

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - Direct

Section 1: Administration

Subgrant Recipient

Organization Name: City of North Port

County: Sarasota

Chief Official

Name: Jacqueline Moore

Title: Mayor

Address: 4970 City Hall Boulevard

City: North Port

State: FL **Zip:** 34286-4970

Phone: 941-429-7070 **Ext:**

Fax:

Email: jamoore@cityofnorthport.com

Chief Financial Officer

Name: Peter Lear

Title: Director of Finance

Address: 4970 City Hall Boulevard

City: North Port

State: FL **Zip:** 34286-4970

Phone: 941-429-7119 **Ext:**

Fax:

Email: plear@cityofnorthport.com

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Section 2: Project Overview

General Project Information

Project Title: CRIME SCENE ULTRALITE SYSTEM
Subgrant Recipient: City of North Port
Implementing Agency: North Port Police Department
Project Start Date: 2/1/2016 **End Date:** 7/1/2016

Problem Identification

During crime scene processing, many times the lighting is less than adequate. This "UltraLite" handheld lighting system will allow crime scene technicians lighting to detect small articles, fibers, fluids, etc. that may be missed without this handheld devise.

Project Summary (Scope of Work)

This "UltraLite" helps in the detection of trace evidence, body fluids, fingerprints, blood spatter, gunshot residues, and explosive accelerants. These substances may otherwise be difficult to detect against background materials so evidence can remain unseen. It can reveal subcutaneous bruising, injuries and wounds on bodies living and dead, and assist in the location of evidence containing DNA.

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Section 2: Project Overview

Section Questions:

Question: What percentage of the total cost of this project is being funded by sources other than this award?

Answer: 0

Question: What is the name of the jurisdiction your agency serves? (i.e., your city or your county)

Answer: City of North Port, Florida

Question: What is the combined population of the jurisdiction(s) your agency serves, according to the 2010 census?

Answer: 60000

Question: What is the physical address of the location being used to provide services for this project? If services are being provided at more than one location, list all of them.

Answer: North Port Police Department
4980 City Hall Blvd.
North Port, Florida 34286

Question: Describe your agency (e.g., municipal government, school board, sheriff's office).

Answer: Municipal government

Question: Have you verified that the subgrantee has an active and current registration in SAM.gov? (If no, funds will not be available for drawdown.)

Answer: No

Question: What is the Operating Capital Outlay threshold used by the subgrantee? (Verify this with your finance director.) If the implementing agency is a sheriff's office, indicate the sheriff's office's threshold instead.

Answer: \$6200.00

Question: Does the subgrantee receive a single grant in the amount of \$750,000 or more from the U.S. Department of Justice?

Answer: No

Question: Does the implementing agency receive a single grant in the amount of \$750,000 or more from the U.S. Department of Justice?

Answer: No

Question: In your organization's preceding completed fiscal year, did your organization (the subgrantee) receive at least (a) 80 percent or (b) \$25,000,000 of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

Answer: No

Question: If you answered yes above, does the public have access to information about the compensation of the executives in your organization (the subgrantee) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986? If answer to Part 1, above, was "no," answer

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N/A.

Answer: N/A

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Section 3: Performance

General Performance Info:

Performance Reporting Frequency: Quarterly

Federal Purpose Area: 02 - Crime Laboratory/Forensics

State Purpose Area: 3E - Equipment, Supplies, and Technology Enhancements

Objectives and Measures

Objective: Equipment - Questions for recipients funding Equipment, Supplies, and Technology Enhancements.

Measure: Equipment 01

Do the Subrecipient and Implementing agencies understand that they will be required to submit an itemized account of all items purchased during each reporting period as part of their performance reporting?

Goal: Yes, the North Port Police Department understands there will be quarterly reporting on the units use.

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Section 4: Financial

General Financial Info:

Note: All financial remittances will be sent to the Chief Financial Officer of the Subgrantee Organization.

Financial Reporting Frequency for this Subgrant: Quarterly

Is the subgrantee a state agency?: No

FLAIR / Vendor Number: 596072227

Budget:

Budget Category	Federal	Match	Total
Salaries and Benefits	\$0.00	\$0.00	\$0.00
Contractual Services	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00
Operating Capital Outlay	\$6,200.00	\$0.00	\$6,200.00
Indirect Costs	\$0.00	\$0.00	\$0.00
-- Totals --	\$6,200.00	\$0.00	\$6,200.00
Percentage	100.0	0.0	100.0

Project Generated Income:

Will the project earn project generated income (PGI) ? No

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Section 4: Financial (cont.)

Budget Narrative:

This lighting system cost is from solely from Operating Capital Outlay. The UltraLite consists of:

- 1 UltraLite Handle
- 1 Battery Charger
- 5 Interchangeable Heads: UV, BMT, Green, Yellow, Red
- 1 A/C Power Supply
- 1 12V D/C Volt Power Supply
- 3 Glasses: Amber, Yellow, Red
- 1 20' Extension Cord
- 3 Lithium Batteries lasting 2 hours w/full charge
- 1 Hard Case w/ Foam Set

The cost per unit is: \$5600.00

The total cost will be: \$6200.00

There will not be local government cash match.

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Section 4: Financial

Section Questions:

Question: If the budget contains salaries and benefits, will this project result in a net personnel increase, or continue to fund a prior federally grant funded net personnel increase? (Documentation will be required.)

Answer: There are no salaries or benefits associated with this purchase.

Question: If fringe benefits are included, are they detailed in the budget narrative?

Answer: There are no salaries or benefits associated with this purchase.

Question: If indirect cost is included, explain the indirect cost plan. Provide documentation of approval.

Answer: No associated indirect costs.

Question: If contractual services in the budget are based on unit costs, provide a definition and breakdown of cost for each service. Include the methodology for the unit cost plan and when it was approved.

Answer: The cost per unit is \$5600. The additional funding will cover any associated deliver costs.

Question: If Expenses or Operating Capital Outlay are included in your budget, what will be the method of procurement for those items? (e.g., competitive bid, sole source, state term contract)

Answer: Sole Source

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Section 5: Standard Conditions

Insert Standard Conditions Page here.

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Section 6: Signatures

In witness whereof, the parties affirm they each have read and agree to the conditions set forth in this agreement, have read and understand the agreement in its entirety and have executed this agreement by their duty authorized officers on the date, month and year set out below.

**Corrections on this page, including Strikeovers,
whiteout, etc. are not acceptable.**

**State of Florida
Department of Law Enforcement
Office of Criminal Justice Grants**

Signature: _____

Typed Name and Title: _____

Date: _____

**Subgrant Recipient
Authorizing Official of Governmental Unit
(Commission Chairman, Mayor, or Designated Representative)**

Typed Name of Subgrant Recipient: _____

Signature: _____

Typed Name and Title: _____

Date: _____

**Implementing Agency
Official, Administrator or Designated Representative**

Typed Name of Implementing Agency: _____

Signature: _____

Typed Name and Title: _____

Date: _____

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Section 7: Certifications and Authorizations

Insert Certifications and Authorizations here.