



**State of Oregon**  
**Office of State Fire Marshal**  
State Emergency Response Commission  
and  
Oregon's Local Emergency Planning Committees  
Supporting community-based hazardous materials emergency preparedness

**Hazardous Materials Emergency  
Preparedness (HMEP)  
Grant Application and Guidance Manual**

**Application deadline – May 15, 2010**  
**Project performance period October 1, 2010 to September 30, 2011**



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# Grant Application Checklist and Tips

- **Applications are due by 5:00 p.m., May 15, 2010 at Office of State Fire Marshal.**
- Application available electronically, in a fillable format. Application may be completed online, then save to your computer, or save to your computer to complete later. Click on the email button to forward to OSFM. Grant submissions must be on the official OSFM grant application.
- The application contains certain required fields. Complete the field, even if with an NA or not applicable comment.
- Applicant information is complete, legible, and signed.
- **Complete all sections of the application in the space provided.** If a section does not apply to your grant, indicate in the space that it is not applicable.
- **Project Narrative** – Read the narrative subparts. Responses should be clear and concise. Review subpart responses to ensure the information requested is provided. Avoid cutting and pasting information from other grants, or including irrelevant information.
- Project application information
  - Project Title
  - Project Narrative
  - Provide appropriate background information, if necessary
  - Impact of the program
  - Transportation-Related Work (if applicable)
  - Time line (who, what, and when – show specifics)
  - Monitoring efforts (how, what, after action, corrections, lessons learned reports)
  - Coordination of planning
- Describe the activities and tasks to be conducted, the number and types of deliverables and products to be completed.
- Budget (cost of work which are eligible under the grant). This is more than a statement of costs. The review committee will look at the budget to see how well it fits the grant activities. The budget estimate should be accurate and complete. Projects costs are those that will be incurred during the grant period. Address the match Information (how this will be met).
- Review for any conflicts of interest (subcontractors, multiple roles). Specify any possible conflicts (i.e. Project manager is also owner/employee of company being contracted to provide services).

Please limit any additional documentation submitted  
with the grant application to two (2) pages.

**E-mail the application to [terry.wolfe@state.or.us](mailto:terry.wolfe@state.or.us) and mail a paper copy of  
the application to:**

**Terry Wolfe – Grant Manager  
Office of State Fire Marshal  
4760 Portland Road NE  
Salem, OR 97305**

**Please refer all questions concerning this application and project to:**

**Terry Wolfe  
503-934-8219  
[terry.wolfe@state.or.us](mailto:terry.wolfe@state.or.us)**

|                                   |
|-----------------------------------|
| Application Received _____        |
| Application Reviewed _____        |
| Approved _____ Not Approved _____ |

# Grant Application

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**Application due date: MAY 15, 2010**

## 1. Grant Request (check appropriate box)

- Training**
- Planning**
- Exercise**

- Commodity Flow Study**
- Other**

Project Title\*:

Federal Tax Identification Number\*:

HMEP Grant Funds\*:        \$

Matching Funds\*:        \$

Total Amount\*:        \$

*Round to the Nearest  
Dollar*

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## 2. Applicant Information:

Organization (Applicant)\*:

Project Manager\*:

Contact Title\*:

Address\*:

City, State, and Zip\*:

Phone\*:

Fax\*:

E-mail\*:

### **Individual responsible for signing contracts:**

Name\*:

Title\*:



## 5. Budget\*

|   | Grant Funds  | Local Agency |
|---|--------------|--------------|
| Personnel Costs (for 25% soft match requirement)                        | XXXXXXXXXXXX |              |
| Fringe Benefits (1/3 of personnel costs for 25% soft match requirement) | XXXXXXXXXXXX |              |
| Travel  |              |              |
| Miscellaneous (printing, mailing, etc.)                                 |              |              |
| Supplies**  |              |              |
| Contractual   |              |              |
| Other (specify in attachment)   |              |              |
| <b>Total:</b>   |              |              |

Provide a summary of costs using this sheet. Attach a detailed list of items for reimbursement consideration.

\*List the funding amount in the grant column and the dollar or soft match in the local agency column.

\*\*Reimbursement for supplies is for materials used for exercise or training session. Reimbursement is available for items such as, pencils, paper, scratch pads, film, etc. The purchase of overhead projectors and non-disposable cameras are examples of ineligible expenses.

**The Office of State Fire Marshal makes the final determination on all expense reimbursements. If you have any questions, contact the grant manager before making a purchase.**

### **Documenting the 25 percent in-kind (soft) and hard (cash) match:**

- When using hard match, indicate the amount of hard match cash.
- If there is a charge to attend the training, activity, etc. provide a description of the estimated income (e.g. registration fees, donations, etc.).
- Estimate volunteer hours, including salary and benefits, at \$15.00 per hour.
- Before sending in a request for mileage reimbursement, contact the grant manager for the current reimbursement rate.

**Grant project information must fit into the space provided.**

## **6. Project Narrative**

### **Project Description:**

A. **Project**. Describe the project. Be clear and concise.

B. **Objectives**. List and prioritize the specific measurable and obtainable objectives.

C. **Itemize the tasks and include a timetable.** Who will do the work? Who is supervising the project? Who is responsible for managing the grant? How will you make sure time lines and tasks are being met?

D. **Overall contribution.** How does the project contribute to the overall effort of addressing the local hazardous materials planning and training? How does the activity address a need or provide a solution to the problem: i.e. long-range plans, etc?

E. **Project management**. What plans, strategies, or practices are you using to reach the project objectives? Have all pertinent parties agreed to these plans, strategies, and practices?

F. **Evaluation**. How will you evaluate project results in the short and long-term? How will you define and measure the project's success?

G. **Education**: Are there plans or strategies to educate the public about hazardous materials and protective measures in the community?

H. **Results**. What are the expectations of the project? Is the project a continuation of a past HMEP Grant funded project? If so, report briefly on the accomplishments of the previous project.

- I. **Justification.** Why should the committee approve your project request? Explain if, or how this proposal benefits human health and safety (citizen/first responder, etc.), addresses hazardous materials or the communities' right to know.

## **7. Attachments**

Please attach documentation only if necessary, limit attachments to two (2) pages.

## **8. Comments or additional information**

