## **Opportunity Details**

**Opportunity Information** 

CSFA Number 493-60-1166

## CSFA Popular Name

9-1-1 System Consolidation Grant Program

Title

9-1-1 System Consolidation Grant Program

## Description

The Illinois State Police Office of the Statewide 9-1-1 Administrator (hereafter "Administrator") seeks Grant Proposals as defined in 50 ILCS 750/15.4b and IL 83 ADC Part 1327 from entities who are subject to consolidation under 50 ILCS 750/15.4a of the Act to offset non-recurring costs associated with the consolidation of 9-1-1 systems. Existing and previously completed consolidation projects shall be eligible to apply for reimbursement of non-recurring costs related to consolidations completed between 2010 and the State fiscal year of the grant application.

Applicants must submit proposals in compliance with the Act and the administrative rules adopted thereunder.

The Administrator's goals in administering this program are to:

Defray costs associated with 9-1-1 system consolidation of systems while increasing the availability and efficiency of E9-1-1 service coverage throughout Illinois.

Grants will be funded, in whole or in part, with funds appropriated to the Illinois State Police (ISP) under the Act from the Statewide 9-1-1 Fund. The Administrator, with the advice and recommendation, of the Statewide 9-1-1 Advisory Board shall administer the program and award grants based on criteria that include but are not limited to:

- 1. Reducing the number of transfers of a 9-1-1 call; (10%)
- 2. Reducing the infrastructure required to adequately provide 9-1-1 network services: (10%)
- 3. Promoting cost savings from resource sharing among 9-1-1 systems; (10%)
- 4. Facilitating interoperability and resiliency for the receipt of 9-1-1 calls; (10%)

5. Reducing the number of 9-1-1 systems and reducing the number of Public Safety Answering Points (PSAPs) within a 9-1-1 system; (30%)

6. Cost savings resulting from 9-1-1 system consolidation: (10%) and

7. Expanding E9-1-1 service coverage as a result of 9-1-1 system consolidation including to areas without E9-1-1 service. (20%)

The primary purpose of this initiative is to: 1) assist and encourage consolidations of Emergency Telephone System Boards (ETSBs) and PSAPs; 2) ensure E9-1-1 coverage is expanded throughout the State; and 3) create more efficient and cost-effective systems throughout the State. The anticipated benefit of this initiative is statewide 9-1-1 coverage that reduces the number of transfers of 9-1-1 calls, reduces the amount of infrastructure required statewide, promotes cost savings from resource sharing; facilitates interoperability and resiliency for the receipt of 9-1-1 calls, reduces the number of PSAPs statewide, and promotes long term cost savings.

Priority shall be given as grant funds are available:

- 1. To counties not providing 9-1-1 service as of January 1, 2016
- 2. First time grant applicants consolidating as required under Section 15.4a of this Act
- 3. Previous grant recipients that consolidated after January 1, 2016

4. Existing and previously completed consolidation projects for reimbursement of non-recurring costs related to the consolidation

- a. Incurred between 2010
- b. Incurred between 2011
- c. Incurred between 2012
- d. Incurred between 2013
- e. Incurred between 2014
- f. Incurred between 2015 and the State fiscal year of the grant application (SFY23)

Funds awarded through this grant shall only be used to offset NON-RECURRING costs associated with the consolidation of 9-1-1 systems and shall not be used for ongoing operational costs associated with the consolidated system. Consolidations/Modifications that do not result in the reduction of a PSAP(s) are not eligible for Consolidation Grant Funding.

Awarding Agency Name Illinois State Police

Agency Contact Name Cindy Barbera-Brelle

Agency Contact Phone 217/782-3200

Agency Contact Email Cindy.Barbera-Brelle@illinois.gov

## Fund Activity Category Law, Justice and Legal Services

Opportunity Manager Cindy Barbera-Brelle

Opportunity Posted Dates 12/9/2021 - 10/31/2022

Announcement Type Initial Announcement

Funding Opportunity Number 23-493-911

Public Link

https://il.amplifund.com/Public/Opportunities/Details/62b54862-b9e7-404d-bc86-a2a000333303

ls Published

No

**Funding Information** 

Total Program Funding \$5,000,000.00

Funding Sources

State

Funding Source Description

FUNDING INFORMATION

This award is utilizing state funds. Each fiscal year the Illinois State Police Office of the Statewide 9-1-1 Administrator is allocated funding as defined in 50 ILCS 750/30(b)(2)(D).

The total amount of funding that the Administrator expects to award is \$5,000,000.00.

The start date and period of performance for new awards will be July 1, 2022-June 30, 2023.

The applicant is required to submit a project narrative that describes how the award will be executed. The project plan shall include details about the 9-1-1 System Consolidation or Modification Plan as required by this Act in support of the consolidation and how it met or meets the criteria as listed in the Project Narrative section to enable the Administrator to

manage the grant agreement activity against planned project performance.

## FUNDING RESTRICTIONS

Funds will NOT be awarded for the following expense budget categories.

- 1 Personnel (Salaries and Wages)
- 2 Fringe Benefits
- 3 Travel
- 5 Supplies
- 9 Occupancy (Rent and Utilities)
- 10 Research and Development (R&D)
- 13 Direct Administrative Costs
- 14 Other or Miscellaneous Costs

## DETAILED FUNDING RESTRICTIONS

## 4 – EQUIPMENT

Funds will not be awarded for Mobile and Portable Radios or Mobile Data Computers for First Responders or for Law or Fire Records Management Systems or Jail Management Systems.

Equipment funded from previous Consolidation and NG9-1-1 Expenses grant awards is not eligible for reimbursement.

## 6 - CONTRACTUAL SERVICES

Services funded from previous Consolidation and NG9-1-1 Expenses grant awards are not eligible for reimbursement.

## 11 - TELECOMMUNICATIONS

Funds will be awarded for non-recurring 9-1-1 System Provider costs, if applicable.

### 12 - TRAINING AND EDUCATION

Training for Equipment funded from previous Consolidation and NG9-1-1 Expenses grant awards is not eligible for reimbursement.

9-1-1 systems outside of a municipality with a population more than 500,000 shall be eligible to apply.

### **Funding Restrictions**

Funds WILL NOT be awarded for the following expense budget categories: Personnel, Fringe Benefits, Travel, Supplies, Occupancy, Research and Development, Direct Administrative Costs, Other or Miscellaneous Costs.

## **Award Information**

Award Period 06/01/2022 - 06/30/2022

Award Announcement Date 6/1/2022

## Award Type Competitive

Capital Grant

No

Indirect Costs Allowed

No

Matching Requirement

No

## **Submission Information**

Submission Window 12/09/2021 12:00 AM - 02/01/2022 1:00 PM

Submission Timeline Type

One Time

Allow Multiple Applications Yes

Other Submission Requirements

Grant applications for consolidations that were completed in 2010-2015 will require a separate application for each year that the consolidations were completed.

## **Question Submission Information**

Question Submission Open Date 11/01/2021 12:00 AM

Question Submission Close Date 02/01/2022 12:00 AM

Question Submission Email Address

cindy.barbera-brelle@illinois.gov

Question Submission Additional Information

Questions regarding problems with the eligibility requirements are directed via email to:

Trudy Malkey - trudy.malkey@illinois.gov

State Awarding Agency Contact

Questions regarding the application process are directed via email or phone to:

Cindy Barbera-Brelle Statewide 9-1-1 Administrator 801 South 7th Street – 300A Springfield, IL 62703 Phone: 217.782.3200/312.771.7457 Email: cindy.barbera-brelle@illinois.gov

## **Technical Assistance Session**

Technical Assistance Session

Yes

Session Date and Time 12/09/2021 11:00 AM

Conference Info / Registration Link WebEx - Request invite from Agency Contact

## **Eligibility Information**

Eligibility Type Public

Eligible Applicants

## • Government Organizations

#### Additional Eligibility Information

1. Applicants that are eligible for 9-1-1 Consolidation Grants are 9-1-1 systems outside of a municipality with a population over of 500,000, counties not providing 9-1-1 service as of January 1, 2016 and 911 Authorities that consolidated ETSBs and PSAPs in 2010 through SFY23.

2. The agency must comply with all applicable provisions of state and federal laws and regulations pertaining to nondiscrimination, sexual harassment and equal employment opportunity including, but not limited to: The Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), The Public Works Employment Discrimination Act (775 ILCS 10/1 et seq.), The United States Civil Rights Act of 1964 (as amended) (42 USC 2000a-and 2000H-6), Section 504 of the Rehabilitation Act of 1973 (29 USC 794), The Americans with Disabilities Act of 1990 (42 USC 12101 et seq.), and The Age Discrimination Act (42 USC 6101 et seq.).

3. Cost Sharing or Matching will not be considered in the evaluation.

4. Indirect Costs are not allowed.

5. An Applicant's failure to meet an eligibility criterion by the time of the application deadline will result in the State awarding agency returning the application without review or, even though an application may be reviewed, will preclude the Administrator from making a State award.

## **Award Administration Information**

#### State Award Notices

Anticipated announcement no later than June 1, 2022. State Award Date no later than June 30, 2022.

Administrative and National Policy Requirements

1. Administrative and National Policy Requirements.

A Notice of State Award (NOSA) will be distributed by the awarding agency prior to issuance of a grant agreement. The NOSA will specify the terms and conditions of the award.

2. State Award Notices.

The successful applicant can expect to receive a NOSA to accept and an updated UBT and Grant Agreement to execute following selection.

3. Reporting.

The grant recipient is required to submit quarterly performance and financial reports to the Administrator.

Reporting

#### **PROJECT MONITORING**

The Illinois State Police will require the successful Applicant to submit to monitoring of the Project. The Applicant will be required to prepare a detailed budget indicating expenses for commodities, equipment, and materials, as well as to submit quarterly performance and financial reports. Details regarding the budget and quarterly performance and financial reports will be outlined in the grant agreement.

The start date and period of performance for new awards will be July 1, 2022-June 30, 2023.

#### State Awarding Agency Contacts

Cindy Barbera-Brelle Statewide 9-1-1 Administrator 801 South 7th Street – 300A Springfield, IL 62703 Phone: 217.782.3200/312.771.7457 Email: cindy.barbera-brelle@illinois.gov

#### Other Information

1. Content and Form of Application Submission. The following forms are required content of the application:

CONSOLIDATION GRANT APPLICATION

Grant applications for consolidations that were completed in 2010-2015 will require a separate application for each year where the consolidations were completed.

The Project Narrative MUST include the following information:

A. Project Narrative - include a list of core functions, activities or tasks (to include the following: Procure consolidation equipment and services components, install and configure consolidation equipment and services components, test equipment and services components, train Staff on equipment and services components) required to implement the Grantee's approved Consolidation or Modification Plan.

1. Funding requests must include a detailed project narrative. This project narrative must reference the impact on operational services and consequences of not receiving funding, the benefits of receiving funding, the relationship to local strategic and capital improvement plans, and sustainability. A description of the PSAPs, and agencies served and number of PSAP positions prior to consolidation or modification and the PSAPs, agencies served and number of PSAP positions after consolidation or modification is required. The project narrative section on the grant application has corresponding text boxes for the 9-1-1 Authority to provide this information.

2. Funding requests for Consolidation Projects must include a detailed project description that includes how you plan to use the grant funds to complete the consolidation.

B. Project Timeline – for each applicable task of the project indicate the estimated completion dates throughout the term of the grant to complete the project(s).

## EXPENSE BUDGET for 911 CONSOLIDATION GRANTS

A Narrative is required for each expense budget category along with a detailed vendor prepared itemized quote or invoice submitted as an attachment. Applicants Narrative shall explain the reason for each requested budget item and provides the basis for its cost. A vendor prepared quote is not a substitute for a budget narrative. Budgetary quotes received from a vendor(s) during the application process and submitted with the application do not commit the 911 Authority to use that vendor(s) once the grant award is issued. All items requested must be thoroughly justified and clearly related to the proposed project.

Quotes and/or Invoices must include an itemized cost breakdown to support each item included in the Expense Budget. Should the application be for reimbursement for consolidations that occurred between 2010 and SFY23 invoices are required.

Refer to the State's Grant Accountability and Transparency Act Resource Library for additional information.

https://www2.illinois.gov/sites/GATA/Pages/ResourceLibrary.aspx

### PERFORMANCE PLAN

Required to track Achievements against Goals and to create and close performance related tracking periods.

There are four Achievements:

- 1. Procure Equipment/Service Components
- 2. Install/Configure Equipment/Systems
- 3. Test Equipment/Systems
- 4. Train Staff on Equipment/Systems

A Goal is added for each Achievement. An estimated completion date is required for each Goal

An entity may apply for a grant but will not be eligible for a grant award until the entity has prequalified through the Grant Accountability and Transparency Act (GATA) Grantee Portal, https://grants.illinois.gov/portal/. During pre-qualification, Dun and Bradstreet verifications are performed including a check of Debarred and Suspended status and good standing with the Secretary of State. The pre-qualification process also includes a financial and administrative risk assessment utilizing an Internal Controls Questionnaire (ICQ). If applicable, the entity will be notified that it is ineligible for award as a result of the Dun and Bradstreet verification. The entity will be informed of corrective action needed to become eligible for a grant award.

2. Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM).

This paragraph must state clearly that each applicant (unless the applicant is an individual or Federal or State awarding

agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:

(i) Be registered in SAM before submitting its application. If you are not registered in SAM, this link provides a connection for SAM registration:

https://usfcr.com/sam-registration/

ii) provide a valid DUNS number in its application; and

(iii) continue to maintain an active SAM registration with current information at all times during which it has an active Federal, Federal pass-through or State award or an application or plan under consideration by a Federal or State awarding agency. It also must state that the State awarding agency may not make a Federal pass-through or State award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time the State awarding agency is ready to make a Federal pass-through or State award agency may determine that the applicant is not qualified to receive a Federal pass-through or State award and use that determination as a basis for making a Federal pass-through or State award to another applicant.

3. An entity may apply for a grant but will not be eligible for a grant award until the entity has an approved Consolidation or Modification Plan.

## **Project Information**

## **Application Information**

Application Name

Award Requested

Cash Match Requirement \$0.00

Cash Match Contributions \$0.00

In-Kind Match Requirement \$0.00

In-Kind Match Contributions \$0.00

Other Funding Contributions \$0.00

Total Award Budget \$0.00

## **Primary Contact Information**

Name

Email Address

Address

Phone Number

## **Project Description**

## **Uniform Grant Application - Applicant Completed Section**

## **Applicant Information**

Legal Name (Name used for DUNS registration and grantee pre-qualification)

Common Name (DBA)

Employer/Taxpayer Identification Number (EIN, TIN)

Organizational DUNS Number

GATA ID (assigned through the grantee portal)

SAM Cage Code

**Applicant's Organizational Unit** 

Department Name

**Division Name** 

Applicant's Name and Contact Information for Person to be Contacted for Program Matters involving this Application

First Name

Last Name

Suffix

Title

Organizational Affiliation

**Telephone Number** 

Fax Number

Email Address

Applicant's Name and Contact Information for Person to be Contacted for Business/Administrative Office Matters involving this Application

First Name

Last Name

Suffix

Title

Organizational Affiliation

Telephone Number



Fax Number

Email Address

## **Areas Affected**

What areas are affected by the Project (cities, counties, state-wide)?

Add Attachments (e.g., maps)

Legislative and Congressional Districts of Applicant

Legislative and Congressional Districts of Program/Project

Attach an additional list, if necessary

**Applicant's Project** 

Description Title of Applicant's Project

Proposed Project Term Start Date

Proposed Project Term End Date

**Applicant Certification** 

By signing this application, I certify (1) to the statements contained in the list of certifications\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001)

(\*)The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity. If a NOFO was not required for the award, the state agency will specify required assurances and certifications as an addendum to the application.

Applicant Certification



## Eligibility

**Eligibility Information** 

9-1-1 Systems outside of a municipality with a population over 500,000 and counties not providing 9-1-1 Service as of January 1, 2016, shall be eligible to apply for consolidation grants.

Is your system outside of a municipality with a population over 500,000?

- ⊖ Yes
- $\bigcirc$  No

## You are NOT eligible for this grant.

Did your county/system have 9-1-1 service as a January 1, 2016?

- $\bigcirc$  Yes
- $\bigcirc$  No

Do you have an order of Authority to operate as a 9-1-1 System?

- $\bigcirc$  Yes
- $\bigcirc$  No

Have you submitted a Consolidation or Modification Plan to the Department?

- $\bigcirc$  Yes Modification Plan
- $\bigcirc$  Yes Consolidation Plan
- $\bigcirc$  No

Please attach a copy of your Modification Plan.

If no, please explain below.

When you're finished answering the questions on this page, click <u>Mark as Complete</u>. An application cannot be submitted until all pages are marked as complete.

Not finished with this page yet? Click Save or Save & Continue to fill out the missing information at a later time.

## **Consolidation/Modification Plan - Documentation & Details**

## **Consolidation/Modification Plan Documentation**

Which Consolidation/Modification form did you complete?

○ 2010-2015 Long Form ○ 2010-2015 Short Form ○ Other

For 2010-2015 Consolidations/Modifications (Long Form). Provide the Following Information:

ICC Order #

Date of Order

Date Consolidation/Modification Completed:

## For 2010-2015 Consolidations/Modifications (Short Form):

Provide a copy of the Written Notification that was sent to the ICC .

Date Consolidation/Modification Completed:

Other Forms Submitted

## **Consolidation/Modification Plan Details**

Does the Consolidation/Modification include the decommissioning and/or merger of one or more ETSB's?

○ Yes○ No

If yes, how many?

0

List ETSB's Decommissioned:

Does the Consolidation/Modification include the elimination of one or more PSAP's?

⊖ Yes

 $\bigcirc$  No

If yes, how many?

0

List PSAP's Decommissioned and/or Closed:

List of Agencies Served PRIOR to Consolidation/Modification of PSAP(s):

List of Agencies Served AFTER Consolidation/Modification of PSAP(s):

How many console positions did the PSAP(s) have PRIOR to consolidation? Indicate number of consoles by PSAP. 0

How many console positions did/will the PSAP(s) have AFTER consolidation? Indicate number of consoles by PSAP. 0



When you're finished answering the questions on this page, click <u>Mark as Complete</u>. An application cannot be submitted until all pages are marked as complete. Not finished with this page yet? Click <u>Save</u> or <u>Save & Continue</u> to fill out the missing information at a later time.

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## **Project Narrative & Implementation Strategy**

## **Project Narrative**

Provide a narrative for the project. The narrative should be a thorough, concise, and complete description of the proposed project. The Project Narrative MUST include the following, a Project Description that includes the following tasks with estimated completion dates 1. consolidation equipment and services components procured, 2. consolidation equipment and services components installed and configured, 3. consolidation equipment and services components tested and 4. staff trained on equipment and services components, required to implement the Grantee's project and Project Timeline. Identify how the Consolidation or Modification specifically addresses the seven (7) criteria listed in the Program Description.

## Implementation Strategy

Provide the strategy that will be employed/was employed to implement your consolidation.

When you're finished answering the questions on this page, click <u>Mark as Complete</u>. An application cannot be submitted until all pages are marked as complete. Not finished with this page yet? Click **Save** or **Save & Continue** to fill out the missing information at a later time.

## **Demographic and Public Safety Information**

1. What is the approximate population of the geographic area to be served post consolidation?

0

How many law enforcement agencies have jurisdiction within the geographic area to be served post consolidation?
0

3. How many fire departments/fire protection districts have jurisdiction within the geographic area to be served post consolidation?

0

4. How many EMS/ambulance service providers have jurisdiction within the geographic area to be served post consolidation?

0

5. Are there any other emergency service providers that have jurisdiction within the geographic area to be served post consolidation?

- $\bigcirc$  Yes
- $\bigcirc$  No

Other Emergency Services

When you're finished answering the questions on this page, click <u>Mark as Complete</u>. An application cannot be submitted until all pages are marked as complete.

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## Analysis of Needs

Are there additional financial resources available to assist with the acquisition and/or construction required by the Consolidation Plan?

⊖ Yes

 $\bigcirc$  No

If yes, please explain the additional financial resources below.

Is it possible to proceed with the consolidation with the absence of grant funds?

⊖ Yes

 $\bigcirc$  No

What other funds are required to proceed?

Does the Consolidation require the acquisition and/or construction of a new property or building?

 $\bigcirc$  Yes

 $\bigcirc \mathsf{No}$ 

If yes, please explain below.

Property/Building/Construction Total Budget

\$0.00

Does the Consolidation require the acquisition of new or additional equipment?

⊖ Yes

⊖ No

If yes, please explain the equipment required below.

Equipment Total Budget \$0.00

When you're finished answering the questions on this page, click <u>Mark as Complete</u>. An application cannot be submitted until all pages are marked as complete.

Not finished with this page yet? Click Save or Save & Continue to fill out the missing information at a later time.



## Budget

## Proposed Budget Summary

## Expense Budget

	Grant Funded	Non-Grant Funded	Total Budgeted
1. Personnel (Salaries and Wage	<b>es)</b> (2 CFR 200.430)		
Subtotal	\$0.00	\$0.00	\$0.00
2. Fringe Benefits (2 CFR 200.43	1)		
Subtotal	\$0.00	\$0.00	\$0.00
<b>3. Travel</b> (2 CFR 200.474)			
Subtotal	\$0.00	\$0.00	\$0.00
4. Equipment (2 CFR 200.439)			
Subtotal	\$0.00	\$0.00	\$0.00
5. Supplies (2 CFR 200.94)			
Subtotal	\$0.00	\$0.00	\$0.00
6. Contractual Services & Subay	wards (2 CFR 200.318 &	200.92)	
Subtotal	\$0.00	\$0.00	\$0.00
7. Consultant Services and Expe	enses (2 CFR 200.459)		
Subtotal	\$0.00	\$0.00	\$0.00
8. Construction			
Subtotal	\$0.00	\$0.00	\$0.00
9. Occupancy (Rent and Utilities	) (2 CFR 200.465)		
Subtotal	\$0.00	\$0.00	\$0.00
10. Research and Development	<b>(R&amp;D)</b> (2 CFR 200.87)		
Subtotal	\$0.00	\$0.00	\$0.00
11. Telecommunications			
Subtotal	\$0.00	\$0.00	\$0.00
12. Training and Education (2 Ci	FR 200.472)		
Subtotal	\$0.00	\$0.00	\$0.00
13. Direct Administrative Costs (	2 CFR 200.413 (c))		
Subtotal	\$0.00	\$0.00	\$0.00
14. Other or Miscellaneous Cost	S		
Subtotal	\$0.00	\$0.00	\$0.00



G	Grant Funded	Non-Grant Funded	Total Budgeted
Indirect Cost (2 CFR 200.414)			
Subtotal	\$0.00	\$0.00	\$0.00
Total Proposed Cost	\$0.00	\$0.00	\$0.00
Revenue Budget			
	Grant Funded	Non-Grant Funded	Total Budgeted
Grant Funding			
Award Requested	\$0.00		\$0.00
Subtotal	\$0.00		\$0.00
Non-Grant Funding			
Cash Match		\$0.00	\$0.00
In-Kind Match		\$0.00	\$0.00
Other Funding and Contributions		\$0.00	\$0.00
Subtotal		\$0.00	\$0.00
Total Proposed Revenue	\$0.00	\$0.00	\$0.00

## **Proposed Budget Detail**

### **Proposed Budget Narrative**

### 1. Personnel (Salaries and Wages) (2 CFR 200.430)

List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project and length of time working on the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. Personnel cannot exceed 100% of their time on all active projects.

## 2. Fringe Benefits (2 CFR 200.431)

Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in category (1) direct salaries and wages, and only for the percentage of time devoted to the project.

### **3. Travel** (2 CFR 200.474)

For training projects, show the number of trainees and unit cost involved. Travel and meals for trainees should be listed separately. NOTE: Dollars requested in the travel category should be for staff travel only. Travel for consultants should be shown in the Consultant category along with the consultant's fee. Travel for training participants, advisory committees, review panels and etc., should be itemized the same way as indicated above and placed in the Miscellaneous category.

Equipment is defined as an article of tangible personal property that has a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. An applicant organization may classify equipment at a lower dollar value but cannot classify it higher than \$5,000. (Note: Organization's own capitalization policy for classification of equipment can be used). Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the Contractual Services category.

## 5. Supplies (2 CFR 200.94)

List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

## 6. Contractual Services & Subawards (2 CFR 200.318 & 200.92)

Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole contracts in excess of \$150,000 (See 2 CFR 200.88). NOTE : this budget category may include subawards. Provide separate budgets for each subaward or contract, regardless of the dollar value and indicate the basis for the cost estimates in the narrative. Describe products or services to be obtained and indicate the applicability or necessity of each to the project.

### Please also note the differences between subaward, contract, and contractor (vendor):

1) Subaward (200.92) means an award provided by a pass-through entity to a sub-recipient for the sub-recipient to carry out part of a Federal/State award, including a portion of the scope of work or objectives. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal/State program. 2) Contract (200.22) means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.

3) "Vendor" or "Contractor" is generally a dealer, distributor or other seller that provides supplies, expendable materials, or data processing services in support of the project activities.

### 7. Consultant Services and Expenses (2 CFR 200.459)

### **Consultant Services (Fees):**

For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project.

### **Consultant Expenses:**

List all expenses to be paid from the grant to the individual consultant in addition to their fees (i.e., travel, meals, lodging, etc.)

### 8. Construction

Provide a description of the construction project and an estimate of the costs. As a rule, construction costs are not allowable unless with prior written approval. In some cases, minor repairs or renovations may be allowable. Consult with the program office before budgeting funds in this category. Estimated construction costs must be supported by documentation including drawings and estimates, formal bids, etc. As with all other costs, follow the specific requirements of the program, the terms and conditions of the award, and applicable regulations.

List items and descriptions by major type and the basis of the computation. NOTE: This budgetary line item is to be used for direct program rent and utilities, all other indirect or administrative occupancy costs should be listed in the indirect expense section of the Budget worksheet and narrative. Maintenance and repair costs may be included here if directly allocated to program.

## 10. Research and Development (R&D) (2 CFR 200.87)

All research activities, both basic and applied, and all development activities that are performed by non-Federal entities directed toward the production of useful materials, devices, systems, or methods, including design and development of prototypes and processes. Consult with the program office before budgeting funds in this category.

### **11. Telecommunications**

List items and descriptions by major type and the basis of the computation. NOTE: This budgetary line item is to be used for direct program telecommunications, all other indirect or administrative telecommunication costs should be listed in the indirect expense section of the Budget worksheet and narrative.

## 12. Training and Education (2 CFR 200.472)

Describe the training and education cost associated with employee development. Include rental space for training (if required), training materials, speaker fees, substitute teacher fees, and any other applicable expenses related to the training. When training materials (pamphlets, notebooks, videos, and other various handouts) are ordered for specific training activities, these items should be itemized below.

## 13. Direct Administrative Costs (2 CFR 200.413 (c))

The salaries of administrative and clerical staff should normally be treated as indirect (F&A) costs. Direct charging of these costs may be appropriate only if all of the following conditions are met: (1) Administrative or clerical services are integral to a project or activity; (2) Individuals involved can be specifically identified with the project or activity; (3) Such costs are explicitly included in the budget or have the prior written approval of the State awarding agency; and (4) The costs are not also recovered as indirect costs.

### 14. Other or Miscellaneous Costs

This category contains items not included in the previous categories. List items by type of material or nature of expense, break down costs by quantity and cost per unit if applicable, state the necessity of other costs for successful completion of the project and exclude unallowable costs (e.g.. Printing, Memberships & subscriptions, recruiting costs, etc.)

### Indirect Cost (2 CFR 200.414)

The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s).

## **Performance Plan**

## **Proposed Performance Plan**

## PROCURE EQUIPMENT/SERVICE COMPONENTS - indicate the estimated completion date.

Goal Name	Goal Type	Goal Details
	Milestone	Due Date

## INSTALL/CONFIGURE EQUIPMENT/SYSTEMS - indicate the estimated completion date.

Goal Name	Goal Type	Goal Details
	Milestone	Due Date

### TEST EQUIPMENT/SYSTEMS - indicate the estimated completion date.

Goal Name	Goal Type	Goal Details
	Milestone	Due Date

### TRAIN STAFF ON EQUIPMENT/SYSTEMS - indicate estimated completion date.

Goal Name	Goal Type	Goal Details
	Milestone	Due Date

### **Proposed Performance Narrative**

### **PROCURE EQUIPMENT/SERVICE COMPONENTS - indicate the estimated completion date.**

Requirements are documented, components to be purchased are identified. RFP (or other bid related processes) is drafted, proposals are evaluated, contract is signed, purchase orders are issued, and quotes are obtained.

### INSTALL/CONFIGURE EQUIPMENT/SYSTEMS - indicate the estimated completion date.

Equipment/Systems and Service components purchased are delivered, provided, configured and installed.

### TEST EQUIPMENT/SYSTEMS - indicate the estimated completion date.

Equipment, system(s) or solution(s) are tested and put into production.

### TRAIN STAFF ON EQUIPMENT/SYSTEMS - indicate estimated completion date.

Training is completed