

Entire Application

Applicant's Acknowledgements

- * I certify the DUNS number in this application is our only DUNS number and we have confirmed it is active in SAM.gov as the correct number.
- * As required per 2 CFR § 25, I certify that prior to submission of this application I have checked the DUNS number listed in this application against the SAM.gov website and it is valid and active at time of submission.
- * I certify that the applicant organization has consulted the appropriate Notice of Funding Opportunity and that all requested activities are programmatically allowable, technically feasible and can be completed within the award's one (1) year Period of Performance (POP).
- * I certify that the applicant organization is aware that this application period is open from 12/07/2015 to 01/15/2016 and will close at 5 PM EST; further that the applicant organization is aware that once an application is submitted, even if the application period is still open, a submitted application cannot be changed or released back to the applicant for modification.
- * I certify that the applicant organization is aware that it is solely the applicant organization's responsibility to ensure that all activities funded by this award(s) comply with Federal Environmental planning and Historic Preservation (EHP) regulations, laws, and Executive Orders as applicable. The EHP Screening Form designed to initiate and facilitate the EHP Review is available at: http://www.fema.gov/media-library-data/1431970163011-80ce3cd907072a91295b1627c56d8fd2/gpd_ehp_screening_form_51815.pdf
- * I certify that the applicant organization is aware that the applicant organization is ultimately responsible for the accuracy of all application information submitted. Regardless of the applicant's intent, the submission of information that is false or misleading may result in actions by FEMA that include, but are not limited to: the submitted application not being considered for award, an existing award being locked pending investigation, or referral to the Office of the Inspector General.

Signed by **Geoffrey Maloon** on **2016-01-15 07:22:41.0**

Overview

* **Did you attend one of the workshops conducted by an AFG regional fire program specialist?**

No, I have not attended workshop

* **Did you participate in a webinar that was conducted by AFG?**

Yes

* **Are you a member, or are you currently involved in the management, of the fire department or nonaffiliated EMS organization or a State Fire Training Academy applying for this grant with this application?**

No, I am a grant writer or otherwise not affiliated with this applicant

If you answered "No", please **complete** the information below. If you answered "Yes", please skip the Preparer Information section.

Fields marked with an * are required.

Preparer Information

Preparer's Name

Geoff Maloon

Address 1 3357 N POLO DRIVE
Address 2
City Aptos
State California
Zip 95003 - 4129
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In the space below please list the person your organization has selected to be the primary point of contact for this grant. This should be a department officer or member of the organization who will see this grant through completion, including closeout. Reminder: if this person changes at any time during the period of performance please update this information. Please list only phone numbers where we can get in direct contact with the POC.

Primary Point of Contact

* Title Grant Program Manager
Prefix (select one) N/A
* First Name Geoffrey
Middle Initial
* Last Name Maloon
* Primary Phone 8312772198 Ext. Type cell
* Secondary Phone 8316888534 Ext. Type home
Optional Phone Type
Fax
* Email gmaloon@sbcglobal.net

Contact Information

Alternate Contact Information Number 1

* Title Deputy Chief
Prefix (select one) N/A
* First Name Brett
Middle Initial
* Last Name Loomis
* Primary Phone 8319700901 Ext. Type cell
* Secondary Phone 8317587261 Ext. Type work
Optional Phone Type
Fax
* Email brettl@ci.salinas.ca.us

Alternate Contact Information Number 2

* Title Fire Chief
Prefix (select one) N/A
* First Name Edmond

Middle Initial

* Last Name

Rodriguez

* Primary Phone

8319700900 Ext. Type cell

* Secondary Phone

8317587260 Ext. Type work

Optional Phone

Type

Fax

* Email

edmond.rodriguez@ci.salinas.ca.us

Applicant Information

EMW-2015-FO-05457

Originally submitted on 01/15/2016 by Geoffrey Maloon (Userid: salinas)

Contact Information:

Address: 3357 N Polo Drive

City: Aptos

State: California

Zip: 95003

Day Phone: 8312772198

Evening Phone: 8312772198

Cell Phone: 8312772198

Email: gmaloon@sbcglobal.net

Application number is EMW-2015-FO-05457

- * Organization Name City of Salinas Fire Department
- * Type of Applicant Fire Department/Fire District
- * **Fire Department/District, nonaffiliated EMS, and Regional applicants**, select type of Jurisdiction City Served :
If "Other", please enter the type of Jurisdiction

SAM.gov (System For Award Management)

- * What is the legal name of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

City of Salinas

- * What is the legal business address of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

- * Mailing Address 1 201 Lincoln Avenue

Mailing Address 2

- * City Salinas

- * State California

- * Zip 93901 - 2728
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- * Employer Identification Number (e.g. 12-3456789)

Note: This information must match your SAM.gov profile.

94-6000412

- * Is your organization using the DUNS number of your Jurisdiction? Yes

I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application. (Required if you selected Yes above)



010919447

* What is your 9 digit [DUNS number](#)?

(call 1-866-705-5711 to get a DUNS number)

If you were issued a 4 digit number (DUNS plus 4) by your Jurisdiction in addition to your 9 digit number please enter it here.

Note: This is only required if you are using your Jurisdiction's DUNS number and have a separate bank account from your Jurisdiction. Leave the field blank if you are using your Jurisdiction's bank account or have your own [DUNS number](#) and bank account separate from your Jurisdiction.

* Is your [DUNS Number](#) registered in [SAM.gov](#) (System for Award Management previously CCR.gov)?

Yes

* I certify that my organization/entity is registered and active at [SAM.gov](#) and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate, current and consistent with my organization's/entity's [SAM.gov](#) record.



Headquarters or Main Station Physical Address

* Physical Address 1

200 Lincoln Avenue

Physical Address 2

* City

Salinas

* State

California

* Zip

93901 - 2728

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Mailing Address

* Mailing Address 1

200 Lincoln Avenue

Mailing Address 2

* City

Salinas

* State

California

* Zip

93901 - 2728

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Bank Account Information

* The bank account being used is: (Please select one from right)

Maintained by my Jurisdiction

Note: The following banking information must match your [SAM.gov](#) profile.

* Type of bank account

Checking

* Bank routing number - [9 digit](#) number on the bottom left hand corner of your check

122238420

* **Your account number**

066001132

Additional Information

* For this fiscal year (Federal) is your organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request? No

* If awarded, will your organization expend more than \$750,000 in Federal funds during your organization's fiscal year? If "Yes", your organization will be required to undergo an A-133 audit. Reasonable costs incurred for an A-133 audit are an eligible expenditure and should be included in the applicant's proposed budget. Please enter audit costs only once under any "Additional Funding" in the "Request Details" section of the application. Yes

* Is the applicant delinquent on any Federal debt? No

If you answered yes to any of the additional questions above, please provide an explanation in the space provided below:

The City consistently exceeds this threshold and will complete a single site audit pursuant to grant program requirements. The City will pay all associated costs.

Fire Department/Fire District Department Characteristics (Part I)

* Is this application being submitted on behalf of a Federal Fire Department or organization contracted by the Federal government which is solely responsible for the suppression of fires on Federal property? No

* What kind of organization do you represent? All Paid/Career

If you answered "Combination", above, how many career members in your organization? (whole numbers only)

If you answered "Volunteer" or "Combination" or "Paid on-call", how many of your volunteer Firefighters are paid members from another career department? (whole numbers only)

* What type of community does your organization serve? Urban

* Is your Organization considered a Metro Department? (Over 350 paid career Firefighters) No

* What is the square mileage of your first-due response area? (whole number only) 24

* What percentage of your response area is protected by hydrants? (whole number only) 95 %

* In what county/parish is your organization physically located? If you have more than one station, in what county/parish is your main station located? Monterey

* Does your organization protect critical infrastructure? Yes

If "Yes", please describe the critical infrastructure protected below:

Critical infrastructure located in the Monterey County includes the following:

Union Pacific Railway moving 840,000 tons of freight daily
 Numerous pesticide and herbicide storage and production facilities with overall capacities in excess of 60,000 tons
 Laguna Seca National Recreation Area and Raceway accommodating over 1 million people annually

Over 1.4 million acres of farmland producing nearly 10% of the nations produce
 Los Padres Dam and Reservoir storing and supplying 30% of the County fresh water supply
 122 miles of Highway 101 with 122,000 cars and trucks traversing daily
 Propane Rail Distribution Center
 Dole Fresh Food and Taylor Farms Largest Salad processing facility in the world and largest fresh cut vegetable producer.

Moss Landing Power Plant- this is the largest power generation facility in the State of California producing 2,750 Megawatts along with the major high capacity transmission lines that traverse all of Monterey County and run directly through the District

Naval Post Graduate School

Defense Language Institute

Fort Ord

4 Airports including Monterey Airport with over 5,000 take-offs and landings annually including the former Secretary of Defense and other high-ranking government and military officials-The City lies in the direct flight path for three airports

Monterey Bay Aquarium

Monterey Bay National Marine Sanctuary

Californias 13th largest oilfield

Monterey County agriculture is the most productive agriculture region in the nation

Multiple national monuments as well as Pinnacles National Park

* What percentage of your primary response area is for agriculture, wildland, open space, or undeveloped properties? ¿	2 %
* What percentage of your primary response area is for commercial and industrial purposes?	39 %
* What percentage of your primary response area is used for residential purposes?	59 %
* What is the permanent resident population of your Primary/First-Due Response Area or jurisdiction served? (whole numbers only)	155000
* Do you have a seasonal increase in population?	Yes
If "Yes" what is your seasonal increase in population?	40000
* How many active firefighters does your department have who perform firefighting duties? (whole numbers only)	84
* How many members in your department/organization are trained to the level of EMR or EMT, Advanced EMT or Paramedic? (whole numbers only)	84
Does your department have a Community Paramedic program?	No
How many personnel are trained to the Community Paramedic level? (whole numbers only)	
* How many stations are operated by your organization? (whole numbers only)	6
* Is your department compliant to your local Emergency Management standard for the National Incident Management System (NIMS)?	Yes
* Do you currently report to the National Fire Incident Reporting System (NFIRS)?	
Note: You will be required to report to NFIRS for the entire period of the grant. AFG does not require NFIRS reporting for nonaffiliated EMS Organizations and State Fire Training Academy.	Yes
If you answered "Yes" above, please enter your FDIN/FDID	27070

* How many of your active firefighters are trained to the level of Firefighter I (or equivalent)? (whole numbers only) 84

* How many of your active firefighters are trained to the level of Firefighter II (or equivalent)? (whole numbers only, include all personnel who have attained Firefighter I) 84

Are you requesting training funds in this application to bring 100% of your firefighters into compliance with NFPA 1001? No

If you indicated that less than 100% of your firefighters are trained to the Firefighter II level and you are not asking for training funds to bring everyone to the Firefighter II level in this application, please describe in the box below your training program and your plans to bring your membership up to Firefighter II.

* What services does your organization provide?

Advanced Life Support

Airport Rescue Firefighting (ARFF)

Haz-Mat Technical Level

Rescue Technical Level

Structural Fire Suppression

Wildland Fire Suppression

* Please describe your organization and/or community that you serve.

The City of Salinas is an economically diverse and multi-cultural community that serves as the county seat for Monterey County and the business hub for California's Central Coast Region and boasts a permanent resident population of nearly 150,000 that swells to over 200,000 during the harvest season in America's Salad Bowl. In addition to the residents of the City, the Department serves an unincorporated area near the City with an additional 12,000 residents and 32 square miles of homes, industry and agricultural fields.

The Salinas City Fire Department provides service from six fire stations strategically placed throughout the City. Minimum on-duty daily staffing is twenty-three full-time personnel per shift manning six Advanced Life Support Paramedic engines, one ladder truck and a technical/specialist level Hazardous Materials Response Unit. The hazardous materials unit and the Fire Departments HAZMAT team, in partnership with the City of Seaside Fire Department and the Monterey County Health Department, provide primary hazardous materials mitigation response to all of Monterey and San Benito Counties.

Salinas is a compact urban community within a unique agricultural setting. But unlike the vaguely defined boundaries and sprawl that characterize so much of urban California, the highly-productive agricultural lands surrounding Salinas creates a distinct urban / agricultural edge that serves as a reminder of the source of the area's economic well-being. The City lies at the north end of the Salinas Valley, known as the Salad Bowl of America and with its mild climate and fertile soil, it is one of the world's largest agriculture centers.

Salinas housing stock consists of 39,175 units, of which 61% are single-family houses, 35% in multiple-family structures and 4% are mobile homes. Based on available land designated for residential development and the 2000 Census person per household figure, the Salinas General Plan projects that Salinas population is expected to grow to approximately 212,000. To accommodate this growth, the City is processing annexations necessary to provide housing for its growing population.

Fire Department Characteristics (Part II)

	2014	2013	2012
* What is the total number of fire-related civilian fatalities in your jurisdiction over the last three calendar years?	2	2	0
* What is the total number of fire-related civilian injuries in your jurisdiction over the last three calendar years?	13	11	13