# Application Instructions For The E911 STATE GRANT PROGRAM

W Form 3A, incorporated by reference in Florida Administrative Code Rule 60FF1-5.003 E911 State Grant Programs Revised June June, 2019

#### 1.0 Purpose

The Florida E911 State Grant Program is to assist counties with the replacement or upgrade of Enhanced 911 (E911) systems; for counties to develop and maintain statewide 911 routing using Emergency Services Internet Protocol (IP) networks (ESInet), Geographic Information Systems (GIS) and services, and Management Information Systems (MIS); and develop and maintain Next Generation 911 (NG911) systems and services.

#### 2.0 Eligibility

The Board of County Commissioners in any county in the State of Florida is eligible to apply for this grant program.

#### 3.0 Definitions

- A. Enhanced 911 (E911): Means an enhanced 911 system or enhanced 911 service that is an emergency telephone system or service that provides a subscriber with 911 service and, in addition, directs 911 calls to appropriate public safety answering points by selective routing based on the geographical location from which the call originated, or as otherwise provided in the state plan under s. 365.171, and that provides for automatic number identification and automatic location-identification features..
- B. E911 System: Means the Public Safety Answering Point equipment, in accordance with the State E911 Plan, including 911 call routing, processing, mapping and call answering communications equipment.
- C. Government Accounting Standards Board (GASB): Means the independent organization that establishes and improves standards of accounting and financial reporting for U.S. state and local governments.
- D. Next Generation 911 (NG-911): Means the designation for an advanced 911 emergency communications system or service that provides a communications service subscriber with 911 service and, in addition, directs 911 emergency requests for assistance to appropriate public safety answering points based on the geographical location from which the request originated, or as otherwise provided in the State E911 Plan under Section 365.171, Florida Statutes, and that provides for automatic number identification and automatic location identification features and emergency data information through managed IP-based networks.
- E. Public Safety Answering Point (PSAP): Means the public safety agency that receives incoming 911 requests for assistance and dispatches appropriate public safety agencies to respond to the requests in accordance with the state E911 plan.

# 4.0 E911 State Grant Program Calendar

The E911 Board will accept applications up to two times a year for the State Grant Program.

|  | Schedule   |
|--|--|
| Counties submit Application  | Submission date(s) as published in the Florida Administrative Register |
| E911 Board Members evaluate applications   | Within two months of the submission date                               |
| E911 Board votes on applications to fund at regularly scheduled meeting              | Within three months of the submission date                             |
| E911 Board sends notification letter of awards approved for funding to the counties. | Within four months of the submission date                              |
| Grant Term   | Two years from receipt of award notification                           |
|  |  |

#### 5.0 General Conditions

Applications must be delivered to the following address:
State of Florida E911 Board
ATTN: E911 Board Administrative Staff
4030 Esplanade Way, Suite 135
Tallahassee, FL 32399-0950
Or Electronically to E911BoardElectronicGrantReports@dms.myflorida.com
Electronic receipt of the grant application and all attachments is preferred.

- 5.1 The applicant shall provide Application Form items 1 through 14, and the associated quotes. The grant application package must be postmarked or delivered on or before the submission date specified in the E911 Board notification of a State E911 Grant Program as published in the Florida Administrative Register. Failure to provide these documents will result in automatic rejection of the grant application. Emailed electronic submission is the preferred method of delivery.
- 5.2 Pursuant to sec 365.172(6), 365.172(10), 365.173(2) F.S., grant funds must only be used for the following items/services: to upgrade or replace E911 systems; to develop and maintain statewide or regional 911 routing, geographic information systems, and management (GIS and MIS); and to develop and maintain next-generation 911 (NG911) services and equipment; and remotely provided hosted 911 answering point call-taking equipment and network services directly attributable to establishing and provisioning E911 or NG-911 services. Warranty costs shall be calculated to account for only the first-year warranty.
- 5.3 Only the percentage of service and equipment directly attributable to provisioning of 911 is eligible.
- 5.4 All maintenance requests for eligible services and equipment shall be combined into a single application which includes the breakdown of individual cost.
- 5.5 All grant applications shall be accompanied by at least one complete quote for equipment or services. Grant applications totaling \$35,000.00 or more must be accompanied by at least three written substantiated competitive complete quotes from different vendors. Complete quote submittals shall include a detailed scope of work, all pages included in the vendor proposal, breakdown of all costs including equipment, service tasks and deliverables. Any county that has made a good faith effort to obtain at least three competitive quotes and has not been able to obtain the quotes can request E911 Board review based on substantiated proof of request for quotes or posting of the request with documentation of the limited responses.
- 5.6 If the grant application does not exceed the threshold amount of \$195,000, the county can initiate a request for approval for sole source funding. These will be considered on a case-by-case basis. Justification for sole source funding shall be provided with the application. Sole source will be approved if provided in accordance with Chapter 287, Florida Statutes, or with provision of a letter from the county's purchasing department that the project is a sole source procurement based on the county's purchasing requirements, which shall be provided with this

- grant application. Include pricing justification in the sole source letter from the county's purchasing department.
- 5.7 Applicants requesting items from different funding priorities should complete a separate item #12 Budget/Expenditure Report for each priority. See Addendum I Funding Priorities for the E911 State Grant Program for a listing of funding priorities. Items from the same funding priorities should be combined in the same item #12 Budget/Expenditure Report and shall comply with General Conditions items 5.5 and 5.6.
- 5.8 Should two or more counties jointly apply for a grant, the lead county will be required to complete and submit a grant application detailing the funds requested. The lead county is responsible for the funds. A memorandum of understanding (MOU) or inter-local agreement of all counties involved shall be submitted. The combined grant application shall comply with General Condition's items 5.5 and 5.6. The lead county shall be responsible for payment of the vendors' invoices and will submit the request for reimbursement to the Board.
- 5.9 Procurement shall be based on the county's purchasing requirements and the applicable State purchasing requirements, including Section 112.061, Florida Statutes. All travel and associated per diem costs proposed shall be in compliance with General Condition's item 6.3.5.
- 5.10 Funding application requests must include a scope of work that clearly establishes the tasks to be performed. The applications shall include all tasks that are required for successful completion of the project. The project shall be divided into quantifiable units of deliverables that shall be received and accepted in writing by the county before payment. Each deliverable must be directly related to the scope of work and must specify the required minimum level of service to be performed and the criteria for evaluating the successful completion of each deliverable.
- 5.11 Funding requests must include all necessary costs required for full implementation of the proposed solution including that of any third party. Should the county grant application request or grant award be less than the projected cost of the equipment or service, the county should provide verification of the ability to fund the difference. Pricing submitted cannot be contingent upon "yet to be" determined fees for products and services by the proposer or any other third party required for implementation.
- 5.12 The county shall provide information on the county's preceding year E911 fee revenue amount, the preceding year carry forward funding amount and the total carry forward balance amount in the county E911 fund. A State grant award may be limited by the carry forward balance in compliance with sub-paragraph 365.172(6)(a) 3.c., F. S. and E911 Board Rule 60FF1-5.006 Florida Administrative Code. The county shall include the amount of their county carry forward funding being utilized for this grant in the Applied County Carry Forward or other Funding (if applicable) line in the Application Form item #12, Budget/Quarterly Expenditure Report.
- 5.13 Detailed information is required for any grant application requesting funding for systems that require immediate system replacement for provisioning of enhanced 911 in the county. Include detailed justification and explanation for any E911 system with an expected remaining life of less than 1 year.
- 5.14 Funding requests contingent upon "beta testing" or for products and services not in general production and installation will not be funded.

#### 6.0 Specifically Excluded E911 Expenses

- 6.1 Salaries and associated expenses for 911 coordinators, call takers or other 911 personnel will not be funded.
- 6.2 Wireline database costs from the local exchange carrier, vehicle expenses will not be funded. Interconnecting hardware and network equipment for NG-911 PSAPs are fundable.
- 6.3 Funding limitations are specified on the following items:
  - 6.3.1 Hosted 911 answering point call-taking equipment and network services, recurring network and circuit costs, equipment maintenance and warranty costs will not be funded on more than the first year implementation period.
  - 6.3.2 Grant funding shall be limited (per grant cycle) to eligible expenditures for one PSAP per county either one primary or one secondary PSAP. Counties with only one PSAP in the county, with no other primary or secondary PSAPs, may be eligible for grant funding for one backup PSAP. Geo-diverse systems may be considered one PSAP for the purpose of grant funding.
  - 6.3.3 Selective router equipment costs are limited to the primary PSAP system and are limited to one per county.
  - 6.3.4 Training cost funding is limited to new system & equipment training.
  - 6.3.5 The allowable grant funding for travel expenses is limited to the authorized amounts established in Section 112.061, Florida Statutes, and the Department of Financial Services Guidelines for State Expenditures. Allowable costs for daily per diem shall not exceed \$186.00.

#### 7.0 Approval and Award

- 7.1 The E911 Board will review each application for compliance with the requirements of terms and conditions.
- 7.2 Grant awards will be withheld for any county that has a grant with a past-due quarterly report or past-due final documentation and closeout of previous E911 Board grant awards. Grant awards may also be withheld if the county is not in compliance with Board reporting requirements.
- 7.3 Applications will be awarded based upon the priorities set by the E911 Board as listed in Addendum I Funding Priorities for the E911 State Grant Program.
- 7.4 The E911 Board will adjust the amount awarded to a county based upon the availability of funds, reasonableness of cost of requested items, published quotes, increased effectiveness

of grant funds, minimum system requirements for performing the needed E911 function as specified in Florida Statute 365.173 (2) (h) 1.,2., and 3., the State E911 Plan, or documented factors provided in the grant application submission. NG-911 network systems should include a comparative presentation of network alternatives, including applicable LEC, CLEC, County and State alternatives. All stepped pricing should be thoroughly explained including the corresponding benefits for the County and the E911 Board.

#### 8.0 Financial and Administrative Requirements

- 8.1 Grant funds shall be provided on a cost reimbursement basis.
- 8.2 Each grantee may submit reimbursement claims to the E911 Board as needed; however, claims are limited to one request per month. Receipt of reimbursement funds from the E911 Board is contingent on the timely and accurate submittal of funding requests. Requests for reimbursement of expenditures must be submitted on the approved Appendix IV Financial Reimbursement of Expenditures Reporting Form. Incomplete claim forms or claims not submitted on the correct form cannot be processed and will be returned for corrections. Submit only for the amounts in each budget categories in which you have incurred expenditures.
- 8.3 Upon written request and accompanying documentation justifying the need, a county may receive a progress disbursement with a completed Financial Expenditures Reporting Form, with the vendor invoice, and county certification that the specific grant items including all tasks and deliverables included in the funding request are complete. Within 45 days of receipt of funding, the grantee shall submit verification of vendor payment.
- 8.4 Reimbursement claims shall include only expenditures related to the specific grant and include copies of purchase orders and paid vouchers, invoices, copies of check processing, journal transfers. The reimbursement request must match the scope of work and budget proposed in the grant applications. To assure prompt processing, complete reimbursement claims should be e-mailed to:

#### E911Board-ElectronicGrantReports@dms.myflorida.com

- 8.5 Grant funds, can only be used between the beginning and ending dates of the grant term, unless the E911 Board authorizes an extension.
- 8.6 Responsibility for grant funding and any failure to perform the minimum level of service required by the grant application and the application scope of work cannot be transferred under any circumstances from the County.
- 8.7 Responsibility for property, equipment, or services, obtained under a grant cannot be transferred under any circumstances. If a sale or transfer of such property or equipment occurs within five years after a grant ends, funds must be returned to the E911 Board on a pro rata basis.
- 8.8 If a grantee terminates a contract for prepaid services, the unused portion must be returned to the E911 Board on a pro rata basis.
- 8.9 The grantee agrees that any improvement, expansion or other effect brought about in whole or part by grant funds will be maintained until the system or equipment becomes obsolete.

8.10 If a grantee materially fails to comply with any term of an award, the Board shall take one or more of the following actions, as appropriate in the circumstances:

Withhold grant payments pending grantee correction of the deficiency, disapprove all or part of the cost of the activity or action not in compliance, suspend or terminate the current award for the grantee's project, suspend or deny future grant awards.

The Board will provide the grantee an opportunity for a hearing, appeal, or other administrative proceeding to which the grantee is entitled under Florida Statutes.

- 8.11 Grant awards, or portion thereof may be terminated by the grantee upon written notification to the Board, detailing the reasons for such termination, the effective date, and return of associated funding.
- 8.12 Any grant funds provided in excess of the amount to which the actual cost incurred to meet the terms and conditions of the grant agreement must be refunded to the E911 Board and sent to the Florida E911 Board's Post Office Box address:

Florida E911 Board PO Box 7117 Tallahassee, FL 32314

The refund shall include transmittal information detailing the amount of returned funds that are excess grant funding and shall include the number of the associated grant.

#### 9.0 Grant Reporting Procedures

- 9.1 Grantees will be required to submit both:
  - Quarterly reports on the Budget/Quarterly Expenditures Report, Form #12
  - Quarterly Status Report, Appendix III.
  - 9.1.1 Reporting will begin at the conclusion of the first full quarter after the award. The report periods will end on March 31, June 30, September 30, and December 31 of each year. Reports are due within 30 days of the ending report period.
  - 9.1.2 Updated reports and associated information should be e-mailed to E911Board-ElectronicGrantReports@dms.myflorida.com.
- 9.2 At project completion, a final Budget/Quarterly Expenditure Report shall be submitted based on the same reporting requirements described in grant reporting item 9.1. The county shall determine the final completion date based on the final payment date, or the initiation date of

- the warranty period. Final documentation including copies of all expenditures and corresponding invoices shall be submitted within 90 days of the final report.
- 9.3 Change requests shall be submitted prior to deviation from any awarded grant applications. No changes or departures from the original request are authorized unless approved in writing by the E911 Board. Such requests shall be submitted using the form attached in Appendix II, Request for Change Form.
  - 9.3.1 Time extension requests will not be granted unless the county has executed a contract for the grant equipment and/or services, or demonstrates good cause for failure to execute a contract within two years of award. Good cause documentation shall include a new project timeline schedule.
  - 9.3.2 Time extensions shall be limited to a maximum of one additional year when approved by the E911 Board for a total of three years.
  - 9.9.3 Request for Change forms and associated information should be e-mailed to <u>E911Board-ElectronicGrantReports@dms.myflorida.com</u>.
- 9.4 The Quarterly Status Report, Appendix III shall inform the E911 Board of significant impacts to grant supported activities. Significant impacts include project status developments affecting time schedules and objectives, anticipated lower costs or producing beneficial results in addition to those originally planned. Additionally, problems, delays, or adverse conditions which will materially impair the ability to meet the timely completion of the award must be reported. The disclosure must include a statement of the action taken, or contemplated, and any assistance needed to resolve the situation.
- 9.5 Final document submission and closeout of a grant does not affect the E911 Board's right to disallow costs and recover funds based on an audit or financial review. The county shall remain obligated to return any funds expended that do not comply with the terms and conditions of the grant award.

| County | Martin |
|--------|--------|
|        |        |

# STATE OF FLORIDA E911 BOARD E911 STATE GRANT PROGRAM APPLICATION FORM

|    | Total Amount Red                            | juested: \$3,                                     | 695.86   |
|----|---|---|--|
|    | Project Title:                              | New Console Monitors                              | 3  |
| 1. | Board of County (                           | Commissioners Chair:                              | Harold E. Jenkins II                                     |
|    | Mailing Address:                            | 2401 SE Monterey Road                             | I  |
|    | City:<br>State:<br>Phone:<br>Email Address: | Stuart<br>FL<br>( 772 ) 221-2357                  | Zip: _34996<br>Fax:                                      |
| 2. | County 911 Coord                            | linator: Jessica S                                | kowronski  |
|    | Mailing Address:                            | 800 SE Monterey Road                              |  |
|    | City:<br>State:<br>Phone:<br>Email Address: | Stuart FL ( 772 ) 220-7189 jskowronski@sheriff.ma | Zip: <u>34994</u> -<br>Fax: (772) 220-7105<br>rtin.fl.us |
| 3. | Federal Tax ID Nu                           | mber: <u>59-6000743</u>                           | 3  |

# **COUNTY INFORMATION** USE 12 POINT FONT OR LEGIBLE HAND PRINTING

# 4. County Fact Information

|            | County  | Martin Count       | У                |                  |                             |  |  |  |
|------------|---|--------------------|------------------|------------------|-----------------------------|--|--|--|
|            | Population  | 159,923 (2         | 2018 Population  | n Technical B    | ulletin by MC BOCC)         |  |  |  |
|            | Total Number of Incoming Nonwireless Trunk  |                    |                  |                  | Combined                    |  |  |  |
|            | Total Number  | of Incoming W      | /ireless Trunks  | 35               | Combined                    |  |  |  |
|            | Number of PS  | SAP's 4            | l (Two primary,  | one seconda      | ry, one backup)             |  |  |  |
|            | Number of Ca  | ıll- taking Positi | ions per         |                  |                             |  |  |  |
|            | PSAP 18/4/6/10  |                    |                  |                  |                             |  |  |  |
|            | Total Volume  | of 911 Calls       | _                | 92,802 (Estimate | ated 2018-19 Calendar Year) |  |  |  |
| ٧          | Vhat equipme  | nt is needed to    | provision the E  | nhanced 911      | system?                     |  |  |  |
|            |   | New phon           | e monitors.      |                  |                             |  |  |  |
| ٧          | Vhat equipme  | nt is requested    | in this grant ap | plication?       |                             |  |  |  |
|            |   | New phon           | e monitors.      |                  |                             |  |  |  |
| F          | inancial Inforr   | nation:            |                  |                  |                             |  |  |  |
| 1.)        |   |                    |                  |                  |                             |  |  |  |
|            | records har   | dware and soft     | ware, etc.) not  | including mai    |                             |  |  |  |
| <b>0</b> \ | \$214,726.16  |                    |                  |                  |                             |  |  |  |
| 2.)        | .) What are the current annual costs for maintenance of items included in 1? \$145,866.29 |                    |                  |                  |                             |  |  |  |
| 3.)        |   |                    |                  |                  |                             |  |  |  |
| 3.)        | rotal alliou  | iii oi Lattiee i   | revenue receiv   | ea iii tile piec | \$798,436.72                |  |  |  |
| 4.)        |   |                    |                  |                  |                             |  |  |  |
| <b>5</b> \ | Current tota  | l amount of an     | unty carry forw  | ord funding?     | \$0                         |  |  |  |
| 5.)        | Current tota  | ii amount or co    | unity carry forw | ard furiding?    | \$0                         |  |  |  |
| 6.)        | Two year m  | aximum calcul      | ated amount fo   | r applied carr   | y forward funding           |  |  |  |
| 0.)        | •   | culation (currer   |                  | i applica cari   | y forward farialing         |  |  |  |
|            |   | •                  | nount based or   | 1                |                             |  |  |  |
|            |   | •                  | 5.12 multiplied  |                  |                             |  |  |  |
|            | by 2  |                    | •                |                  | \$0, total costs            |  |  |  |
|            | •   | •                  |                  |                  | exceeded revenue            |  |  |  |

7.) Minimum calculated amount for Applied Carry Forward Funding

Calculation (amount in J.5. subtracted by amount in J.6.)
Insert in Item 12. Budget/Quarterly
Expenditure Report

\$0, total costs exceeded revenue

5. Describe your county's existing E911 system. Include specific information on existing system equipment upgrades and when the installation of this equipment was completed.

Martin County has two primary PSAPs (Martin County Sheriff's Office and Stuart Police Department), one secondary PSAP (Martin County Fire Rescue), and one backup PSAP. The Martin County Sheriff's Office has 18 call taker positions, Stuart Police Department has 4 call taker positions, Martin County Fire Rescue has 6 call taker positions, and the backup center has 10 call taker positions.

Martin County PSAPs are connected by county owned fiber dedicated solely to our 911 call handling equipment, and have Geo-diverse redundant CPE systems. We currently use Vesta call handling equipment, West ESInet for 911 delivery and ALI Database, and KOVA recording system.

# History:

- 2011 Intrado A-911 IP Call Delivery Network Installed
- 2016 Airbus Vesta 9-1-1 CPE System Installed
- 2017 KOVA Recorder System Installed
- 2018 Project kick-off to move from Intrado to Vesta Solutions, Inc. for 911 call delivery
- 2019 Transition to Motorola NGCS is still in process
- 6. Describe the scope of work for the proposed project including any goal(s) and objectives. Include the tasks to be performed as part of the project. Provide scope of work in quantifiable units of deliverables that shall be received and accepted. For each deliverable specify the required minimum level of service to be performed and the criteria for evaluating the successful completion of each deliverable.

Martin County is transitioning to Next Generation 911 (NG911) technology. As we adapt to NG911, new media applications will provide visual information, such as images or video to enhance Telecommunicators' ability to efficiently process emergency calls. The phone monitors at the Primary PSAP located at the Stuart Police Department and the back-up Data Resource Center (DRC) require an

upgrade to provide extra space for the delivery of additional information. This will improve the current display for call processing.

The proposed project task includes the following billable deliverables:

- Purchase and delivery of phone monitors (installation will be done internally at no cost).
- 7. Justification of the need for the proposed project. Provide detailed information on the existing system's condition including a detailed justification for any system with an expected remaining life of less than 1 year on system, standalone equipment or Software(SW) replacement, addition or upgrade requests.

In preparation for additional media applications our PSAPs will require larger phone monitors to enable easy access to additional information such as text-to-911. This will enable emergency communication alternatives for the hearing impaired and the disabled community.

8. Describe why your county will not be able to complete this project without this grant funding.

Martin County is a medium sized county with a small resident subscriber base that increases during peak seasonal tourist periods. Our current limited E911 fund revenues are insufficient to maintain and upgrade the current E911 equipment, and are unable to provide for future improvements. Without the utilization of grant funds Martin County cannot complete the transition to NG911 services. Our county does not have any carry forward funds since our total 911 expenses far exceed our current 911 fee revenues.

9. Briefly describe how this grant project would conform with the State E911 Plan.

The NG911 systems support voice, text, images, and video, allowing more emergency communications alternatives for the hearing impaired or the disabled community (i.e. text messaging, video relay services, etc.) as well as the general public. This project would provide for additional E911 equipment and upgrades to answer 911 calls.

- 10. Describe the required steps with an anticipated time schedule with procurement and payment milestones and a total project completion date.
  - Step 1 Receive grant funding approval for project
  - Step 2 Purchase hardware and begin project installations
  - Step 3 Continue installations and test equipment during the second quarter after award
- 11. If applicable, sole source justification must include sole source letter from county's purchasing department; see instruction 5.5.

N/A

| Prepare an it mapping, etc   | get/Quarterly E<br>emized Grant Bud<br>. and services iten<br>propriate columns. | lget ("Lin<br>ns). The | e Item" br<br>complete | eakdown s<br>d form sha | all be use | ed to co         | omplete qua | arterly rep | oort requ            | uirem | ents, listing exp | penditures | and revisions                  |
|--|--|------------------------|------------------------|-------------------------|------------|------------------|-------------|-------------|----------------------|-------|-------------------|------------|--------------------------------|
| County:  | Martin   |                        | Grant Nui              | mber:                   |            |                  |             |             | Re                   | port  | Date:             |            |                                |
|  |  |                        |                        |                         |            |                  | _           |             | •                    |       | •                 | T          |                                |
| For Grant F  | Period Ending:   | │                      | ch 31                  | June                    | 20         | ∐ Se             | eptember 3  | 30   _      | ] Decer              | nber  | 31                | Year:      |                                |
| Is This a Final Report? Yes □ No□ (To request reimbursement please submit appendix IV) |  |                        |                        |                         |            |                  |             |             |                      |       |                   |            |                                |
| Proposed B   | udget  |                        |                        |                         |            |                  |             |             |                      |       | USE FOR Q         | UARTERL    | Y REPORTS                      |
| Line Iter  | m –Provide detail  | itemized               | informatio             | on I                    | Unit Pric  | e (\$)           | Quantity    | Total C     | Cost (\$)            |       | Revised<br>Budget |            | l Cumulative<br>enditures (\$) |
| Labor)  Dell 24-inch   | (Hardware, Softw<br>Touch Monitor<br>Day Port Cable                              | are, Equ               | ipment &               |                         |            | 250.00<br>613.99 | 14<br>14    |             | 3,500.00<br>\$195.86 |       |                   |            |                                |
|  |  |                        |                        | T.                      | atal Creat | It               |             | Фо          | , COE 0C             |       |                   |            |                                |
| D. Comicoo   | /Training Maintar  | 2000000                | d Marrant              |                         | otal Syst  | em iten          | ns<br>I     | \$3         | 3,695.86             |       |                   |            |                                |
| Items)   | (Training, Mainter   | iance an               | u wanam                | y                       |            |                  |             |             | \$0                  |       |                   |            |                                |
|  |  |                        |                        | T <sub>2</sub>          | otal Serv  | ice Iton         | 00          |             | \$0                  |       |                   |            |                                |
| Less ar  | ny Applied County  | Carry Fo               | rward or o             |                         |            |                  |             |             | \$0<br>\$0           |       |                   |            |                                |
| 2000 01  | ,  | <b>,</b>               |                        |                         | ant Requ   | <u> </u>         | ,           | \$3         | 3,695.86             |       |                   |            |                                |
| Total Amou   | USE FOR<br>nt of Grant Award<br>letion Date                                      |                        | PORTS                  |                         |            |                  | 1           |             |                      | 1 1   |                   | •          |                                |

Signature, County 911 Coordinator

|                      |  | County  | Martin   |
|----------------------|--|---|--|
|                      |  | County  | iviai tii i  |
| 13.                  | Assurances   |   |  |
|                      | EPTANCE OF TERMS AND ditions. Grantee understands  |   |  |
| appl<br>requ         | CLAIMER: The grantee certication and any attached direment may result in revocatued (if any), pursuant to the E                              | ocuments are true and co<br>ion of the grant and return of                            | orrect. A violation of this fall grant funds and interest                                  |
|                      | TIFICATION OF AWARDS: Trd will be advertised on the F  |   | d accepts that the notice of   |
| impr<br>be m<br>perm | NTENANCE OF IMPROVEM ovement, expansion or other naintained. No substantial chaitted unless the E911 Boaringe will necessitate the returned. | effect brought about in whole anges or departures from the dives prior written author | e or part by grant funds will<br>e original proposal shall be<br>ization. Any unauthorized |
|                      | ure to utilize grant funds as re<br>e funding.   | presented may jeopardize el   | igibility to be considered for   |
| 14.                  | Authority  |   |  |
| I her                | eby affirm my authority and r  | esponsibility for the use of fu   | unds requested.  |
| TES                  | Т:   | BOARD OF COUNT<br>MARTIN COUNTY. I  | Y COMMISSIONERS<br>FLORIDA   |

ATTEST:

BOARD OF COUNTY COMMISSIONERS
MARTIN COUNTY, FLORIDA

HAROLD E. JENKINS II, CHAIRMAN

APPROVED AS TO FORM & LEGAL SUFFICIENCY:

SARAH W. WOODS, COUNTY ATTORNEY

#### Appendix I

NO requests for funding will be acknowledged for any items not specified in Section 365.172, Florida Statutes, Emergency communication number "E911"; paragraph (10) (shown below).

Section 365.172 (10), Florida Statutes

#### AUTHORIZED EXPENDITURES OF E911 FEE-

- (a) For purposes of this section, E911 service includes the functions of database management, call taking, location verification, and call transfer. Department of Health certification, recertification, and training costs for 911 public safety telecommunications, including dispatching, are functions of 911 services.
- All costs directly attributable to the establishment or provision of E911 service and (b) contracting for E911 services are eligible for expenditure of moneys derived from imposition of the fee authorized by subsections (8) and (9). These costs include the acquisition, implementation, and maintenance of Public Safety Answering Point (PSAP) equipment and E911 service features, as defined in the providers' published schedules or the acquisition, installation, and maintenance of other E911 equipment, including circuits; call answering equipment; call transfer equipment; ANI or ALI controllers; ANI or ALI displays; station instruments; E911 telecommunications systems; visual call information and storage devices; recording equipment; telephone devices and other equipment for the hearing impaired used in the E911 system; PSAP backup power systems; consoles; automatic call distributors, and interfaces, including hardware and software, for computer-aided dispatch (CAD) systems; integrated CAD systems for that portion of the systems used for E911 call taking; GIS system and software equipment and information displays; network clocks; salary and associated expenses for E911 call takers for that portion of their time spent taking and transferring E911 calls, salary, and associated expenses for a county to employ a full-time equivalent E911 coordinator position and a full-time equivalent mapping or geographical data position, and technical system maintenance, database, and administration personnel for the portion of their time spent administrating the E911 system; emergency medical, fire, and law enforcement prearrival instruction software; charts and training costs; training costs for PSAP call takers, supervisors, and managers in the proper methods and techniques used in taking and transferring E911 calls, costs to train and educate PSAP employees regarding E911 service or E911 equipment, including fees collected by the Department of Health for the certification and recertification of 911 public safety Telecommunicator's as required under s. 401.465; and expenses required to develop and maintain all information, including ALI and ANI databases and other information source repositories, necessary to properly inform call takers as to location address, type of emergency, and other information directly relevant to the E911 call-taking and transferring function. Moneys derived from the fee may also be used for next-generation E911 network services, nextgeneration E911 database services, next-generation E911 equipment, and wireless E911 routing systems.

| (c) The moneys should not be used to pay for any item not listed in this subsection, including, but not limited to, any or operational costs for emergency responses. Even any which occur after the call transfer to the responding public safety entity and the costs for constructing, leasing, maintaining, or renovating buildings, except for those building modifications necessary to maintain the security and environmental integrity of the PSAP and E911 equipment rooms. |
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| Appendix II           |                         |                    |       |          |  |  |
|-----------------------|-------------------------|--------------------|-------|----------|--|--|
|                       | Reques                  | t for Change       |       |          |  |  |
| Name of County:       |                         |                    |       |          |  |  |
| Date Grant Awarde     | d:                      |                    |       |          |  |  |
| Extension Period:     |                         |                    |       |          |  |  |
| Grant number:         |                         |                    |       |          |  |  |
| BUDGET LINE ITEM      |                         | CHANGE F           | ROM C | HANGE TO |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       | TOTAL                   | \$                 | \$    |          |  |  |
| Justification For Cha | nge:                    |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
|                       |                         |                    |       |          |  |  |
| Signature of Authoriz | red Official            |                    | Date  |          |  |  |
|                       | For E91                 | I1 Board use only. |       |          |  |  |
| Approved: Yes         | ☐ No ☐                  |                    |       |          |  |  |
| E911 Board's Au       | thorized Representative | <del></del>        | Date  |          |  |  |

| Appendix III                     |              |
|----------------------------------|--------------|
| Quarterly Status Re              | <u>eport</u> |
| County:                          |              |
| Grant Number:                    |              |
| Report Date:                     |              |
| Grant Period Ending:             |              |
| Project Status Update:           |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
| Problems/Delays:                 |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
|                                  |              |
| Signature of Authorized Official | <br>Date     |

### **Appendix IV Financial Reimbursement of Expenditures Reporting Form**

Prepare an itemized request for reimbursement expenditures in each budget categories for each deliverable. Attach copies of purchase orders and paid vouchers, invoices, copies of checks, journal transfers, required for expenditure justifications. If there is insufficient space, please include details in an attachment.

| County:                                     | Grant Number:          |           | Request Nu   | Request Date: |       |                                |                                |  |  |  |
|---|------------------------|-----------|--------------|---------------|-------|--------------------------------|--------------------------------|--|--|--|
|   |                        |           |              |               |       |                                |                                |  |  |  |
| Budget Categories                           |                        |           |              |               |       |                                |                                |  |  |  |
| Deliverable Items                           |                        | Unit Pric | ce Quantit   | (4)           |       | revious<br>equest<br>ount (\$) | Current Request<br>Amount (\$) |  |  |  |
| A. Systems (Hardware, Labor)                | Software, Equipment &  |           |              |               |       |                                |                                |  |  |  |
| B. Services (Training, N<br>Warranty Items) | Maintenance and        |           |              |               |       |                                |                                |  |  |  |
|   |                        | Grant Re  | equest Total |               | '     |                                |                                |  |  |  |
|   |                        |           |              |               |       |                                |                                |  |  |  |
| Request payment of f                        | unding (if applicable) |           |              |               |       |                                |                                |  |  |  |
| Justification of paymen                     | t funding need:        |           |              |               |       |                                |                                |  |  |  |
|   |                        |           |              |               | Signa | ature, Cour                    | nty 911 Coordinator            |  |  |  |

#### Addendum I

Funding Priorities for the E911 State Grant Program

The criteria for determining acceptability for disbursement of funds from the State of Florida E911 State Grant Program will be made on a PRIORITY basis. There will be nine (7) priorities as identified below:

- PRIORITY 1: Primary and/or Secondary PSAP systems that require immediate system replacement to provision enhanced 911 status or when the expected remaining life of the system is less than 1 year.
- PRIORITY 2: Systems that require new or replacement of critical or necessary hardware or software. This may include the following Primary and/or secondary PSAPs system equipment, listed in order of funding priority a-h:
  - a. Hardware and software for communications or terminal equipment located at a PSAP for 911 call processing, ANI and ALI display and call answering.
  - b. Lightning Protection Equipment
  - c. Uninterruptible Power Supply system and or Generator
  - d. E911 Logging Equipment
  - e. County E911 Standalone ALI Database Equipment
  - f. E911 Map Display Equipment
  - g. New additional 911 Call Taker Position Equipment
  - h. Net clock
- PRIORITY 3: Consolidation of E911 PSAPs, which decreases the number of Primary or Secondary PSAPs in the county by a minimum of one. This may include regional consolidated backup systems for counties consolidating backup systems for two or more counties.
- PRIORITY 4: Mapping system and services necessary for provisioning Geographic Information Systems (GIS). This may include the following, listed in order of funding priority a through c:
  - a. E911 Map System Equipment E911 map generation hardware and software licensing is limited to components for two stations
  - b. GIS Centerline, point generation and map accuracy systems
  - c. GIS Data support

PRIORITY 5: Development and maintenance of 911 routing statewide, geographic, and management information systems. (Funded by Prepaid wireless)

PRIORITY 6: NG-911 Equipment and Services.

PRIORITY 7: Backup system equipment (see Priority 2)

PRIORITY 8: Aerial Photography / Imaging

Overhead (Nadir) images

PRIORITY 9: Infrastructure cabling and building entrance buildout cost.

PRIORITY 10: 911 call taker workstation console/furniture (the portion related to 911)

Telecommunicator Workstation Console / Furniture

Regional E911 system project requests related to systems and equipment will be considered the highest priority within each priority category.

Grants awards will be funded in order of priority assigned.

#### **COUNTY E911 FISCAL INFORMATION**

| Item No. |  | E:       | 911 Fee Revenues    |  |
|----------|--|----------|---------------------|--|
| 1        | County   |          | Martin              | Fiscal Year 2019   |
| 2        | Wireless E911 Fee Revenue                            | •        |                     | Fiscal Teal 2013   |
| 3        | Non-wireless E911 Fee Revenue                        |          | 473,956.77          | // FC wireling 9 VoID  |
|          |  |          | 243,504.20          | (LEC, wireline, & VoIP)  |
| 4        | Prepaid E911 Fee Revenue                             |          | 80,975.75           | (Creat required upique accounting code)  |
| 5<br>6   | E911 State Grant Revenue  Rural County Grant Revenue |          | 48,820.56           | (Grant required unique accounting code)  |
| 7        | Emergency Grant Revenue                              |          |                     | (Grant required unique accounting code) (Grant required unique accounting code)  |
| 8        | Rural County Supplemental Disbursement               |          | -                   | (Grant required unique accounting code)  |
| 9        | E911 Board Special Disbursement                      |          | 27,334.98           |  |
| 9        | E911 Board Special Disbursement                      | Ψ        | 21,334.90           | Carry Forward Fee Revenue calculation (Item #2 + Item  |
| 10       | Total E911 Fee Revenue                               | \$       | 798,436.72          | #3 + Item #4)  |
| Item No. |  | E911 .   | Allowable Expenditu | ires   |
| 11       | E911 Fee Revenue and Supplemental and                |          |                     |  |
| ''       | Special Disbursement Expenditures                    |          | 798,436.74          |  |
| 12       | County Funded E911 Expenditures                      | \$       | 309,535.02          |  |
| 13       | Subtotal Expenditures                                | \$       | 1,107,971.76        | Calculation (Item #11 + Item #12)  |
| 14       | E911 State Grant Expenditures                        | \$       | 48,820.56           |  |
| 15       | Rural County Grant Expenditures                      | \$       | -                   |  |
| 16       | Emergency Grant Expenditures                         | \$       | -                   |  |
| 17       | Subtotal Grant Expenditures                          | \$       | 48,820.56           | Calculation Item #14 + Item #15 + Item #16   |
| 18       | Total E911 Expenditures                              | \$       | 1,156,792.32        | Calculation Item #13 + Item #17  |
| Item No. | E911 Carry   | Forward  | & Excess Cost Rec   | covery Calculation   |
| 19       | Allowable County Carry Forward Amount                | \$       | 266,866.00          | Maximum allowable calculation (30% of fee revenue Item #10) + (full amount of Item #8 + Item #9 disbursements). Grants are under unique accounting codes and are not included in calculations. |
| 20       | Actual County Carry Forward Amount                   | \$       | -                   | Limited by paragraph 365.173(2)(d), Florida Statutes. Assure amount is equal to or less than Item #19  |
| 22       | Excess Cost Recovery                                 | \$       | (282,200.06)        | Calculation (Item #10 +Item #8 +Item #9 - Item #13 - Item #20) Positive amount equals excess cost recovery amount to be returned to the E911 Board.  |
| Item No. |  | С        | ontact Information  |  |
| 24       | Name of person preparing response:                   |          | Stephanie Merle     |  |
| 25       | Title/Position of person preparing response:         |          | Budget Financial M  | Manager  |
| 26       | Telephone number:                                    |          | 772-463-2868        |  |
| 27       | E-Mail address of person preparing response:         |          | smerle@martin.fl.u  | JS   |
| 28       | Date:  |          |                     | 18-Nov-19  |
|          | In accordance with paragraph                         | า 365.17 | 3(2)(d) and 365.172 | (6)(a)3., Florida Statutes   |