for the attendees, the recipient shall submit a request for approval to the Division no later than twenty-five (25) days prior to the event to allow for both the Division and the Department of Financial Services to review. The request for meals must be submitted on letterhead and must include the date of exercise, agenda, number of attendees, and costs of meals.

#### **Unauthorized Exercise-Related Costs**

- Reimbursement for the maintenance and/or wear and tear costs of general use vehicles (e.g., construction vehicles) and emergency response apparatus (e.g., fire trucks, ambulances). The only vehicle costs that are reimbursable are fuel/gasoline or mileage;
- Equipment that is purchased for permanent installation and/or use, beyond the scope of exercise conduct (e.g., electronic messaging signs);
- Durable and non-durable goods purchased for installation and/or use beyond the scope of exercise conduct.

If the recipient seeks reimbursement for exercise activities, then the following shall be submitted:

- Documentation clearly indicating the purpose/objectives of the exercise (e.g. Situation Manual, Exercise Plan);
- After-action report with Improvement Plan (AAR/IP), Sign-In sheets, Agenda;
- Receipts and proof of payment (e.g. canceled check, electronic funds transfer confirmation, credit card statement, bank statement) for supplies expenditures (e.g. copying paper, gloves, tap, etc.);
- Invoices and proof of payment for Travel costs (e.g., internal travel voucher, airfare, mileage, per diem, hotel) related to exercise activities;
- Proof of purchase methodology, if applicable (e.g. quotes, sole source, state contract, competitive bid results).

No later than 90 days after completion of an exercise, the recipient must upload to the Division's SharePoint portal at: <https://portal.floridadisaster.org> an After Action Report (AAR) that includes the following:

**An Improvement Plan; and,  
A roster of participants.**

#### **F. MANAGEMENT AND ADMINISTRATIVE (M&A)**

M&A activities are those defined as directly relating to the management and administration of EMPA Program funds, such as financial management and monitoring. It should be noted that salaries of state and local emergency managers are not typically categorized as M&A, unless the state or local EMA chooses to assign personnel to specific M&A activities.

#### **Management and Administrative Costs Supporting Documentation**

- Copies of certified timesheets with employee and supervisor signature documenting hours worked or Division Form 6 - Time and Effort and proof employee was paid (paystubs, earning statements, and payroll expenditure reports);
- Costs for M&A activities are allowed up to 5% of the total award amount.

### **Supplanting Prohibited**

Section 252.372, Florida Statutes, states that the monies from the EMPA Trust Fund “may not be used to supplant existing funding.” Additionally, Rule 27P-19.003(3), Florida Administrative Code, states: “Funds received from the [EMPA] Trust Fund may not be used to supplant existing funding, nor shall funds from one program under the Trust Fund be used to match funds received from another program under the Trust Fund.”

## **II. OTHER CRITICAL INFORMATION**

### **A. RULE 27P-19, FLORIDA ADMINISTRATIVE CODE**

Rule 27P-19.010(11), Florida Administrative Code, states: “Allowable costs shall be determined in accordance with applicable Federal Office of Management and Budget Circulars...” Therefore, unless a specific exception applies, 2 CFR Part 200 Subpart A (Definitions) and Subpart E (Cost Principles) shall apply to this Agreement.

### **Expenses**

In order to qualify for reimbursement under the terms of this Agreement, an expense incurred by the Recipient must be reasonable and necessary for the successful completion of a task required by this Agreement. If an expense fails to qualify as either reasonable or necessary to successfully complete a task, then the Division shall not provide any reimbursement for that expense.

**NOTE:** This Scope of Work recognizes that each Recipient:

- Might be at a different level of preparedness than another Recipient
- Operates within a unique geography
- Faces unique threats and hazards
- Serves a unique population

Therefore, what might qualify as reasonable and necessary for one Recipient to successfully complete a task under this Agreement might not qualify as reasonable and necessary for another Recipient to successfully complete a task. Conversely, what might not qualify for one may qualify for another.

In order to avoid a “one size fits all” approach, this Agreement provides some level of flexibility. If a unique cost (e.g. equipment not listed on the EMPG AEL) qualifies as reasonable and necessary for the successful completion of a task under this Agreement, and if the Recipient receives permission from the Division prior to incurring that unique cost, then the Division shall reimburse the Recipient for that cost.

### **Performance**

In order to qualify for reimbursement under the terms of this Agreement, the Recipient’s performance must satisfy the minimum level of service required for the successful completion of a task required by this Agreement. If the performance fails to satisfy the minimum level of service, then the Division shall not provide any reimbursement for that performance.

### **B. INDIRECT COSTS**

Indirect cost is allowable under this program as described in 2 C.F.R. Part 200, including 2 C.F.R. § 200.414. Recipients with a negotiated cost rate agreement that desire to charge indirect costs to an award must provide a copy of their negotiated indirect cost rate agreement at the time of application. Recipients that are not required by 2 C.F.R. Part 200 to have a negotiated indirect cost rate agreement but are required by 2 C.F.R. Part 200 to develop an indirect cost rate proposal must provide a copy of their proposal at time of application. Post-award requests to charge indirect cost will be considered on case-by-case basis and based upon the submission of an agreement or proposal.

**C. PROCUREMENT**

All Procurement transactions will be conducted in a manner providing full and open competition and shall comply with the standards articulated in:

- 2 C.F.R. Part 200;
- Chapter 287, Florida Statutes; and,
- Any local procurement policy.

Per 2 CFR 200.318 through 200.326, Recipients are required to adhere to certain procurement standards for entering contracts for personnel or services. This includes full and open competition, methods of procurement to follow, federal or passthrough entity review, and including federal provisions into contracts.

**D. CONSTRUCTION and RENOVATION**

Construction and renovation projects for a local government's principal Emergency Operations Center (EOC), are allowable under the EMPA Program. The Division must provide written approval prior to the use of any EMPA Program funds for construction or renovation. Requests for EMPA Program funds for construction of an EOC must be accompanied by a justification to their EMPA Grant Manager for review and processing. The above examples are not intended to exclude other construction projects as potentially allowable costs. For example, construction of a facility for the storage of critical emergency supplies, as a Point of Distribution (POD) for emergency distribution, and/or to serve as a staging area for deployment of emergency response resources is potentially an allowable expense. Other construction or renovation projects, such as a secondary or local EOC, will be considered on a case-by-case basis, with advance written approval.

**E. FINANCIAL CONSEQUENCES:**

If a recipient fails to comply with the terms and conditions of the State award, the Division may terminate the award in whole or part. If the noncompliance can be corrected, the Division may first attempt to direct the recipient to correct the noncompliance. This may take the form of a Compliance Notification. If the noncompliance cannot be correct or the recipient is nonresponsive, one or more of the following steps may be taken:

- (1) Temporarily withhold payments pending correction of the deficiency by the recipient.
- (2) Disallow (that is, deny both use of funds and any applicable matching credit for) all or part of the cost of the activity or action not in compliance.
- (3) Wholly or partly suspend or terminate the award.
- (4) Take other remedies that may be legally available.

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT A (2)  
PROPOSED PROGRAM BUDGET DETAIL WORKSHEET**

The Recipient shall use the Emergency Management Preparedness and Assistance (“EMPA”) Trust Fund monies authorized by this Agreement in order to complete the tasks outlined in the Scope of Work (Attachment A).

The “Proposed Program Budget Detail Worksheet” serves as a guide for both the Recipient and the Division during the performance of the tasks outlined in the Scope of Work (Attachment A).

Prior to execution of this Agreement, the Recipient shall complete the “Proposed Program Budget Detail Worksheet” listed below. If the Recipient fails to complete the “Proposed Program Budget Detail Worksheet”, then the Division shall not execute this Agreement.

After execution of this Agreement, the Recipient may change the allocation amounts in the “Proposed Program Budget Detail Worksheet.” If the Recipient changes the “Proposed Program Budget Detail Worksheet”, then the Recipient’s quarterly reports must include an updated “Proposed Program Budget Detail Worksheet” to reflect current expenditures.

**BUDGET SUMMARY AND EXPENDITURES**

**RECIPIENT: COLUMBIA COUNTY**  
**AGREEMENT: A0195**

|                                  |                      |
|----------------------------------|----------------------|
| 1. PLANNING                      | \$                   |
| 2. ORGANIZATION                  | \$                   |
| 3. EQUIPMENT                     | \$                   |
| 4. TRAINING                      | \$                   |
| 5. EXERCISE                      | \$                   |
| 6. MANAGEMENT AND ADMINISTRATION | \$                   |
| <b>7. TOTAL AWARD</b>            | <b>\$ 105,806.00</b> |

| <b>FY 2021-2022 PROPOSED PROGRAM BUDGET DETAIL WORKSHEET - ELIGIBLE ACTIVITIES<br/>(Not limited to activities below)</b> |                 |                  |                   |
|--|-----------------|------------------|-------------------|
| <b>Allowable Planning Costs</b>  | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b> |
| Emergency Operations Plan  |                 |                  |                   |
| Salaries and Fringe Benefits   |                 |                  |                   |
| Supplies   |                 |                  |                   |
| Travel/per diem related to planning activities   |                 |                  |                   |
| <b>TOTAL PLANNING EXPENDITURES</b>   |                 |                  | <b>\$</b>         |
| <b>Allowable Organization Costs</b>  | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b> |
| Salaries and Fringe Benefits   | 1               | \$66,990         | \$66,690          |
| Utilities (electric, water and sewage)   | 1               | \$9,900          | \$9,900           |

|  |                 |                  |                   |
|--|-----------------|------------------|-------------------|
| Telephone Bills (VOIP, Cellular)   | 1               | \$10,000         | \$10,000          |
| Supplies/Materials   | 1               | \$1,416          | \$1,416           |
| Memberships  | 1               | \$2,500          | \$2,500           |
| Publications   | 1               | \$15,000         | \$15,000          |
| Postage  |                 |                  |                   |
| Storage  |                 |                  |                   |
| <b>TOTAL ORGANIZATION EXPENDITURES</b>   |                 |                  | <b>\$</b>         |
| <b>Allowable Equipment Acquisition Costs</b>   | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b> |
| Personal protective equipment  |                 |                  |                   |
|  |                 |                  |                   |
| Information technology   |                 |                  |                   |
|  |                 |                  |                   |
| Cybersecurity enhancement equipment  |                 |                  |                   |
|  |                 |                  |                   |
| Interoperable communications equipment   |                 |                  |                   |
|  |                 |                  |                   |
| Detection Equipment  |                 |                  |                   |
|  |                 |                  |                   |
| Power equipment  |                 |                  |                   |
|  |                 |                  |                   |
| CBRNE Reference Materials  |                 |                  |                   |
|  |                 |                  |                   |
| CBRNE Incident Response Vehicles   |                 |                  |                   |
|  |                 |                  |                   |
| Physical Security Enhancement Equipment  |                 |                  |                   |
|  |                 |                  |                   |
| Logistics  |                 |                  |                   |
|  |                 |                  |                   |
| Other authorized equipment costs   |                 |                  |                   |
| 21GN-00-OCEQ - EOC Equipment & Supplies<br>(provide description of EOC equipment & supplies) |                 |                  |                   |
| <b>TOTAL EQUIPMENT EXPENDITURES</b>  |                 |                  | <b>\$</b>         |
| <b>Allowable Training Costs</b>  | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b> |
| Salaries and Fringe Benefits   |                 |                  |                   |
| Develop, Deliver Training  |                 |                  |                   |
| Workshops and Conferences  |                 |                  |                   |

|  |                 |                  |                     |
|--|-----------------|------------------|---------------------|
| Certification/Recertification of Instructors   |                 |                  |                     |
| Travel   |                 |                  |                     |
| Supplies   |                 |                  |                     |
| Overtime and Backfill  |                 |                  |                     |
| <b>TOTAL TRAINING EXPENDITURES</b>   |                 |                  | <b>\$</b>           |
| <b>Allowable Exercise Costs</b>  | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b>   |
| Salaries and Fringe Benefits   |                 |                  |                     |
| Design, Develop, Conduct and Evaluate an Exercise in accordance with HSEEP standards |                 |                  |                     |
| Exercise Planning Workshop   |                 |                  |                     |
| Travel   |                 |                  |                     |
| Supplies   |                 |                  |                     |
| Overtime and Backfill  |                 |                  |                     |
| <b>TOTAL EXERCISE EXPENDITURES</b>   |                 |                  |                     |
| <b>Allowable Management and Administration Costs<br/>(Up to 5% of total award)</b>   | <b>Quantity</b> | <b>Unit Cost</b> | <b>Total Cost</b>   |
| Salaries and Fringe Benefits   |                 |                  |                     |
| <b>TOTAL MANAGEMENT AND ADMINISTRATION EXPENDITURES</b>                              |                 |                  |                     |
| <b>TOTAL EXPENDITURES</b>  |                 |                  | <b>\$105,806.00</b> |

REVISION DATE: July 3, 2021

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT A (3) – QUARTERLY REPORTS**

Recipients must provide the Division with quarterly financial reports and a final close-out report.

- Quarterly financial reports are due to the Division no later than forty-five (45) days after the end of each quarter of the program year and must continue to be submitted each quarter until submission of the final close-out report. The ending dates for each quarter of this program year are September 30, December 31, March 31, and June 30.

| Reporting Period              | Report due to Division no later than |
|-------------------------------|--------------------------------------|
| July 1 through September 30   | November 15                          |
| October 1 through December 31 | February 15                          |
| January 1 through March 31    | May 15                               |
| April 1 through June 30       | August 15                            |

**The Recipient shall provide the Division with full support documentation for the quarterly financial reports.**

- A. The Recipient must provide the Division with supporting documentation for the quarterly financial reports. The Division shall accept back up documentation by email if the County is not able to upload on Salesforce.
- B. The Quarterly Tasks form 1B is due with your quarterly financial report each quarter. This form identifies all Emergency Management personnel's required training completed (or working towards completion) as well as quarterly deliverables during the agreement period.
- C. In order to ensure compliance with Rule 27P-19.011, Florida Administrative Code, the Local Budget Match Requirement Form shall be completed and sent when the Local County Budget is approved or by **November 15, 2021**. The County shall provide a copy of the current Emergency Management Local Budget (General Revenue) including approved budget date with the form. If the County's current budget is lower than the previous year, or the average of the last three years, the county is required to request a Waiver no later than forty-five (45) days after the county budget is approved.
- D. In a format provided by the Division, Form 4 – Staffing Detail and position descriptions of each funded county emergency management staff shall be submitted no later than **November 15, 2021**, or along with 1<sup>st</sup> quarter reimbursement submission, whichever occurs first.
- E. The final close-out report is due sixty (60) days after termination of this Agreement by **August 30, 2022**, or 60 days after completion of activities contained in this agreement, whichever occurs first.
- F. An administrative closeout may be conducted when a recipient is not responsive to the Division's reasonable efforts to collect required reports, forms, or other documentation needed to complete the standard award and/or closeout process. FDEM will make three written attempts to collect required information before initiating an administrative closeout. If an award is administratively closed, FDEM may decide to impose remedies for noncompliance per 2 C.F.R. § 200.338, consider this information in reviewing future award applications, or apply special conditions to existing or future award

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT B  
JUSTIFICATION OF ADVANCE PAYMENT**

**RECIPIENT:**

**If you are requesting an advance, indicate same by checking the box below.**

☐ **ADVANCE REQUESTED**

Advance payment of \$ \_\_\_\_\_ is requested. Balance of payments will be made on a reimbursement basis. These funds are needed to pay staff, award benefits to clients, duplicate forms and purchase start-up supplies and equipment. We would not be able to operate the program without this advance.

**If you are requesting an advance, complete the following chart and line item justification below.**

**ESTIMATED EXPENSES**

| <b>BUDGET CATEGORY/LINE ITEMS<br/>(list applicable line items)</b> | <b>Fiscal Year 2021 Anticipated Expenditures for<br/>First Three Months of Contract</b> |
|--|---|
| <u>For example</u><br><b>ADMINISTRATIVE COSTS:</b>                 |   |
| <u>For example</u><br><b>PROGRAM EXPENSES:</b>                     |   |
| <b>TOTAL EXPENSES:</b>   |   |

**LINE ITEM JUSTIFICATION** (For each line item, provide a detailed justification explaining the need for the cash advance. The justification must include supporting documentation that clearly shows the advance will be expended within the first ninety (90) days of the contract term. Support documentation should include, but is not limited to the following: quotes for purchases, delivery timelines, salary and expense projections, etc. to provide the Division reasonable and necessary support that the advance will be expended within the first ninety (90) days of the contract term. Any advance funds not expended within the first ninety (90) days of the contract term shall be returned to the Division Cashier, 2555 Shumard Oak Boulevard, Tallahassee, Florida 32399, within thirty (30) days of receipt, along with any interest earned on the advance)

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***\*REQUESTS FOR ADVANCE PAYMENTS WILL BE CONSIDERED ON A CASE BY CASE BASIS\****

Signature of Recipient/Subcontractor's Authorized Official

Date: \_\_\_\_\_

\_\_\_\_\_  
Name and Title of Recipient/Subcontractor's Authorized Official



**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT C  
CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY  
EXCLUSION**

**Certification Regarding  
Debarment, Suspension, Ineligibility  
And Voluntary Exclusion**

**Subcontractor Covered Transactions**

- (1) The prospective subcontractor of the Recipient, \_\_\_\_\_, certifies, by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the Recipient's subcontractor is unable to certify to the above statement, the prospective subcontractor shall attach an explanation to this form.

SUBCONTRACTOR:

\_\_\_\_\_

By: \_\_\_\_\_

Signature

\_\_\_\_\_

Recipient's Name

\_\_\_\_\_

Name and Title

\_\_\_\_\_

Division Contract Number

\_\_\_\_\_

Street Address

\_\_\_\_\_

Project Number

City, State, Zip

Date

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT D  
WARRANTIES AND REPRESENTATIONS**

**Financial Management**

Recipient's financial management system must include the following:

- (1) Accurate, current, and complete disclosure of the financial results of this project or program.
- (2) Records that identify the source and use of funds for all activities. These records shall contain information pertaining to grant awards, authorizations, obligations, unobligated balances, assets, outlays, income, and interest.
- (3) Effective control over and accountability for all funds, property, and other assets. Recipient shall safeguard all assets and assure that they are used solely for authorized purposes.
- (4) Comparison of expenditures with budget amounts for each Request for Payment. Whenever appropriate, financial information should be related to performance and unit cost data.
- (5) Written procedures to determine whether costs are allowed and reasonable under the provisions of the applicable OMB cost principles and the terms and conditions of this Agreement.
- (6) Cost accounting records that are supported by backup documentation.

**Competition**

- (1) All procurement transactions shall be done in a manner to provide open and free competition.
- (2) Recipient shall be alert to conflicts of interest as well as noncompetitive practices among contractors that may restrict or eliminate competition or otherwise restrain trade. In order to ensure excellent contractor performance and eliminate unfair competitive advantage, contractors that develop or draft specifications, requirements, statements of work, invitations for bids and/or requests for proposals shall be excluded from competing for such procurements.
- (3) Awards shall be made to the bidder or offeror whose bid or offer is responsive to the solicitation and is most advantageous to the Recipient, considering the price, quality, and other factors.
- (4) Solicitations shall clearly set forth all requirements that the bidder or offeror must fulfill for the bid or offer to be evaluated by the Recipient. All bids or offers may be rejected when it is in the Recipient's interest to do so.

**Codes of Conduct**

Recipient warrants the following:

- (1) The Recipient shall maintain written standards of conduct governing the performance of its employees engaged in the award and administration of contracts.
- (2) No employee, officer, or agent shall participate in the selection, award, or administration of a contract supported by public grant funds if a real or apparent conflict of interest would be involved. Such a conflict would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated, has a financial or other interest in the firm selected for an award.
- (3) The officers, employees, and agents of the Recipient shall neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts.
- (4) The standards of conduct shall provide for disciplinary actions to be applied for violations of the standards by officers, employees, or agents of the Recipient.

**Business Hours**

The Recipient shall have its offices open for business, with the entrance door open to the public, and at least one employee on site, from (Monday) through (Friday), and from (times) ( 8:00 am ) to ( 5:00 pm ).

**Licensing and Permitting**

All subcontractors or employees hired by the Recipient shall have all current licenses and permits required for all the particular work for which they are hired by the Recipient.

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT E  
STATEMENT OF ASSURANCES**

The Recipient hereby assures and certifies compliance with all Federal statutes, regulations, policies, guidelines and requirements, including 2 C.F.R. Part 200; E.O. 12372 and Uniform Administrative Requirements for Grants and Cooperative Agreements 28 CFR, Part 66, Common rule, that govern the application, acceptance and use of Federal funds for this federally-assisted project. Also, the Applicant assures and certifies that:

16. It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of persons displaced as a result of Federal and federally assisted programs.
16. It will comply with provisions of Federal law which limit certain political activities of employees of a State or local unit of government whose principal employment is in connection with an activity financed in whole or in part by Federal grants (5 USC 1501, et. Seq.).
16. It will comply with the minimum wage and maximum hour's provisions of the Federal Fair Labor Standards Act.
16. It will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
5. It will give the sponsoring agency or the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
6. It will comply with all requirements imposed by the Federal sponsoring agency concerning special requirements of law, program requirements, and other administrative requirements.
7. It will ensure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the Federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.
8. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, Public Law 93-234, 87 Stat. 975, approved December 31, 1976, Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "Federal financial assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.
9. It will assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 470), Executive Order 11593, and the Archeological and Historical Preservation Act of 1966 (16 USC 569a-1 et seq.) by (a) consulting with the State Historic Preservation Officer on the conduct of Investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8)

by the activity, and notifying the Federal grantor agency of the existence of any such properties and by (b) complying with all requirements established by the Federal grantor agency to avoid or mitigate adverse effects upon such properties.

10. It will comply, and assure the compliance of all its Recipients and contractors, with the applicable provisions of Title I of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, the Juvenile Justice and Delinquency Prevention Act, or the Victims of Crime Act, as appropriate; the provisions of the current edition of the Office of Justice Programs Financial and Administrative Guide for Grants, M7100.1; and all other applicable Federal laws, orders, circulars, or regulations.

11. It will comply with the provisions of 28 CFR applicable to grants and cooperative agreements including Part 18, Administrative Review Procedure; Part 20, Criminal Justice Information Systems; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 23, Criminal Intelligence Systems Operating Policies; Part 30, Intergovernmental Review of Department of Justice Programs and Activities; Part 42, Nondiscrimination/Equal Employment Opportunity Policies and Procedures; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; and Federal laws or regulations applicable to Federal Assistance Programs.

12. It will comply, and all its contractors will comply, with the non-discrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 USC 3789(d), or Victims of Crime Act (as appropriate); Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title II of the Americans with Disabilities Act (ADA) (1990); Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, Subparts C,D,E, and G; and Department of Justice regulations on disability discrimination, 28 CFR Part 35 and Part 39.

13. In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the Grounds of race, color, religion, national origin, sex, or disability against a Recipient of funds, the Recipient will forward a copy of the finding to the Office for Civil Rights, Office of Justice Programs.

14. It will provide an Equal Employment Opportunity Program if required to maintain one, where the application is for \$500,000 or more.

15. It will comply with the provisions of the Coastal Barrier Resources Act (P.L. 97-348) dated October 19, 1982 (16 USC 3501 et seq.) which prohibits the expenditure of most new Federal funds within the units of the Coastal Barrier Resources System.

16. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS) As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620.

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT F  
STATE MUTUAL AID AGREEMENT INSTRUCTIONS**

**STATEWIDE MUTUAL AID AGREEMENT  
(SMAA) INFORMATION SHEET**

<https://www.floridadisaster.org/dem/response/logistics/>

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**Signing the Agreement:**

A copy of the SMAA with **original signature** should be submitted, or two if you need one signed by FDEM and returned for your records.

Counties should sign **PAGE 15** of the agreement.

Cities should sign **PAGE 16** of the agreement.

Educational Districts should sign **PAGE 17** of the agreement.

Community Colleges or State Universities should sign **PAGE 18** of the agreement.

Special Districts should sign **PAGE 19** of the agreement.

Authorities should sign **PAGE 20** of the agreement.

Native American Tribes should sign **PAGE 21** of the agreement.

Community Development Districts should sign **PAGE 22** of the agreement.

**REQUIRED Documentation to Accompany the Agreement:**

Minutes or Resolution from your governing board, which indicates the agreement was adopted or approved.

A Certificate of Liability Insurance or Resolution of Self Insurance.

A completed copy of Form C, **PAGE 23** of the agreement.

**FDEM Contact Information:**

Mutual Aid Branch Director & EMAC Coordinator  
Bureau of Response, Logistics Section  
[MutualAid@em.myflorida.com](mailto:MutualAid@em.myflorida.com)  
O: (850) 815-4222 M: (850) 901-8456

Florida Division of Emergency Management  
2555 Shumard Oak Blvd.  
Tallahassee, FL 32399-2100

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT F (1)  
STATE MUTUAL AID AGREEMENT LIST**

[illegible]

**Note: This SMAA list (Attachment F (1)) will be distributed in excel format to all Sub-Recipients at the time of the Agreement.**

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT G  
RESPONSE CAPABILITIES**

**Contacts** - The Recipient shall maintain current county emergency management and other contacts through the Division's SharePoint portal available at <https://portal.floridadisaster.org>.

From the Portal main page, click "County Links", then pulldown and select "Update County Contacts."

This information includes the following but not limited to:

- County Director and Alternate contacts
- State Mutual Aid Agreement contacts
- County Operations Section
- County Logistics Section
- County Planning Section

**WebEOC Site Identification** - The Recipient shall upload current Site Data to WebEOC available at <https://eoc.floridadisaster.org>. WebEOC site Identification data includes:

- Through the SERT County Emergency Sites Board via the State's WebEOC Instance or through your local instance if you are subscribed to this Board - location and attribute information of all pre-identified --
  - County Staging Areas (CSAs)
  - County Points of Distribution (PODs)

Attribute information shall include at a minimum: Site Name, Site Type, Site Address, Full Address with Latitude/Longitude in decimal degrees, Primary Contact (name, e-mail, and mobile phone) Secondary Contact (name, e-mail, and mobile phone), does the location have a loading dock, can the location accept 53ft trailers, if so, how many?. Site address shall be mapped by clicking on Map icon to verify address.

The following Site Information is optional:

- Picture attachment of Site.
- Comments regarding access, transportation routes or any planning information.

**SITE SUGGESTIONS:**

**County Staging Areas (CSAs)**

- Sites should be located adjacent to a major highway and have the ability to establish safe one-way traffic through the compound and reasonably secured. County Staging Areas must also be located in a region that can support countywide relief operations.
- For coastal counties, sites should not be located in a "Zone A" Evacuation Zone where possible, exceptions can be made.

**County Point of Distribution (PODs)**

- PODs should not be nearby a business that has water and food for sale.
- Counties should focus on placing PODS in outlying areas where these types of stores are not located in-order to ensure that resources are available in those areas.
- For coastal counties, sites should not be located in a "Zone A" Evacuation Zone where possible, exceptions can be made.



**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT H  
HURRICANE SHELTER RETROFIT**

**Hurricane Shelter Retrofit** - The responses collected in this task are the basis for the Shelter Retrofit Report as required by 252.38 F.S. Each county's current Shelter Inventory Spreadsheet is available on Web EOC for reference and is found on the board titled SESP Inventory.

1. Please review your County's page on the SESP Inventory WebEOC board.
  - a. Please review all the information and check your pet friendly shelter column for accuracy.
  - b. If corrections are needed please type them in the notes box, below, on the WebEOC page itself. If no changes are needed, please add the date reviewed in the notes box. (e.g. Reviewed 3/31/2022).
2. Please review the generator information on each of your SESP inventory shelters. Correct the information or complete it, as necessary. You do not need to include life safety items run by battery backup.
3. Do you know of any new public buildings planned or under construction? (If so, please list).
4. Are new public schools planned or under construction? Will any be EHPA? If not, do you anticipate providing a waiver? (If so, please list anticipated new schools and EHPA status and any opening dates if known).
5. Do you have any public schools or public buildings that you would like surveyed to add to your shelter inventory or to the Retrofit Report for potential funding? (If so, please list).
6. Do you have enough special needs space now and for the next 5 years? (If not, please comment here or upload your plan).
7. Do your special needs shelters have an alternate source for power? Will the power source also run cooling? (If not, please comment here or upload your plan).
8. How do you communicate and coordinate with your school boards, state colleges, universities and shelter partners? When was the last time you reviewed your shelter plan and policy with your shelter partners?

**FY 2020 – 2021 EMPA AGREEMENT  
ATTACHMENT I  
RECOVERY CAPABILITIES**

The following recommendations should be considered when identifying potential Disaster Recovery Center (DRC) locations:

1. Locations must be large enough for the needs of the situation (number of agencies and clients anticipated in the DRC). This may vary from a location identified as small as 1500 square feet for a small DRC to more than 5000 square feet for a large DRC. It is good to identify a variety of possible locations of different sizes within the county. The size of a DRC will vary dependent upon the number of anticipated applicants to be served within the community.

| DRC Size Chart |                   |
|----------------|-------------------|
| Small:         | 1500-3499 sq. ft. |
| Medium:        | 3500-4999 sq. ft  |
| Large:         | 5000 sq. ft-Above |

2. Consider locations that do not require a fee to use the facility and FEMA generally only pays for utilities or phone line installation. If a written agreement is made prior to occupancy, then FEMA will take responsibility for the utilities or other payments to a facility.
3. Facilities should have heat, electricity, good lighting, potable water, rest rooms, and adequate parking.
4. All locations should be compliant with the Americans with Disabilities Act of 1990, to ensure access to all individuals, including individuals with disabilities and others with access and functional needs.
5. Appropriate emergency fire & medical support should be quickly available to the location.
6. Preferably when a DRC is established, the first seven (7) days should be without interruption from prior commitments (e.g. basketball games, weddings, parties, meetings, etc.). It is also important to understand that a DRC may need to remain operational for a minimum of thirty (30) days or longer.
7. The location's owner must be willing to allow FEMA to install telephone lines and/or internet service if necessary.
8. Facilities should be available from 7:30am-7:00pm daily, Monday through Saturday, and possibly on Sundays and holidays.

**ADDITIONAL CONSIDERATIONS**

1. When possible, DRC facilities should be centrally located in a community to minimize travel time. Consideration must be given to the most vulnerable population. Where applicable, DRCs should be established on a public transportation route. The public should generally be familiar with the location and Custodial support should be available at the facility.
2. If necessary, the parking lot should be able to temporarily accommodate a Mobile Communication Office Vehicle (MCOV) (60'long x 20'wide) with an unobstructed view of the south-western sky for satellite connectivity.
3. Does the occupancy of the facility have any Environmental Planning and Historic Preservation (EPH) considerations that need to be addressed? (e.g. special flood hazard area, Historical site, etc.)

## **DISASTER RECOVERY CENTER BASIC REQUIREMENTS**

### **PHYSICAL LOCATION:**

Name: Richardson Community Center  
Physical Address (no PO Box): 255 NE Coach Anders Lane  
City: Lake City County: Columbia State: FL Zip: 32055  
GPS: LAT 30 12'04.9 N LONG 82 38'05.9W  
Directions/Landmarks: From I-75 exit 427 turn East on US Hwy 90. Follow US 90 through town until you come to the US 441 (Marion Street) Red Light. Turn Left (North) you will pass in front of Courthouse and Annex. Turn right on Coach Anders Lane and follow to the facility. If you reach the red light at Bascom Norris Drive and N. Marion Avenue you have gone too far.

### **CONTACT PERSONS (POC):**

Facility Point Of Contact: Name Mario Coppock  
Phone: (386) 344-0534  
Address: 686 NW Long Street  
City: Lake City State: FL Zip: 32055

After hours POC: Name Same as Facility Contact  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Alternative POC: Name Harold Perry  
Phone: (386) 697-3364  
Address: 184 NW Basom Norris Drive  
City: Lake City State: FL Zip: 32055

Emergency Management Director: Name Shayne Morgan  
Phone: (386) 623-2248  
Address: 263 NW Lake City Avenue  
City: Lake City State: FL Zip: 32055

### **SITE CHARACTERISTICS:**

Date available: Begin: 24 hours after begin End: TFN Lease required: Y ☐ N ☒  
Cost \$ \_\_\_\_\_ Space available: \_\_\_\_\_ sq. ft. Hours of use: 6a - 8p Keys: \_\_\_\_\_  
DRC use parking spaces: 20 ADA parking spaces: 4 Total: 24  
Parking lot lights: Y ☐ N ☒ Outside building lights: Y ☐ N ☒

ADA accessibility: Yes  
Exterior notes: Exterior Kitchen; Exterior Class Rooms  
Response Time: Police: 5 minutes Fire: 5 minutes  
Nearest hospital: Name Lake City Medical Center Phone: (386) 719-9000  
Address: 340 NW Commerce Drive, Lake City, FL  
Distance: 5 miles west Time: 10 minutes  
Local crime summary: \_\_\_\_\_

Local hazards summary: Severe Weather; Sub-standard housing

**INTERIOR:**

# Rooms: \_\_\_\_ Room Size: Room A \_\_\_\_ x \_\_\_\_ Room B \_\_\_\_ x \_\_\_\_ Room C \_\_\_\_ x \_\_\_\_

# Bathrooms: 8 ADA Compliant: Y ☒ N ☐

Are doors secure?: Y ☒ N ☐ Comment: \_\_\_\_\_

Are windows secure?: Y ☒ N ☐ Comment: \_\_\_\_\_

Are Emergency lighting functional?: Y ☒ N ☐ Exit lighting functional: Y ☒ N ☐

Are Fire sprinkler system functional?: Y ☒ N ☐ #Fire extinguishers: \_\_\_\_\_

Water System: Y ☒ N ☐ City/County System: Y ☒ N ☐ Approved for drinking: Y ☒ N ☐

Air Conditioning: Y ☒ N ☐ Fans: Y ☐ N ☐ Adequate Ventilation: Y ☒ N ☐

Is electrical power to support computer and office equipment demanded? Y ☒ N ☐

Can inside re-wiring be accomplished easily and safely? Y ☐ N ☒

Is building interior in good shape (check for water leaks & visible hazards)? Y ☒ N ☐

**OFFICE CHARACTERISTICS:**

Internet access: Y ☒ N ☐ Wi-Fi: Y ☒ N ☐ # Fax: \_\_\_\_\_ # Toner Cartridges: \_\_\_\_\_

Flatbed Tabletop Copier: Y ☒ N ☐ Copy Paper \_\_\_\_\_ Boxes # Toner Cartridges: \_\_\_\_\_

High Speed Printer: Y ☐ N ☐ Shredder: Y ☐ N ☐

# Trash Cans: \_\_\_\_\_ Is Janitorial & Trash pickup available? Y ☒ N ☐

# Tables: \_\_\_\_\_ #Office chairs: \_\_\_\_\_ # Folding chairs: \_\_\_\_\_ Bathroom access: Y ☒ N ☐

# Paper towels: \_\_\_\_\_ # Toilet paper: \_\_\_\_\_ # Paper cups: \_\_\_\_\_ # Ext. cords: \_\_\_\_\_

Comment: \_\_\_\_\_

**TELEPHONE AND/OR COMMUNICATION:**

FEMA cell phone signal? Y ☐ N ☐ Strength: \_\_\_\_\_ Air Card? Y ☐ N ☐ Strength: \_\_\_\_\_

Do phone lines already exist for DRC use? Y ☐ N ☐ How many? \_\_\_\_\_

What is maximum phone line capacity? DSL: \_\_\_\_\_ POTS: \_\_\_\_\_ Switchboard: Y ☐ N ☐

Phone service point in building: \_\_\_\_\_

Phone service provider: \_\_\_\_\_ Contact number: \_\_\_\_\_

Phone number connected to DRC location (for tel/com reference): \_\_\_\_\_

Comments: \_\_\_\_\_

**SKETCHES:**

Draw location sketches: (1) Exterior: building, ADA parking & ramps, DRC, parking (2) Interior: building, rooms w/dimensions, location of outlets and telephone equipment.

## FY 2021 – 2022 EMPA AGREEMENT ATTACHMENT J-REPORTING FORMS

| FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br>EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT PROGRAM<br>2021-2022 EMPA REPORTING FORMS  |  |
|---|--|
| <b>2021-2022 QUARTERLY REPORTING FORMS</b>  |  |
| <b>QUARTERLY REPORTS INCLUDE: Division Form 1A - Quarterly Financial Report, Division Form 1B - Quarterly Tasks, Division Forms 2A &amp; 2B Detail of Claims and Division Form 6 - Time and Effort (if applicable).</b> |  |
| 1.  | These forms are to be submitted to Division each quarter.  |
| 2.  | Complete Division Form 1A - Quarterly Financial Report by entering all information needed to support the claim for reimbursement, sign and date. Include a narrative in the box. Outlines of quarterly events, nor calendars will suffice for the required narrative.  |
| 3.  | Complete Division Form 1B - Quarterly Tasks to support that deliverables and tasks are being completed as required throughout the agreement, sign and date.  |
| 4.  | The Division Form 1A - Quarterly Financial Report form must be signed by the grant manager or someone with equal authority.  |
| 5.  | The Division Form 2A & 2B Detail of Claims forms <u>must</u> accompany the Division Form 1A - Quarterly Financial Report each quarter.   |
| 6.  | Deliverables and Claims for reimbursement may be submitted via Salesforce or by email to the appropriate Division Grant Manager according to applicable region.  |
| FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br>2555 SHUMARD OAK BOULEVARD<br>TALLAHASSEE, FLORIDA 32399-2100<br>Attn: (Division Grant Manager)   |  |
| 7.  | It is the responsibility of the Recipient to properly notify the assigned Division Grant Manager when they upload required documentation to Salesforce or required platform. The Division is not responsible for delays to claim processing due to failure to notify the Division Grant Manager of document submissions via Salesforce.  |
| <b>DIVISION Form 3 - Local Budget Match:</b>  |  |
| 1.  | The Division Form 3 - Local Budget Match must be submitted to the Division in Quarter 2 submission.  |
| 2.  | EMPA grants shall be matched at an amount equal to the average of the last three years' level of county general revenue funding of the County Emergency Management Agency or the level of funding for the County Emergency Management Agency for the last fiscal year, whichever figure is lower.  |
| 3.  | Division Form 3 - Local Budget Match Requirement shall be submitted to the Division when the local county budget is approved or by <b>November 15, 2021</b> . The County shall provide a copy of the current Emergency Management Local Budget (General Revenue) including approved budget date. If a Recipient's county's current local budget is lower than the previous year, or the average of the last three previous years, the recipient shall request a Waiver no later than 45 days after the county budget is approved.  |
| <b>DIVISION Form 4 - Staffing Detail:</b>   |  |
| 1.  | List ALL Emergency Management Agency staff, regardless of funding. Provide a total anticipated annual amount of Salaries and Benefits to be paid for each position. Provide the funding distribution amount or % in each applicable column: local, state, federal, etc. This form is due no later than <b>November 15, 2021</b> or along with 1st quarter reimbursement submission, whichever occurs first. Please provide the Division updates to this form as necessary.   |
| 2.  | Along with Division Form 4 - Staffing Detail, please provide position descriptions for EMPA funded staff.  |
| 3.  | Along with the Division Form 4- Staffing Detail, please provide documented policies for any fringe benefits, incentives or special pay to be claimed through the grant.  |
| <b>DIVISION Form 5 - Close Out Report:</b>  |  |
| 1.  | The Division Form 5 - Close Out Report is due sixty (60) days after termination of this Agreement by <b>August 30, 2022</b> , or 60 days after completion of activities contained in this agreement, whichever occurs first. Before submitting the Division Form 5 - Close Out Report, please verify that the local general revenue budget match amount as reported on Division Form 3 - Local Budget Match, has not changed since originally reported to the Division. If a difference is found please immediately notify the Division in writing of the discrepancy and provide a detailed justification for the change accompanied by supporting documentation. |
| 2.  | The agreement cannot be considered closed until the Division Form 5 - Close Out Report has been received and approved by the Division.   |
| <b>DIVISION Form 6 - Time and Attendance:</b>   |  |
| 1.  | Provide copies of certified timesheets with employee and supervisor signature documenting hours worked or Division Form 6 - Time and Effort. The form must account for 100% of the hours claimed for reimbursement each quarter. <input type="checkbox"/>  |
| <b>Required documentation to support project expenditures:</b>  |  |
| 1.  | Recipients shall maintain a grant/financial file with copies of supporting documentation for all paid project/program expenditures claimed during the grant period. Documentation of expenditures claimed for reimbursement through the grant will be reviewed and verified by Division staff. Acceptable documentation includes copies of purchase orders and paid vouchers, paid invoices or cancelled checks, timesheets and payroll vouchers, journal transfers, credit card and bank statements, etc. These documents should be submitted when requesting reimbursement. <input type="checkbox"/>   |
| 2.  | All claims for reimbursement shall be submitted on the approved Division Quarterly Financial Reporting forms. Claims not submitted on the proper forms or that are unsupported by proper documentation will not be processed and will be returned for additional support. <input type="checkbox"/>   |
| 3.  | Please ensure that the documentation submitted for review is legible.  |
| 4.  | Please verify form calculations for accuracy before submitting to the Division for review each quarter. <input type="checkbox"/>   |

| <b>FLORIDA DIVISION OF EMERGENCY MANAGEMENT</b>   |               |                          |          |          |  |                                     |                           |                   |  |
|---|---------------|--------------------------|----------|----------|--|-------------------------------------|---------------------------|-------------------|--|
| <b>2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE - EMPA</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| <b>DIVISION FORM 1A - QUARTERLY FINANCIAL REPORT</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| <b>AGREEMENT #:</b>   |               |                          |          |          | <b>CLAIM #:</b>  | <b>1</b>                            |                           |                   |  |
| <b>AWARD AMOUNT:</b>  |               |                          |          |          | <b>QUARTER #:</b>  | <b>1</b>                            |                           |                   |  |
| <b>RECIPIENT:</b>   |               |                          |          |          | <b>REPORTING FORMS DUE DATES (45 DAYS AFTER QUARTER)</b><br>1. July 1 – Sept. 30, 2021 = November 15, 2021<br>2. October 1 – Dec. 31, 2021 = February 15, 2022<br>3. January 1 – March 31, 2022 = May 15, 2022<br>4. April 1 - June 30, 2022 = August 15, 2022 |                                     |                           |                   |  |
| <b>COUNTY:</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| <b>ADDRESS:</b>   |               |                          |          |          |  |                                     |                           |                   |  |
| <b>POINT OF CONTACT:</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| <b>PHONE/EMAIL:</b>   | 123@gmail.com |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
| EMPA ALLOCATION CATEGORIES  |               | BUDGETED ALLOCATIONS     | Q1 CLAIM | Q2 CLAIM | Q3 CLAIM   | Q4 CLAIM                            | CUMULATIVE EXPENDED FUNDS | REMAINING BALANCE |  |
| 1. PLANNING   |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| 2. ORGANIZATION   |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| 3. EQUIPMENT  |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| 4. TRAINING   |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| 5. EXERCISE   |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| 6. MANAGEMENT AND ADMIN. (Up to 5%)   |               | \$0.00                   |          |          |  |                                     | \$0.00                    | \$0.00            |  |
| <b>TOTAL</b>  |               | \$0.00                   | \$0.00   | \$0.00   | \$0.00   | \$0.00                              | \$0.00                    | \$0.00            |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
| <b>AMOUNT OF REIMBURSEMENT FOR THIS CLAIM:</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the conditions of the 2021-2022 EMPA agreement. |               |                          |          |          |  |                                     |                           |                   |  |
| <b>SIGNATURE:</b>   |               |                          |          |          |  |                                     |                           |                   |  |
| AUTHORIZED REPRESENTATIVE   |               |                          |          |          | DATE   |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
| <b>QUARTERLY STATUS REPORT</b>  |               |                          |          |          |  |                                     |                           |                   |  |
| Please report EM activities, meetings, training, exercises, or other necessary information to support quarterly progression.  |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
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|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
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|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               |                          |          |          |  |                                     |                           |                   |  |
| <b>THE SECTION BELOW IS TO BE COMPLETED BY DIVISION</b>   |               |                          |          |          |  |                                     |                           |                   |  |
|   |               | <b>AWARD AMOUNT</b>      |          |          |  | <b>DIVISION DATE RECEIVED STAMP</b> |                           |                   |  |
|   |               | <b>PRIOR CLAIMS</b>      |          |          |  |                                     |                           |                   |  |
|   |               | <b>THIS CLAIM AMOUNT</b> |          |          |  |                                     |                           |                   |  |
|   |               | <b>BALANCE OF AWARD</b>  |          |          |  |                                     |                           |                   |  |

# FY 2021 – 2022 EMPA AGREEMENT ATTACHMENT J-REPORTING FORMS

| FLORIDA DIVISION OF EMERGENCY MANAGEMENT                                |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|---|--|-------------------|-------|-------|-------|-------------|-------|-------|-------|-------------|-------|-------|-------|-------------|-------|-------|-------|--------------------------------------|-------|-------|-------|-------|-------|---|-------|-------|-------|-------|-------|
| 2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
| DIVISION FORM 1B - QUARTERLY TASKS                                      |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
| RECIPIENT:  |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
| QUARTER:  |  | July 1 - Sept. 30 |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
| Emergency Management Personnel  |  | NIMS IS 100       |       |       |       | NIMS IS 200 |       |       |       | NIMS IS 700 |       |       |       | NIMS IS 800 |       |       |       | FEMA Professional Development Series |       |       |       | OR    |       | National Emergency Management Basic Academy |       |       |       |       |       |
| EM Employee Name & Position Title                                       |  | QTR 1             | QTR 2 | QTR 3 | QTR 4 | QTR 1       | QTR 2 | QTR 3 | QTR 4 | QTR 1       | QTR 2 | QTR 3 | QTR 4 | QTR 1       | QTR 2 | QTR 3 | QTR 4 | QTR 1                                | QTR 2 | QTR 3 | QTR 4 | QTR 1 | QTR 2 | QTR 3                                       | QTR 4 | QTR 1 | QTR 2 | QTR 3 | QTR 4 |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |
|   |  |                   |       |       |       |             |       |       |       |             |       |       |       |             |       |       |       |                                      |       |       |       |       |       |   |       |       |       |       |       |



# FY 2021 – 2022 EMPA AGREEMENT ATTACHMENT J-REPORTING FORMS

| FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br>2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA<br>DIVISION FORM 2A - DETAIL OF CLAIMS  |                      |                                   |   |   |                 |   |
|---|----------------------|-----------------------------------|---|---|-----------------|---|
| RECIPIENT:  |                      |                                   | INCURRED DATE RANGE: Example: July 1 through November 5, 2021 |   |                 |   |
| Please use separate Division Form 2A-Detail of Claims per allocation category. Please add additional pages or lines as needed for each allocation category.<br>Please provide FEMA AEL numbers for EQUIPMENT expenditures only.<br>Please provide a budget revision along with this form, if expenses being claimed are not allocated on the most recently approved budget.<br>Please include the Costs Incurred Date Range in the applicable cell above. This is usually the quarterly period; however, a recipient may incorporate a larger date range to include a forgotten claim for reimbursement for a payment made the previous quarter (within the period of agreement). This allowance does not circumvent the four (4) required quarterly reporting forms submissions. |                      |                                   |   |   |                 |   |
| ALLOCATION CATEGORIES   |                      |                                   |   |   |                 |   |
| PLEASE SELECT FROM THE LIST BELOW   |                      |                                   |   |   |                 |   |
| CATEGORY:   |                      |                                   | ORGANIZATION  |   |                 |   |
| #   | VENDOR               | DESCRIPTION OF SERVICE OR EXPENSE | DATE OF PAYMENT FOR SERVICE OR EXPENSE<br>(Include full date) | PAYMENT REFERENCE<br>(CHECK#, PO#, JT#, etc.) | PURCHASE AMOUNT | Equipment FEMA AEL#<br>(N/A if equipment was not purchased) |
| 1   | Ex: Electric Company | Monthly Utilities for July 2021   | 8/5/21  | CK# 1001                                      | \$ 300.00       | N/A   |
| 2   |                      |                                   |   |   |                 |   |
| 3   |                      |                                   |   |   |                 |   |
| 4   |                      |                                   |   |   |                 |   |
| 5   |                      |                                   |   |   |                 |   |
| 6   |                      |                                   |   |   |                 |   |
| 7   |                      |                                   |   |   |                 |   |
| 8   |                      |                                   |   |   |                 |   |
| 9   |                      |                                   |   |   |                 |   |
| 10  |                      |                                   |   |   |                 |   |
| 11  |                      |                                   |   |   |                 |   |
| 12  |                      |                                   |   |   |                 |   |
| 13  |                      |                                   |   |   |                 |   |
| 14  |                      |                                   |   |   |                 |   |
| 15  |                      |                                   |   |   |                 |   |
| 16  |                      |                                   |   |   |                 |   |
| 17  |                      |                                   |   |   |                 |   |
| 18  |                      |                                   |   |   |                 |   |
| 19  |                      |                                   |   |   |                 |   |
| 20  |                      |                                   |   |   |                 |   |
| 21  |                      |                                   |   |   |                 |   |
| 22  |                      |                                   |   |   |                 |   |
| 23  |                      |                                   |   |   |                 |   |
| 24  |                      |                                   |   |   |                 |   |
| 25  |                      |                                   |   |   |                 |   |
| TOTAL   |                      |                                   |   |   | \$ 300.00       |   |
| By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the conditions of the 2021-2022 EMPA agreement.   |                      |                                   |   |   |                 |   |
| SIGNATURE:  |                      |                                   |   |   |                 |   |
| PRINTED NAME:   |                      |                                   | AUTHORIZED REPRESENTATIVE                                     |   |                 |   |
| TITLE:  |                      |                                   |   |   |                 |   |
| DATE:   |                      |                                   |   |   |                 |   |

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT J-REPORTING FORMS**

| <b>FLORIDA DIVISION OF EMERGENCY MANAGEMENT</b><br><b>2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA</b><br><b>DIVISION FORM 2B - DETAIL OF CLAIMS</b><br><b>SALARIES AND BENEFITS COSTS</b>  |                  |                                  |                        |                    |                    |
|--|------------------|----------------------------------|------------------------|--------------------|--------------------|
| <b>SALARY DEFINITION:</b> The cash compensation for services rendered by a regular employee in an established position for a specific period of time.  |                  |                                  |                        |                    |                    |
| <b>RECIPIENT:</b>  |                  | Florida County                   | <b>CLAIM #:</b>        |                    |                    |
| <b>DOES THIS CLAIM FOR REIMBURSEMENT INCLUDE ANY INCENTIVES OR SPECIAL PAY?</b>  |                  |                                  |                        |                    |                    |
| Note: If this claim includes incentives or special pay, please provide the Division with the written established policy for support  |                  |                                  |                        |                    |                    |
| EM   | EM EMPLOYEE NAME | EM POSITION TITLE                | % TIME CHARGED TO EMPA | SALARY             | FRINGE BENEFITS    |
| 1  | Ex: Jane Doe     | EM Planner                       | 50%                    | \$ 5,000.00        | \$ 1,200.00        |
| 2  |                  |                                  |                        |                    |                    |
| 3  |                  |                                  |                        |                    |                    |
| 4  |                  |                                  |                        |                    |                    |
| 5  |                  |                                  |                        |                    |                    |
| 6  |                  |                                  |                        |                    |                    |
| 7  |                  |                                  |                        |                    |                    |
| 8  |                  |                                  |                        |                    |                    |
| 9  |                  |                                  |                        |                    |                    |
| 10   |                  |                                  |                        |                    |                    |
| 11   |                  |                                  |                        |                    |                    |
| 12   |                  |                                  |                        |                    |                    |
| 13   |                  |                                  |                        |                    |                    |
| 14   |                  |                                  |                        |                    |                    |
| 15   |                  |                                  |                        |                    |                    |
| 16   |                  |                                  |                        |                    |                    |
| 17   |                  |                                  |                        |                    |                    |
| 18   |                  |                                  |                        |                    |                    |
| 19   |                  |                                  |                        |                    |                    |
| 20   |                  |                                  |                        |                    |                    |
| <b>TOTALS</b>  |                  |                                  |                        | <b>\$ 5,000.00</b> | <b>\$ 1,200.00</b> |
|  |                  |                                  |                        | <b>TOTAL</b>       | <b>\$ 6,200.00</b> |
| <i>By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the conditions of the 2021-2022 EMPA agreement.</i> |                  |                                  |                        |                    |                    |
| <b>SIGNATURE:</b>  |                  |                                  |                        |                    |                    |
|  |                  | <b>AUTHORIZED REPRESENTATIVE</b> |                        |                    |                    |
| <b>PRINTED NAME:</b>   |                  |                                  |                        |                    |                    |
| <b>TITLE:</b>  |                  |                                  |                        |                    |                    |
| <b>DATE:</b>   |                  |                                  |                        |                    |                    |

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT J-REPORTING FORMS**

| <b>FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br/>2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA<br/>LOCAL BUDGET MATCH REQUIREMENT<br/>DIVISION FORM 3 - LOCAL BUDGET MATCH</b>   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|--|------------------------------|--------------------------------------|--|
|   | 2021-2022<br>LOCAL    | 2020-2021<br>LOCAL    | 2019-2020<br>LOCAL    | 2018-2019<br>LOCAL    | AVERAGE<br>(PREVIOUS 3<br>YEARS) | LOWEST<br>AVERAGE VS<br>PREVIOUS<br>YEAR | %<br>2020-2021 VS<br>AVERAGE | \$ CHANGE<br>2020-2021 VS<br>AVERAGE | \$ CHANGE<br>2020-2021 VS<br>2019-2020 |
| RECIPIENT   | (10/1/21-<br>9/30/22) | (10/1/20-<br>9/30/21) | (10/1/19-<br>9/30/20) | (10/1/18-<br>9/30/19) |                                  |  |                              |                                      |  |
| Florida County  | \$100,000             | \$95,000              | \$90,000              | \$85,000              | \$90,000                         | AVERAGE                                  | 10%                          | \$10,000                             | \$5,000                                |
| This form is to be completed and sent when the Local County Budget is approved or by the end of the first quarter. Required with this form the recipient shall provide a copy of the current Emergency Management Local Budget (General Revenue) with the approved buget date. If the Recipient's county's current budget is lower than the last year or the average of the last three previous years, the county is required to request a waiver from the Division no later than forty-five (45) days after the county budget is approved.   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| <b>RULE 27P-19, FLORIDA ADMINISTRATIVE CODE</b>   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| (1) Base Grants shall be matched at an amount either equal to the average of the previous three years' level of county general revenue funding of the County Emergency Management Agency or the level of funding for the County Emergency Management Agency for the last fiscal year, whichever figure is lower. County general revenue funding for 911 services, emergency medical services, law enforcement, criminal justice, public works or other services outside the emergency management responsibilities assigned to the County Emergency Management Agency by Section 252.38, F.S., shall not be included in determining the "level of county funding of the County Emergency Management Agency." Each county shall certify compliance with this rule chapter and this rule, as a condition precedent to receipt of funding.  |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| (2) If the Base Grant recipient demonstrates that exceptional financial circumstances prevent the Base Grant recipient from complying with the match requirements in subsection 27P-19.011(1), F.A.C., then the Base Grant recipient may request that the Division authorize a reduction in the amount of match required. The match required shall not be reduced by a percentage amount in excess of reductions in funding for county 911 services, emergency medical services, law enforcement, criminal justice, public works or other emergency management related services. To be eligible for any reduction, the Base Grant recipient shall demonstrate and certify that the reduction is due to reductions in county general revenue funding and that the amount of the requested reduction is equivalent to across the board reductions in all county budgets. County requests for reduction shall be signed by the county's chief elected officer and the certification of reduction in county budget funding shall be signed by the county's chief financial officer. Requests shall certify the intent to return to pre-reduced funding as soon as practicable, and shall provide an estimate of the date at which the county will return to the current level of funding. Requests for reduction shall also be accompanied by financial data for the previous three years indicating: the level of county funding for the County Emergency Management Agency budget; budget detail regarding all individual items of the County Emergency Management Agency budget; and the proposed level of funding, for all budget items, if the reduction is authorized by the Division. All requests for match reduction shall be submitted no later than forty-five (45) days after the county budget has been approved or by the first quarter by the governing body of the jurisdiction, or the opportunity to request shall be waived. |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| <b>REQUIRED CERTIFICATION BY AUTHORIZED REPESENTATIVE</b>   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| I, _____, certify that the above match requirements have been met in accordance with the 2021-2022 EMPA Agreement and Rule 27P-19, Florida Administrative Code.   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| I, _____, certify that _____<br>(RECIPIENT'S COUNTY), will not meet the match requirement. Attached is the request for waiver.  |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| <b>PRINTED NAME:</b> _____  |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| <b>TITLE:</b> _____   |                       |                       |                       |                       |                                  |  |                              |                                      |  |
| <b>DATE:</b> _____  |                       |                       |                       |                       |                                  |  |                              |                                      |  |

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT J-REPORTING FORMS**

**FLORIDA DIVISION OF EMERGENCY MANAGEMENT  
2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA  
DIVISION FORM 4 - STAFFING DETAIL  
COUNTY EMERGENCY MANAGEMENT AGENCY  
ANTICIPATED SALARIES & BENEFITS**

| <b>SUB-RECIPIENT:</b>  |   | FL COUNTY  |  | <b>POINT OF CONTACT:</b>             |                            | Jane Doe, Planner                |                                   | <b>PHONE/EMAIL:</b>                |                                     | 123-123-1234                          |  |                           |
|--|---|--|--|--------------------------------------|----------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------------|---------------------------------------|--|---------------------------|
| EMPLOYEE INFORMATION   |   |  |  | LOCAL                                |                            | STATE AND FEDERAL                |                                   |                                    |                                     |                                       |  |                           |
| #  | Employee Name, Position Title & Area of Responsibility<br>(Preparedness, Response, Recovery, Mitigation & Finance)<br>[1] | Approx. # of Hrs. per week Devoted to EM activities<br>[2] | Annual Total Salaries & Benefits \$ by Position<br>[3] | % County General Fund (Local)<br>[4] | % Other Local Funds<br>[5] | % EMPA Base Grant (State)<br>[6] | \$ EMPA Base Grant (State)<br>[7] | % EMPG Base Grant (Federal)<br>[8] | \$ EMPG Base Grant (Federal)<br>[9] | % HMGP Planning Grant (State)<br>[10] | % Other State or Federal Funds<br>[11] | % Total All Funds<br>[12] |
| 1  | Ex. Jane Doe, Director, ALL   | 40   | \$ 60,000.00   |                                      |                            | 50%                              | \$30,000.00                       | 50%                                | \$30,000.00                         |                                       |  | 100%                      |
| 2  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 3  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 4  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 5  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 6  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 7  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 8  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 9  |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 10   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 11   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 12   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 13   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 14   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 15   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 16   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 17   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 18   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 19   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| 20   |   |  |  |                                      |                            |                                  | \$ -                              |                                    | \$0.00                              |                                       |  | 0%                        |
| <b>TOTAL</b>   |   |  |  |                                      |                            |                                  | <b>\$30,000.00</b>                |                                    | <b>\$30,000.00</b>                  |                                       |  |                           |
| <b>DIRECTIONS:</b>   |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 1. In Column #1, list the name, position title and area of responsibility(s) for all Emergency Management staff, regardless if paid through grant funding.     |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 2. In Column #2, enter the amount of anticipated hours worked per week for grant related activities for each EM position.                                      |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 3. In Column #3, list total anticipated annual amount of Salaries and Benefits to be paid for each EM position.  |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 4. In Columns #4-11, provide the funding distribution (% or \$) in each applicable column.   |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 5. Column #12 calculates the sum of percentages entered in Columns 4 - 11 and must equal 100% of the anticipated annual salaries and benefits per EM position. |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 6. Please provide to the Division updates or revisions to this form throughout the period of the agreement, as necessary.                                      |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |
| 7. This form is to be submitted to the Division along with the 1st Quarter submission, or by November 15, 2021, whichever occurs first.                        |   |  |  |                                      |                            |                                  |                                   |                                    |                                     |                                       |  |                           |

**FY 2021 – 2022 EMPA AGREEMENT  
ATTACHMENT J-REPORTING FORMS**

| FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br>2021-2022 EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE GRANT - EMPA<br>DIVISION FORM 5-CLOSE-OUT REPORT  |                    |                                |  |                    |                                   |   |
|--|--------------------|--------------------------------|--|--------------------|-----------------------------------|---|
| DIVISION FORM 5 - CLOSEOUT REPORT shall be completed and submitted to the Division no later than sixty (60) days after the termination date of the agreement. The 2021-2022 period of agreement ends on June 30, 2022. DIVISION Form 5 is due by August 30, 2022.  |                    |                                |  |                    |                                   |   |
| RECIPIENT:   |                    |                                | AGREEMENT#:  |                    |                                   |   |
| POINT OF CONTACT:  |                    |                                | EMPA AWARD AMOUNT:   |                    |                                   |   |
| PHONE/EMAIL:   |                    |                                | UNCLAIMED BALANCE:   |                    |                                   |   |
|  |                    |                                | REIMBURSEMENTS RECEIVED BY THE RECIPIENT<br>(Include any advanced funds and final requested payment) |                    |                                   |   |
| ALLOCATION CATEGORIES  |                    | ALLOCATIONS                    |  | DATE               | AMOUNT                            |   |
| 1. PLANNING  |                    | \$ -                           |  |                    | \$ -                              |   |
| 2. ORGANIZATION  |                    |                                |  |                    |                                   |   |
| 3. TRAINING  |                    |                                |  |                    |                                   |   |
| 4. EXERCISE  |                    |                                |  |                    |                                   |   |
| 5. EQUIPMENT   |                    |                                |  |                    |                                   |   |
| 6. MANAGEMENT AND ADMIN.   |                    |                                |  |                    |                                   |   |
| \$   |                    | -                              |  | \$                 | -                                 |   |
| AWARD AMOUNT: \$   |                    |                                | -  |                    |                                   |   |
| (LESS ADVANCED FUNDS)  |                    |                                |  |                    |                                   |   |
| (LESS REIMBURSEMENTS) \$   |                    |                                | -  |                    |                                   |   |
| UNCLAIMED BALANCE OF AWARD \$  |                    |                                | -  |                    |                                   |   |
| In accordance with Rule 27P-19.011, Florida Administrative Code, base grants shall be matched at an amount either equal to the average of the previous three years' level of county general revenue funding of the County Emergency Management Agency or the level of funding for the County Emergency Management Agency for the last fiscal year, whichever is lower. Required with this form, the county needs to provide a copy of the current EM local budget (general revenue) and general ledger expenditure report as of 6/30/2022. |                    |                                |  |                    |                                   |   |
| RECIPIENT  | 2021-2022<br>LOCAL | 2020-2021<br>LOCAL             | 2019-2020<br>LOCAL   | 2018-2019<br>LOCAL | AVERAGE OF<br>PREVIOUS<br>3 YEARS | 2021-2022 EM LOCAL<br>GENERAL REVENUE<br>EXPENDITURES |
| Exmple: FL County  |                    |                                |  |                    |                                   |   |
| SIGNATURE REQUIRED   |                    |                                |  |                    |                                   |   |
| By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the conditions of the 2021-2022 EMPA agreement.  |                    |                                |  |                    |                                   |   |
| SIGNATURE AND DATE:  |                    | AUTHORIZED REPRESENTATIVE      |  |                    |                                   |   |
| PRINTED NAME AND TITLE:  |                    |                                |  |                    |                                   |   |
| Refund and/or final interest checks are due no later than ninety (90) days after the expiration of the agreement. Please submit this form and supporting documentation to: Florida Division of Emergency Management, 2555 Shumard Oak Blvd., Tallahassee, FL 32399, Attn: (Division Grant Manager)   |                    |                                |  |                    |                                   |   |
| BELOW TO BE COMPLETED BY DIVISION  |                    |                                |  |                    |                                   |   |
| SIGNATURE AND DATE:  |                    | DIVISION GRANT MANAGER         |  |                    |                                   |   |
| SIGNATURE AND DATE:  |                    | DIVISION PROGRAMMATIC REVIEWER |  |                    |                                   |   |

# FY 2021 – 2022 EMPA AGREEMENT ATTACHMENT J-REPORTING FORMS

| FLORIDA DIVISION OF EMERGENCY MANAGEMENT<br>2020-2021 EMERGENCY MANAGEMENT PERFORMANCE GRANT - EMPA BASE GRANT<br>DIVISION FORM 6 - TIME AND EFFORT |   |         |   |   |   |  |   |       |                  |         |   |   |   |   |   |       |   |                 |
|---|---|---------|---|---|---|--|---|-------|------------------|---------|---|---|---|---|---|-------|---|-----------------|
| This form is required to accompany reimbursement claims for salaries charged to the grant.  |   |         |   |   |   |  |   |       |                  |         |   |   |   |   |   |       |   |                 |
| EM EMPLOYEE NAME: _____   |   |         |   |   |   | QUARTERLY REPORTING PERIOD: <u>October 1 - December 31</u> |   |       |                  |         |   |   |   |   |   |       |   |                 |
| PERIOD DATES: _____ TO _____  |   |         |   |   |   | CLAIM #:   |   |       |                  |         |   |   |   |   |   |       |   |                 |
| Ex: 10/01/2020-10/14/2021   |   | Week 1  |   |   |   |  |   |       |                  | Week 2  |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |
| Ex: 10/15/2020-10/30/20   |   | Week 3  |   |   |   |  |   |       |                  | Week 4  |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |
|   |   | Week 5  |   |   |   |  |   |       |                  | Week 6  |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |
|   |   | Week 7  |   |   |   |  |   |       |                  | Week 8  |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |
|   |   | Week 9  |   |   |   |  |   |       |                  | Week 10 |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |
|   |   | Week 11 |   |   |   |  |   |       |                  | Week 12 |   |   |   |   |   |       |   | CATEGORY TOTALS |
| ALLOCATION CATEGORY   | S | S       | M | T | W | T  | F | Total | S                | S       | M | T | W | T | F | Total |   |                 |
| 1 PLANNING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 2 ORGANIZATION  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 3 TRAINING  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 4 EXERCISE  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 5 EQUIPMENT   |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| 6 MGMT & ADMIN  |   |         |   |   |   |  |   | 0     |                  |         |   |   |   |   |   |       | 0 |                 |
| DAILY TOTALS  | 0 | 0       | 0 | 0 | 0 | 0  | 0 | 0     | 0                | 0       | 0 | 0 | 0 | 0 | 0 | 0     | 0 |                 |
| PERIOD ONE TOTAL  |   |         |   |   |   |  |   | 0     | PERIOD TWO TOTAL |         |   |   |   |   |   |       | 0 |                 |

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the conditions of the 2021-2022 EMPA agreement.

|                           |             |                             |             |
|---------------------------|-------------|-----------------------------|-------------|
| Employee Signature: _____ | Date: _____ | Supervisor Signature: _____ | Date: _____ |
|---------------------------|-------------|-----------------------------|-------------|