GRANT AGENDA REQUEST FORM

A minimum of 45-days' notice is required to prepare an agenda item for the board Grant Name: Assistance to Fighters Grant Program Grantor Agency: DHS FEMA **Grant Due Date**: 12/20/2024 Grant Eligible Amount: __max 2 million County Requesting Amount: _____ Grant Award/Term: 24 months Match Requirement (Yes/No): yes Match Amount %: 15% Is Match Budgeted or In-kind: budgeted Estimated Match Amount: ______ County Department: ____ County Project Manager: Chief Aaron Imeson Project Manager Phone: Project Manager Email: almeson@seminolecountyfl The AFG Program awards grant funding to provide critically needed resources Please check one: New Grant: ____ Prior Grant: ____ How Long (Multiple): ______ Does grant tie to existing project: Yes Does Department need Assistant with a Grant Consultant:

The Assistance to Firefighters Grant (AFG) Program, administered by the Department of Homeland Security (DHS) through the Federal Emergency Management Agency (FEMA), aims to enhance the safety of firefighters and, by extension, the public, in relation to fire and fire-related hazards. Through this program, DHS plans to award 2,000 grants to provide vital resources that equip and train emergency personnel to recognized standards, improve operational efficiency, promote interoperability, and bolster community resilience.

Background for Agenda Item (Scope of Project):

Seminole County is eligible to apply for up to \$2 million in funding to support and enhance critical projects. The County plans to request funds for additional training mannequins to educate first responders on trauma care, two power stair chairs for bariatric transport, and additional Stryker LP35 patient lift arms. The project is expected to be completed within 24 months and requires a 15% matching contribution, which has already been allocated in the Fire Department's budget.

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OTHER GRANT RELATED QUESTIONS: Project Partner Required, If Yes, has a Partner(s) Been Identified? na Is hiring of new staff required (temporary and/or permanent and how many FTE's)? na Does the project implementation require a contractor, or can it be completed by county staff (is staff licensed and qualified to implement the project)? no Does staff have the time/resources to manage the grant, if awarded? yes Would the program continue after the grant is closed? yes Is there sufficient time to complete the project within the grant period? yes Is retroactive activity allowable? ___ ATTACH NOTICE OF FUNDING OPPORTUNITY (NOFO) FOR GRANT APPROVAL SIGNATURES Preparer Approval: **Department Director Approval:** Grants Office Approval: Please submit this form to the Grants Department email at grantsoffice@seminolecountyfl.gov