

# West Virginia

## 2020 Homeland Security Grant Program

### Application Directions



# West Virginia

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## 2020 Homeland Security Grant Program

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### **Contact Information**

#### **Area Liaisons**

##### **REGION I:**

Brad Hartley  
(304) 807-3275  
Brad.P.Hartley@wv.gov

##### **REGION IV:**

Shawn Dunbrack  
(304) 807-5630  
Shawn.D.Dunbrack@wv.gov

##### **REGION II:**

Jason Lively  
(304) 545-3058  
Jason.K.Lively@wv.gov

##### **REGION V:**

Theresa White  
(304) 807-3460  
Theresa.G.White@wv.gov

##### **REGION III:**

Sandy Green  
(304) 807-5135  
Sanford.H.Green@wv.gov

##### **REGION VI:**

Greg Fuller  
(304) 807-3076  
Gregory.M.Fuller@wv.gov

### **DHSEM- HS State Administrative Agency**

For questions related to the grant application, allowable projects, or reporting requirements, please contact:

David Hoge  
(304) 558-5380  
[david.k.hoge@wv.gov](mailto:david.k.hoge@wv.gov)

Matt Blackwood  
(304) 558-5380  
[matthew.j.blackwood@wv.gov](mailto:matthew.j.blackwood@wv.gov)

Chuck Bennett  
(304) 558-5380  
[charles.w.bennett@wv.gov](mailto:charles.w.bennett@wv.gov)

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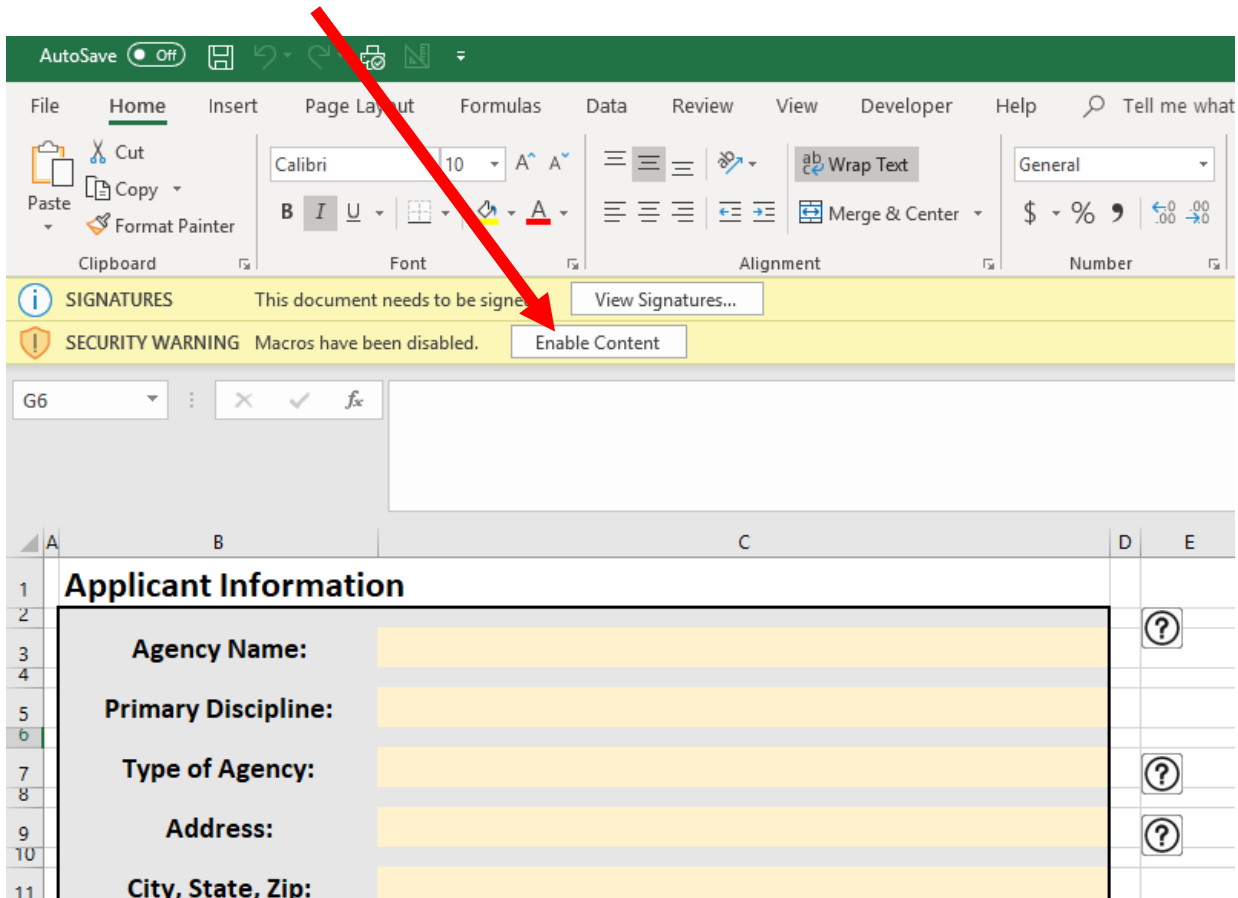
### Application Directions

#### Download and Save the Grant Application (Excel file) from the Email.

- Recommend that you create a 2020 HSGP folder in your documents and copy all files from the email. All of these documents will be useful during the application process.

#### Open the Grant Application (Excel file)

#### Enable the Macros



The screenshot shows the Microsoft Excel interface. At the top, the ribbon includes tabs for File, Home, Insert, Page Layout, Formulas, Data, Review, View, Developer, and Help. The Home tab is active, showing options for Clipboard, Font, Alignment, and Number. A yellow security warning banner is displayed, stating "SECURITY WARNING: Macros have been disabled." with an "Enable Content" button. A red arrow points to this button. Below the warning, the spreadsheet grid is visible, starting with a header row "Applicant Information" in row 1. The data area contains five rows of input fields: "Agency Name:", "Primary Discipline:", "Type of Agency:", "Address:", and "City, State, Zip:". Each input field is highlighted in yellow and has a question mark icon in column D.

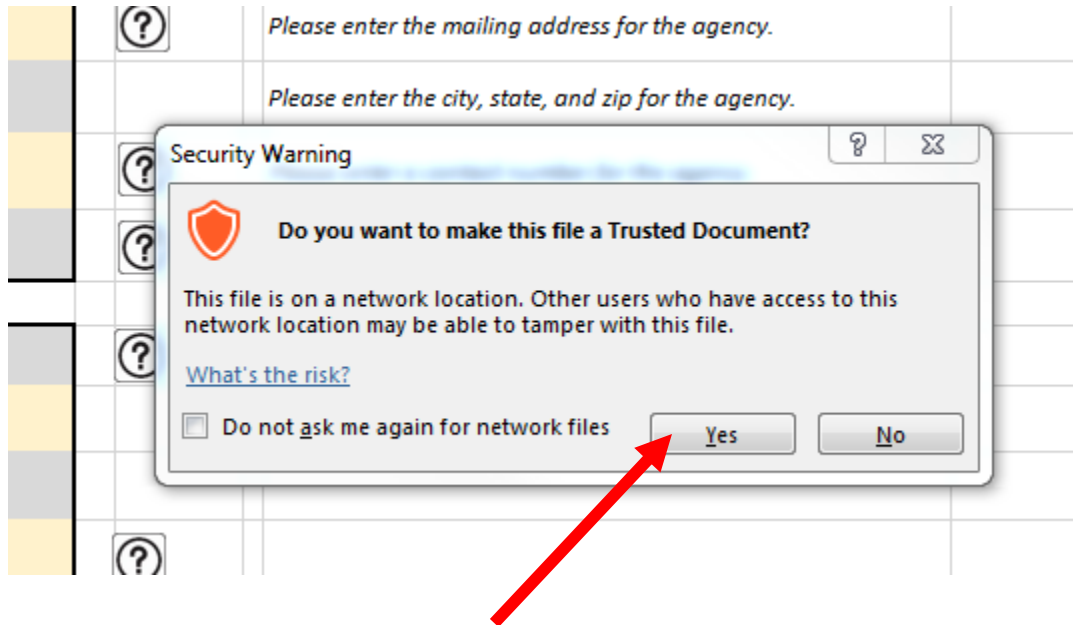
Applicant Information				
	Agency Name:			?
	Primary Discipline:			
	Type of Agency:			?
	Address:			?
	City, State, Zip:			

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### Application Directions

Click on YES to make this file a Trusted Document



Save blank Grant Application before you start filling in the information.

- Click FILE
- Click SAVE AS
- Use the following naming structure

***2020HSGP Jurisdiction\_name Agency\_name Project***

**2020HSGP Jackson County OES SIRN Radios**

**2020HSGP Upshur County Sheriff MDTs**

**2020HSGP Greenbrier County Health Dept Shelter Supplies**


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#### Complete Step 1: Applicant Information tab

<b>Phone:</b>	
<b>Email:</b>	
<b>Vendor Agency (OASIS):</b>	
<b>Vendor Address (OASIS):</b>	
<b>City, State, Zip (OASIS):</b> (include +4 Zip code)	
<b>Step 1 - Applicant</b>   Step 2 - Project Summary   Step 3 - Justification   Planning   Organization	



Make sure that you are on the *Step 1 – Applicant* tab

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**Complete all data fields with the correct information.**

<b>Agency Name</b>		The Agency Name is the name of the agency applying for the grant. For example, it could be <i>Lincoln County Health Department</i> or the <i>Charleston Fire Department</i> or the <i>Huntington Police Department</i> .
<b>Primary Discipline:</b>		Select the discipline that most closely matches your agency or the primary focus of the project. It is understood that some projects will benefit multiple disciplines.
<b>Type of Agency</b>		You must select the appropriate level of government. This is a pull-down menu listing several options: <i>Municipality, County, or State</i> .
<b>Address</b>		Please put the mailing address of the Agency Headquarters or main office.
<b>City, State, Zip</b>		Please put the city, state, and zip code for the agency headquarters.
<b>Phone</b>		Please put the primary phone number for the agency headquarters.
<b>WV DHSEM Region</b>		Please select the WV Homeland Security Region of the agency applying for the grant. If this is a regional grant that crosses multiple Homeland Security Regions, please put the region of the agency which is serving as the Fiscal Officer.

<b>Project Director</b>		Please provide the name of the Project Director. <b>This person cannot also be listed as the Fiscal Officer.</b>
<b>Address</b>		Please put the mailing address of the Project Director.
<b>City, State, Zip</b>		Please put the city, state, and zip code for the Project Director.
<b>Phone</b>		Please put the primary phone number for the Project Director.
<b>Email</b>		Please put the primary email address for the Project Director.

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<b>Vendor Agency (listed in WV OASIS)</b>		Please provide the name of the fiscal agency as listed in WV OASIS. You must provide the name exactly as listed in WV OASIS.
<b>Address</b>		Please put the WV OASIS mailing address.
<b>City, State, Zip</b>		Please put the city, state, and zip code. Include the Zip +4 digit
<b>Fiscal Officer</b>		Please list the name of Fiscal Officer. <b>This person cannot also be listed as the Project Director.</b>
<b>Phone</b>		Please put the primary phone number for the Fiscal Officer.
<b>Email</b>		Please put the primary email address for the Fiscal Officer.

<b>OASIS Vendor ID</b>	Please enter your agency's OASIS Vendor ID#
<b>DUNS Number</b>	Please enter your agency's DUNS (Data Universal Number System Number).
<b>FEIN</b>	Please enter your agency's federal Employee Identification Number.

**REMEMBER TO SAVE YOUR PROGRESS**

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### Application Directions

### Complete Step 2: Project Summary tab

You are required to complete separate Grant Applications for each proposed project. It is permissible to combine related projects on a single grant proposal. For instance, if your police department was planning on purchasing vests, helmets, and shields for the SRT, all of those items can be grouped in a single application. However, if you were planning on buying helmets and mobile data terminals (MDTs) those would need to be submitted using two different applications.

<b>Phone:</b>	
<b>Email:</b>	
<b>Vendor Agency (OASIS):</b>	
<b>Vendor Address (OASIS):</b>	
<b>City, State, Zip (OASIS):</b> (include +4 Zip code)	
<b>Step 1 - Applicant</b>   Step 2 - Project Summary   Step 3 - Justification   Planning   Organization	



Make sure that you are on the *Step 2 – Project Summary* tab



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<b>Project Title</b>	<p>Please provide a brief title for this project. It should include enough information to understand the basic intent of the proposal. For instance, examples could include: <i>“To purchase 12 mobile SIRN radios for Parkersburg Fire Department”</i> or <i>“To develop and conduct a series of HSEEP exercises related to Mass Causality Event at the county fair.”</i> Please try to keep it at a maximum of 25 words. It should be brief but still convey what the project will do. Here are some examples that are too vague: <i>“To purchase needed hazmat equipment”</i> or <i>“To support interoperable communication efforts.”</i></p>
<b>Project Description</b>	<p>This is where you can provide more details related to the proposed project. Using one of the examples above:</p> <p style="text-align: center;"><i>This project will involve purchasing 12 mobile radios to be installed in each of the mobile apparatus of the Fire Department. This will provide us with one radio in all of the rescue vehicles plus the Chief’s truck. The rest of the county has switched to the SIRN system and we are the last agency still using a legacy system.</i></p> <p>We do not need a history of terrorism or homeland security as part of the justification. This should solely focus on this specific proposed project. Clearly identify the gap you are wanting to close.</p>

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<b>How was this gap identified?</b>	<p>The intent of the Homeland Security Grant Program is to close gaps identified in a jurisdictional THIRA, a real-world event, or an exercise.</p> <p>Jurisdictional THIRA: list jurisdiction name and year</p> <p>Real-World Event: list event and year</p> <p>Exercise: list exercise name and year</p> <p>If the project is focused on a critical capability which has not been identified through the THIRA, real world event, or an exercise, please list <b>CRITICAL CAPABILITY</b> in the Jurisdictional THIRA line.</p>
<b>2020 Priorities</b>	Please select the grant priority in which your proposed project fits.
<b>Core Capability</b>	All projects must be linked back to at least one of the 32 Core Capabilities as outlined in the National Preparedness System. While three places are provided we only want the primary capabilities listed. A copy of the 32 Core Capabilities is provided with the application materials. Using the pull-down list please select the relevant Core Capabilities associated with this proposal.
<b>WV Homeland Security Strategy</b>	All projects must also be linked to the WV Homeland Security Strategy. Using the pull-down list please provide the best link between this project and the Strategy. A copy of the Homeland Strategy Goals and Objectives is provided with the application material.

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<b>Milestones</b>	<p>Space is available to list 8 milestones. A simple project will likely not require 8 milestones but overly complicated ones might have 8 distinct milestones. These are tangible steps towards completing this project.</p> <p><i>Review SIRM approved radio list and discuss model specifications.</i></p> <p><i>Contact vendors and request quotes for radios.</i></p> <p><i>Evaluate quotes and seek agency approval for purchasing.</i></p> <p><i>Order radios and related equipment.</i></p> <p><i>Arrange for radio programming and get radios programmed.</i></p> <p><i>Install radios in all vehicles.</i></p> <p><i>Conduct training on radio operations with all staff</i></p> <p><i>Evaluate radio operations and training.</i></p> <p>Listing two milestones is likely insufficient for most proposed projects.</p>
<b>Sustainment</b>	<p>Does your organization have the capacity to implement this project and the ability to sustain the project objectives (including equipment maintenance and replacement, and adequate personnel) beyond the grant period? Please select <i>Yes, No, Not Applicable</i>.</p>
<b>Will a contractor be used on this project?</b>	<p>Please select Yes or No. If you plan on using a contractor on this project, you are required to complete the Contractor tab.</p>
<b>Project Status</b>	<p>Is this a new project? Is it building on existing projects? Is it sustaining an existing projects?</p>
<b>Estimated Time to Complete Project</b>	<p>How long do you expect this project to take to complete? This should be from the time of the awarding of the grant to its completion. Use the pull-down list to select the Project Period.</p>

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### Complete Step 3: Justification tab

The FY2020 HSGP Notice of Funding Opportunity requires additional justification for proposal approval. Applicants are required to link specific project request to terrorism prevention. Please provide the necessary information to the questions. There must be a clear connection of the proposed project to terrorism response.

<b>Phone:</b>	
<b>Email:</b>	
<b>Vendor Agency (OASIS):</b>	
<b>Vendor Address (OASIS):</b>	
<b>City, State, Zip (OASIS):</b> (include +4 Zip code)	
<b>Step 1 - Applicant</b>   Step 2 - Project Summary   <b>Step 3 - Justification</b>   Planning   Organization	



Make sure that you are on the *Step 3 – Justification* tab

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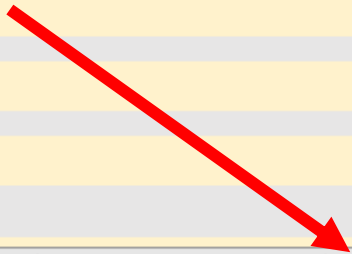
### Application Directions

### Complete the Appropriate Tabs for Investment Areas

The next step will require you to complete a spreadsheet for each of the investment areas that are appropriate for your proposed project.

- **Planning:** If you intend to use funds to develop or revise elements of your Emergency Operations Plan, SOPs/SOGs, or other types of plans, you will need to complete this tab.
- **Organization:** If you intend to use funds to support personnel then you will need to complete this tab.
- **Equipment:** If you intend to use funds to purchase any equipment then you will need to complete this tab.
- **Training:** If you are proposing using funds to conduct any training then you will need to complete this tab.
- **Exercise:** If you are proposing using funds to conduct any exercise then you will need to complete this tab.

<b>Phone:</b>	
<b>Email:</b>	
<b>Vendor Agency (OASIS):</b>	
<b>Vendor Address (OASIS):</b>	
<b>City, State, Zip (OASIS):</b> (include +4 Zip code)	
<b>Step 1 - Applicant</b>   Step 2 - Project Summary   Step 3 - Justification   <b>Planning</b>   Organization	



**Please Note:** You are only required to complete the tabs which are relevant to your project.

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#### **Planning**

Planning activities are central to homeland security initiatives and can be used to prioritize needs, build capabilities, outline response and recovery procedures, allocate resources, and deliver preparedness programs across disciplines. This may include activities such as conducting planning sessions and supporting assessment activities.

#### **Completion of the *Planning Tab***

<b><u>Planning</u></b>				DHSEM Use Only
<b><u>Proposed Activity</u></b>	<b><u>Justification/Explanation</u></b>	<b><u>Matching Funds</u></b>	<b><u>Requested Funds</u></b>	<b><u>Approved Amount</u></b>
		\$0	\$0	\$0
<b>Totals</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Additional Justification:</b>				

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<b>Proposed Activity</b>	List out each element that you are proposing to accomplish using grant funds. For instance, if you are going to revise your EOP and develop a communications SOP manual, those should be listed as two separate activities.
<b>Justification / Explanation</b>	<p>Please provide rationale for this line item. For instance, if you are proposing the development of a Pet Sheltering Plan, the justification could be:</p> <p style="text-align: center;"><i>Following a recent flood, it was determined that our county lacked the ability to provide coordinated Pet Sheltering to evacuees. The AAR identified the lack of a plan as a critical shortcoming.</i></p>
<b>Matching Funds</b>	While Matching Funds are NOT required, the grants review committee looks favorably upon those proposals in which some local funds are being allocated to support the project. Please note that matching funds must adhere to all federal and state matching requirements.
<b>Requested Funds</b>	In this column please provide the total amount of funds requested to support this specific activity. Round to the nearest whole dollar.
<b>Approved Amount</b>	Do not add anything to this column. This for DHSEM use only.
<b>Additional Justification:</b>	<p>This is an optional place to provide additional justification for the activities listed in this investment area.</p> <p>Note: If you are planning on using a contractor to write the plans, please use this space to provide details on how your agency will coordinate activities with the contractor.</p>

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#### **Organization**

Personnel hiring, overtime, and backfill expenses are permitted under this grant to perform allowable HSGP planning, training, exercise, and equipment activities. Personnel may include but are not limited to training and exercise coordinators, program managers for activities directly associated with SHSP funded activities, intelligence analysts, and Statewide interoperability coordinators (SWIC).

For further details, applicants should refer to [Information Bulletin No. 421b](#), Clarification on the Personnel Reimbursement for Intelligence Cooperation and Enhancement of Homeland Security Act of 2008 (Public Law 110–412 – the PRICE Act), October 30, 2019. HSGP funds may not be used to support the hiring of any personnel to fulfill traditional public health and safety duties nor to supplant traditional public health and safety positions and responsibilities. The following definitions apply to personnel costs:

- *Hiring.* State and local entities may use grant funding to cover the salary of newly hired personnel who are exclusively undertaking allowable DHS/FEMA grant activities as specified in this guidance. This may not include new personnel who are hired to fulfill any non-DHS/FEMA program activities under any circumstances. Hiring will always result in a net increase of Full Time Equivalent (FTE) employees.
- *Supplanting.* Grant funds will be used to supplement existing funds and will not replace (supplant) funds that have been appropriated for the same purpose. Applicants or recipients may be required to supply documentation certifying that a reduction in non-federal resources occurred for reasons other than the receipt or expected receipt of federal funds.

#### **Completion of the *Organization Tab***

<b>Planning</b>				DHSEM Use Only
<u>Proposed Activity</u>	<u>Justification/Explanation</u>	<u>Matching Funds</u>	<u>Requested Funds</u>	<u>Approved Amount</u>
		\$0	\$0	\$0
<b>Totals</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Additional Justification:</b>				



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<b>Proposed Activity</b>	List out each element that you are proposing to accomplish using grant funds. List name of employee if known.
<b>Justification / Explanation</b>	Please provide rationale for this line item. <i>Include information on what the new employee will do.</i>
<b>Matching Funds</b>	While Matching Funds are NOT required, the grants review committee looks favorably upon those proposals in which some local funds are being allocated to support the project. Please note that matching funds must adhere to all federal and state matching requirements.
<b>Requested Funds</b>	In this column please provide the total amount of funds requested to support this specific activity. Round to the nearest whole dollar.
<b>Approved Amount</b>	Do not add anything to this column. This for DHSEM use only.
<b>Additional Justification:</b>	This is an optional place to provide additional justification for the activities listed in this investment area.

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#### **Equipment**

Funds may be used for equipment acquisition. Approved equipment must be allowable by HSGP funding on the Authorized Equipment List (AEL) at <https://www.fema.gov/authorized-equipment-list> . Communications equipment is required to be compatible with the SAFECOM P25 trunked radio hierarchy and the WV Statewide Interoperable Radio Network. Per WV Code §15-14-4, all communications equipment requests must be reviewed and approved by the Statewide Interoperability Coordinator (SWIC). For SIRN related equipment, please refer to <http://www.sirn.wv.gov>. In addition, some equipment has supplemental requirements which restrict purchasing controlled equipment.

<b><u>Equipment</u></b>						DHSEM Use Only
<b><u>Equipment Item*</u></b>	<b><u>AEL**</u></b>	<b><u>Requested Quantity</u></b>	<b><u>Justification/Explanation</u></b>	<b><u>Matching Funds</u></b>	<b><u>Requested Funds</u></b>	<b><u>Approved</u></b>
				\$0	\$0	\$0
<b>Totals</b>				\$0	\$0	\$0
<b>Additional Justification (optional):</b>						

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<b>Proposed Activity</b>		List out each element that you are proposing to accomplish using grant funds. For instance, if you were going to purchase ballistic helmets, vests, and shields, each of those should be listed on a separate line.
<b>AEL Number</b>		Please list the AEL for each item requested. Please refer to <a href="https://www.fema.gov/authorized-equipment-list">https://www.fema.gov/authorized-equipment-list</a>
<b>Requested Quantity</b>		Please list the number of items being requested. This needs to be a whole number. Do NOT give us a range. We need to know how many of each item are being requested.
<b>Justification / Explanation</b>		Please provide rationale for this line item. For instance, if you are proposing to purchase portable SORN radios, please explain.
<b>Matching Funds</b>		While Matching Funds are NOT required, the grants review committee looks favorably upon those proposals in which some local funds are being allocated to support the project. Please note that matching funds must adhere to all federal and state matching requirements.
<b>Requested Funds</b>		In this column please provide the total amount of grant funds requested to support each item. Round to the nearest whole dollar.
<b>Approved Amount</b>		Do not add anything to this column. This for DHSEM use only.
<b>Additional Justification:</b>		This is an optional place to provide additional justification for the activities listed in this investment area. This is an ideal place to provide justification for unique requirements. For instance, if you are requesting encryption on your radios please provide the justification here.

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#### **Training**

Training should address a capability gap identified through the Threat and Hazard Identification and Risk Assessment (THIRA), an After Action Report/Improvement Plan, or contribute to building a capability that will be evaluated through an exercise. Training conducted should support the development and testing of the jurisdiction’s base emergency operations plan or specific annexes, allow implementation of a continuity of operations plan, or develop necessary skills to allow execution of such plans. Allowable training-related costs include the establishment, support, conduct, and attendance of training (workshops, seminars, skill training, etc). Allowable training topics include, but are not limited to: CBRNE and terrorism, catastrophic events, health preparedness, cyber security, agriculture/food safety, intelligence gathering and analysis, citizen and community preparedness, volunteer management, and other training needs identified in the 2015-2017 State Homeland Security Strategy or 2019 Training and Exercise Plan. Agencies receiving training awards must submit course rosters/sign-in sheets prior to final payment.

<b><u>Training</u></b>				<b>DHSEM Use Only</b>
<b><u>Training Requested*</u></b>	<b><u>Justification/Explanation</u></b>	<b><u>Matching Funds</u></b>	<b><u>Requested Funds</u></b>	<b><u>Approved</u></b>
		\$0	\$0	\$0
<b>Totals</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Additional Justification:</b>				

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<b>Training Requested</b>	List out each element that you are proposing to accomplish using grant funds. For instance, if you were going to conduct Introduction to Animal Rescue and an Advanced Animal Rescue course these would need to be two different activities. Include the number of people anticipated to attend each training.
<b>Justification / Explanation</b>	Please provide rationale for this line item. Include how specifically this training will help close identified gaps.
<b>Matching Funds</b>	While Matching Funds are NOT required, the grants review committee looks favorably upon those proposals in which some local funds are being allocated to support the project. Please note that matching funds must adhere to all federal and state matching requirements.
<b>Requested Funds</b>	In this column please provide the total amount of funds requested to support this specific activity. Round to the nearest whole dollar.
<b>Approved Amount</b>	Do not add anything to this column. This for DHSEM use only.
<b>Additional Justification:</b>	This is an optional place to provide additional justification for the activities listed in this investment area. This is an ideal place to discuss how this training supports existing capabilities (both in terms of plans and equipment).

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#### **Exercises**

Exercises should use the methodology outlined in the Homeland Security Exercise and Evaluation Program (HSEEP). Exercise guidance and templates can be found at <https://hseep.preptoolkit.org> or the exercise tab of [www.dhsem.wv.gov](http://www.dhsem.wv.gov). All exercises must utilize NIMS and should support the development, conduct, and evaluation of the jurisdiction’s emergency operations plan or specific annexes, standard operating guidelines, continuity of operations plan and/or internal procedures and checklists. Exercises may involve equipment usage to develop proficiencies. Participation rosters and After Action Reports/Improvement Plans must be submitted upon completion of the assessment prior to final payment.

<b><u>Exercise</u></b>				<b>DHSEM Use Only</b>
<b><u>Exercise*</u></b>	<b><u>Justification/Explanation</u></b>	<b><u>Matching Funds</u></b>	<b><u>Requested Funds</u></b>	<b><u>Approved</u></b>
		\$0	\$0	\$0
<b>Totals</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Additional Justification:</b>				

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<b>Exercise</b>	List out each element that you are proposing to accomplish using grant funds. For instance, if you are proposing to conduct a table-top and a functional exercise each of those should be listed on a separate line.
<b>Justification / Explanation</b>	Please provide rationale for this line item. Include information related to plans being evaluate and how this exercise will be developed.
<b>Matching Funds</b>	While Matching Funds are NOT required, the grants review committee looks favorably upon those proposals in which some local funds are being allocated to support the project. Please note that matching funds must adhere to all federal and state matching requirements.
<b>Requested Funds</b>	In this column please provide the total amount of funds requested to support this specific activity. Round to the nearest whole dollar.
<b>Approved Amount</b>	Do not add anything to this column. This for DHSEM use only.
<b>Additional Justification:</b>	<p>This is an optional place to provide additional justification for the activities listed in this investment area. This is an ideal place to describe how these exercises will be developed.</p> <p>Note: If you are planning on using a contractor to develop or manage the exercise use this space to provide details on how your agency will coordinate activities with the contractor.</p>

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#### **Contractor**

If your project involves paying for contractor services, you are required to complete the Contractor Tab. This information needs to clearly state the role and expectations associated with the contractor.

<b>Contractor Description Form</b>	
<b>Will a Contractor be Used?</b>	<input type="text" value="No"/>
<b>For what categories will contractor be used?</b>	<b>What is the total estimated cost for contractor?</b>
Planning <input type="text" value="No"/>	<input type="text"/>
Equipment <input type="text" value="No"/>	
Training <input type="text" value="No"/>	
Exercise <input type="text" value="No"/>	
	<b>If using a contractor, please make special note of Special Condition #45.</b>
<b>Explain how the contractor will be used:</b>	<input type="text"/>
<b>Explain why your agency is unable to complete project without a contractor:</b>	<input type="text"/>
<b>Explain how your agency will monitor work of the contractor:</b>	<input type="text"/>



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<b>Will contractor be used?</b>		This is linked to Step 2 – Project Summary tab.
<b>For what categories will contractor be used?</b>		Please indicate in which of the POETE categories the contractor will be used.
<b>What is the total estimated cost for the contractor?</b>		In this column please provide the total amount of funds which will be paid to contractors.
<b>Explain how the contractor will be used.</b>		Describe how the contractor will be used. For instance, this could include meeting facilitation, plan writing, conducting a commodity flow study.
<b>Explain why your agency is unable to complete project without a contractor</b>		Explain why the contractor is essential to the completion of the project. This should be a strong justification for spending grant money on a contractor.
<b>Explain how your agency will monitor work of the contractor</b>		Describe how the contractor will be monitored. Provide a detailed workflow with deadlines and list of work products.
<b>Please provide any additional justification for contractor</b>		In this optional space, provide any additional justification for why a contractor is needed.

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### Application Directions

#### **Submission of Application**

1. *You are required to submit the application as an Excel file.* Do not change the format of the file. Do NOT submit the application as a PDF. Failure to submit the file in the proper format might result in it not being reviewed. If you have issues, please contact your Area Liaison or the HS SAA at 304 558-5380.
2. You are required to submit the completed application to your WVDHSEM Area Liaison. Please use the email addresses on page 2 of these directions. Do NOT send the application directly to the Homeland Security State Administrative Agency staff.
3. The Area Liaison will conduct the initial review of the documents. If the Area Liaison believes the application lacks sufficient detail or is incomplete it will be returned to the applicant for revision.
4. Once the Area Liaison completes the initial review, the completed application will be sent to the West Virginia Division of Homeland Security and Emergency Management for review. If additional information is needed, HS SAA staff will coordinate back through the appropriate Area Liaison.
5. All completed grant applications will be reviewed and evaluated.
6. Successful applicants will be notified about grant status.
7. Applicants not selected in the initial round of grant awards will be re-evaluated as additional grant funds become available.
8. Applicants will be notified if their proposal is no longer being considered for funding.