

Assistance to Firefighters Grant Program (AFGP)



FY 2018 Staffing for Adequate Fire and Emergency Response (SAFER) Grant Program Application Checklist

If you are planning to apply for an award under the SAFER Grant Program, completing this checklist will help you prepare your SAFER Grant application. Collecting this information beforehand will reduce the time needed to complete your application when the next grant cycle opens.

I. SAM.gov Registration Status

Is your System for Award Management (SAM) registration valid and active? Yes No

- **SAM registration is only active for one year and must be renewed annually.** Please enter the date your SAM registration expires: _____
- If your organization's registration is expired or inactive, you must get the registration reset by calling the Federal Service Help Desk managed by the General Services Administration (GSA) at (866) 606-8220. FEMA cannot assist with the reset.
- Please ensure your organization's name, address, DUNS number, and EIN are up to date in SAM, and that the DUNS number in SAM is the same one used to apply for all FEMA grants.
- Your organization's name in SAM must also match the organization name provided on the 1199A direct deposit form. Payments are contingent on the information provided in SAM; therefore, it is imperative the information is correct.
- Applicant registration in the System for Award Management (SAM) is free. To register, please visit <https://www.sam.gov/portal/public/SAM>.

II. Applicant Characteristics I

Note: National, state, local, or federally recognized tribal organizations that represent the interests of volunteer firefighters will not have to complete this section.

If you are applying for a Regional Project under the Recruitment and Retention of Volunteer Firefighters Activity the information provided in this section must be the combined information for all departments that will have a direct benefit from the grant award. Direct benefit means that other fire departments will receive a portion of the grant awarded funds or the department will receive items purchased with the grant funds.

Square mileage of first-due response area:	sq mi		
Percentage of primary response protected by hydrants:	%		
Critical infrastructure protected:	<input type="checkbox"/> Yes * <input type="checkbox"/> No <i>*If yes, you will be asked to describe.</i>		
Percentage of land used for (total percentage must equal 100%):			
a. Agriculture, wild land, open spaces, or undeveloped properties	%		
b. Commercial/Industrial	%		
c. Residential	%		
How many occupied structures (commercial, industrial, residential or institutional) in your primary response area are more than three (3) stories?			
Permanent resident population of first-due response area?			
Seasonal increase in population?	<input type="checkbox"/> Yes * <input type="checkbox"/> No <i>*If yes, you will be asked to provide the increase.</i>		
How many stations are operated by your organization?			
Please indicate if your department has a formal automatic/mutual aid agreement with another community or fire department and the type that exists.	<input type="checkbox"/> Automatic <input type="checkbox"/> Mutual Aid <input type="checkbox"/> Both Auto and Mutual Aid <input type="checkbox"/> No Aid		
What service(s) does your organization provide? Please check all that apply.			
<input type="checkbox"/> Airport Rescue Firefighting (ARFF)	<input type="checkbox"/> Formal/Year-Round Fire Prevention Program		
<input type="checkbox"/> Advanced Life Support	<input type="checkbox"/> Maritime Operations/Firefighting		
<input type="checkbox"/> Basic Life Support	<input type="checkbox"/> Occasional Fire Prevention		
<input type="checkbox"/> Community Paramedic	<input type="checkbox"/> Rescue Operational Level		
<input type="checkbox"/> Emergency Medical Responder	<input type="checkbox"/> Rescue Technical Level Program		
<input type="checkbox"/> Haz-Mat Operational Level	<input type="checkbox"/> Structural Fire Suppression		
<input type="checkbox"/> Haz-Mat Technical Level	<input type="checkbox"/> Wildland Fire Suppression		
Do you currently report to the National Fire Incident Reporting System (NFIRS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
III. Staffing Levels			
What is the department's current (at the start of the application period) budgeted operational staffing level? (NOTE: include all budgeted positions, even if they are not currently filled)			
	Total # of Operational Career Personnel	# of Operational Officers	# NFPA Support
Staffing levels at the start of the application period (TBD):			
Staffing levels at one year prior to the start of the application period:			
Staffing levels at two years prior to the start of the application period:			
If awarded this grant, what will the staffing levels be for your department: (whole numbers only)?			

You will be asked to provide details on the department's existing staffing model (e.g., number of shifts, number of positions per shift, contracted work hours, etc.).

Does your department utilize any or all of the following types of firefighters?

- Part-time paid firefighters
- Reserve firefighters
- Relief firefighters

Yes * No

**If yes, you will be asked to provide details on how they are utilized within your department to include the number of part-time firefighters, the number of full-time NFPA-compliant positions these part-time firefighters occupy, if applicable, and how they are scheduled to meet your staffing needs.*

IV. Applicant Characteristics II

Note: National, state, local, or federally recognized tribal organizations that represent the interests of volunteer firefighters will not have to complete this section.

If you are applying for a **Regional Project under the Recruitment and Retention of Volunteer Firefighters Activity** the information provided in this section must be the **combined information for all departments** that will have a direct benefit from the grant award. Direct benefit means that other fire departments will receive a portion of the grant awarded funds or the department will receive items purchased with the grant funds.

	2018	2017	2016
The total number of fire-related civilian fatalities in your jurisdiction over the past three calendar years:			
The total number of fire-related civilian injuries in your jurisdiction for each of the past three calendar years:			
The total number of line of duty member fatalities in your jurisdiction for each of the past three calendar years:			
The total number of line of duty member injuries in your jurisdiction for each of the past three calendar years:			
Your department's operating budget (e.g., personnel, maintenance of apparatus, equipment, and facilities; utility costs; purchasing expendable items, etc.) for fire-related programs and emergency response for current (at time of application) fiscal year:	\$	\$	\$
What was your department's operating budget (e.g. personnel, maintenance of apparatus, equipment, and facilities; utility costs; purchasing expendable items, etc.) fire-related programs and emergency response for the previous three fiscal years?	Fiscal Year: _____ Budget: \$ _____ Fiscal Year: _____ Budget: \$ _____ Fiscal Year: _____ Budget: \$ _____		
The percentage of your operating budget dedicated to personnel costs? (whole percentages):	%		
Does your department have any rainy day funds, rainy day reserves, or emergency funds?	<input type="checkbox"/> Yes * <input type="checkbox"/> No <i>*If yes, what is the amount currently set aside?</i>		
	<i>*If yes, you will be asked to describe the planned purpose of the funds.</i>		

The percentage of your annual operating budget derived from (whole percentages that must add up to 100%)

Taxes	%	<i>Use this information, as well as the information above, in your financial narrative. It is important that your application remains consistent throughout. When breaking down the budget, be sure to account for all funding received. Budget breakdown should account for 100% of budget. If you selected "other," you will be asked to explain.</i>
Bond Issues	%	
EMS Billing	%	
Grants	%	
Donations	%	
Fund Drives	%	
Fee for service	%	
Other	%	

V. Vehicle Inventory

In each of the types or classes of vehicle listed below, please indicate the appropriate number of frontline vehicles your organization has with which to respond to first alarm assignments in support of NFPA 1710/1720. You must include vehicles that are leased or on long-term loan, as well as any vehicles that have been ordered or are otherwise currently under contract for purchase or lease but not yet under your possession. If you have multiple vehicles of the same type that have a different number of riding positions, please use the "average" number and provide additional information in the text box provided in the application.

	Number of Front Line Vehicles	Total Number of Available Riding Positions	Total Number of Filled Riding Positions
Engines or Pumpers:			
Ambulances for transport and/or emergency response:			
Tankers or Tenders:			
Aerial Apparatus:			
Brush/Quick Attack:			
Rescue Vehicles:			
Additional Vehicles:			

VI. Department Call Volume

Note: National, state, local, or federally recognized tribal organizations that represent the interests of volunteer firefighters will not have to complete this section.

If you are applying for a **Regional Project under the Recruitment and Retention of Volunteer Firefighters Activity** the information provided in this section must be the **combined information for all departments** that will have a direct benefit from the grant award. Direct benefits means that other fire departments will receive a portion of the grant awarded funds or the department will receive items purchased with the grant funds.

Your department's first due call volume for your primary response area (for the three years):

	2018	2017	2016
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SUMMARY

Fire - NFIRS Series 100			
Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series			

Rescue & Emergency Medical Service Incident - NFIRS Series 300			
Hazardous Condition (No Fire) - NFIRS Series 400			
Service Call - NFIRS Series 500			
Good Intent Call - NFIRS Series 600			
False Alarm & False Call - NFIRS Series 700			
Severe Weather & Natural Disaster - NFIRS Series 800			
Special Incident Type - NFIRS Series 900			

FIRES

Of the NFIRS Series 100 calls, how many are "Structure Fire" (NFIRS Codes 111-120)			
Of the NFIRS Series 100 calls, how many are "Vehicle Fire" (NFIRS Codes 130-138)			
Of the NFIRS Series 100 calls, how many are "Vegetation Fire" (NFIRS Codes 140-143)			
What is the total acreage of all vegetation fires?			

RESCUE AND EMERGENCY MEDICAL SERVICE INCIDENTS

Of the NFIRS Series 300 calls, how many are "Motor Vehicle Accidents" (NFIRS Codes 322-324)			
Of the NFIRS Series 300 calls, how many are "Extractions from Vehicles" (NFIRS Code 352)			
How many EMS-BLS Response Calls			
How many EMS-ALS Response Calls			
How many EMS-BLS Scheduled Transports			
How many EMS-ALS Scheduled Transports			
How many Community Paramedic Response Calls			

MUTUAL AND AUTOMATIC AID

How many times did your organization:

Receive mutual aid:			
Receive automatic aid:			
Provide mutual aid:			
Provide automatic aid:			
Of the Mutual and Automatic Aid responses, how many were structure fires?			

VII. Hiring of Firefighters Activity

In cases of demonstrated economic hardship, the FEMA Administrator may waive or reduce a SAFER Hiring of Firefighters Activity grant recipient's cost share requirement, the minimum budget requirement, and/or the restriction on supplanting. Is it your department's intent to apply for any of the available waivers?

Yes* No

**If yes, you will be asked to indicate in the application which type of waiver you will be applying for: Position Cost Limit, Cost Share, Minimum Budget, and/or Supplanting.*

**If yes, you will be asked to attached your documentation for the waiver. Review the Grant Programs Directorate Information Bulletin No. 427 at <https://www.fema.gov/media-library/assets/documents/158776> for details on what is needed for the waiver.*

What NFPA Standard (1710 or 1720) is your department attempting to meet?

<input type="checkbox"/> 1710 with aerial <input type="checkbox"/> 1710 without aerial <input type="checkbox"/> 1720 - Urban	<input type="checkbox"/> 1720 - Suburban <input type="checkbox"/> 1720 - Rural <input type="checkbox"/> 1720 - Remote
Given your current staffing levels, how often does your department meet the NFPA assembly requirements indicated above for the department's primary / first due response area?	
Note: Does your department utilize overtime to fill positions to ensure you are meeting applicable NFPA staffing and deployment standards? <input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, when answering this question you should remove the number of position filled by overtime from your calculations.</i>	
<input type="checkbox"/> Never (0%) <input type="checkbox"/> Rarely (1 – 19%) <input type="checkbox"/> Sometimes (20-39%) <input type="checkbox"/> Half of the Time (40-59%)	<input type="checkbox"/> Very Often (60-79%) <input type="checkbox"/> Most of the Time (80-99%) <input type="checkbox"/> Always (100%)
If awarded the number of positions requested in your application, how often do you anticipate will you meet the NFPA assembly requirements?	
<input type="checkbox"/> Never (0%) <input type="checkbox"/> Rarely (1 – 19%) <input type="checkbox"/> Sometimes (20-39%) <input type="checkbox"/> Half of the Time (40-59%)	<input type="checkbox"/> Very Often (60-79%) <input type="checkbox"/> Most of the Time (80-99%) <input type="checkbox"/> Always (100%)
Given your current staffing levels and without using overtime to fill vacant positions, what is the average actual staffing level on the first arriving engine company or vehicle capable of initiating suppression activities on the number of structure fires indicated in the call volume section?	
Note: Does your department utilize overtime to fill positions to ensure you are meeting applicable NFPA staffing and deployment standards?	<input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, when answering the above question you should remove the number of position filled by overtime from your calculations.</i>
If your department is awarded the number of positions requested in your application, what will be the average actual staffing level on the first arriving engine company or vehicle capable of initiating suppression activities on the number of structure fires indicated in the call volume section?	
Describe the department's step-by-step hiring process (application period, written test, physical, approval). The timeline for each step must be included and you must discuss how long, after award, you will be able to start a recruit class.	
How many recruits can be trained in one academy class?	

Does the department need governing body approval to accept the award and hire the positions?

Yes* No

**If yes, you will be asked to provide details on the timeline needed for acceptance.*

Does your department intend to sustain the positions requested in this application after the completion of the period of performance?

Yes* No

**If yes, you be asked to describe how will they be sustained.*

Hiring new firefighters: As a reminder, only new, additional firefighters are eligible for funding. Grant funds can no longer be used for the purpose of retaining firefighters currently employed who are facing imminent layoffs.

What are the current usual annual costs of a first-year (i.e. entry-level) firefighter in your department?

Annual Salary \$ _____

Annual Benefits \$ _____

“Usual annual costs” includes the base salary (exclusive of overtime) and standard benefits package (including the **average** health cost, dental, vision, FICA, life insurance, retirement/pension, etc.) offered by fire departments to first-year (i.e. entry-level) firefighters.

What costs are included in the standard benefits package your department provides to first-year firefighters? You must provide details on the dollar amounts or percentages for each benefit being provided (health costs (family, employee only, employee plus one), dental, vision, FICA, life insurance, retirement/pension, etc.).

VIII. Recruitment and Retention of Volunteer Firefighters Activity – Fire Departments

In cases of demonstrated economic hardship, the FEMA Administrator may waive or reduce a SAFER Recruitment and Retention of Volunteer Firefighters Activity minimum budget requirement. Is it your department's intent to apply for an economic hardship waiver?

Yes* No

**If yes, you will be asked to indicate in the application that you intend to apply for a waiver.*

**if yes, you will be asked to attached your documentation for the waiver. Review the Grant Programs Directorate Information Bulletin No. 427 at <https://www.fema.gov/media-library/assets/documents/158776> for details on what is needed for the waiver.*

What NFPA Standard (1710 or 1720) is your department attempting to meet?

- 1710 with aerial
- 1710 without aerial
- 1720 - Urban

- 1720 - Suburban
- 1720 - Rural
- 1720 - Remote

Given your current volunteer firefighter staffing levels, how often does the department meet the NFPA assembly requirements indicated above for the department's primary / first due response area?

- Never (0%)
- Rarely (1 – 19%)
- Sometimes (20-39%)
- Half of the Time (40-59%)

- Very Often (60-79%)
- Most of the Time (80-99%)
- Always (100%)

If awarded the grant, how often do you anticipate the department will meet the NFPA assembly requirements as indicated above?

<input type="checkbox"/> Never (0%)	<input type="checkbox"/> Very Often (60-79%)
<input type="checkbox"/> Rarely (1 – 19%)	<input type="checkbox"/> Most of the Time (80-99%)
<input type="checkbox"/> Sometimes (20-39%)	<input type="checkbox"/> Always (100%)
<input type="checkbox"/> Half of the Time (40-59%)	

How many active volunteer firefighters are needed by your department to adequately comply with NFPA assembly requirements as indicated above? Include only operational volunteer firefighters ; administrative or EMS only members should not be included).	
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What is the total number of current active volunteer firefighters in your department Note: Include only operational volunteer firefighters ; administrative or EMS only members should not be included?	
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How many active volunteer operational firefighters joined your department over the last three years?	
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How many active volunteer operational firefighters left your department over the last three years?	
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Do you currently have a comprehensive marketing plan in place as part of your recruitment and retention efforts? Note: a marketing plan must be in place or requested in the application if requesting funds to recruit new members.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No but developing one as part of the grant
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Will your program have a direct regional and/or local benefit beyond your fire department? Direct benefit means that other fire departments will receive a portion of the grant awarded funds or the department will receive items purchased with the grant funds.	<input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, you will be asked to indicate how many regional partners will be participating. You will also need to list each department, provide point of contact information and EIN.</i> <i>*If yes, you will need to ensure that the fire departments benefits from this application have not received grants for similar activities/ items, if awarded.</i>
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IX. Recruitment and Retention of Volunteer Firefighters Activity – National, State, Local, or Tribal Volunteer Firefighter Interest Organizations

In cases of demonstrated economic hardship, the FEMA Administrator may waive or reduce a SAFER Recruitment and Retention of Volunteer Firefighters Activity minimum budget requirement. Is it your department's intent to apply for an economic hardship waiver?	<input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, you will be asked to indicate in the application that you intend to apply for a waiver.</i> <i>*if Yes, you will be asked to attached your documentation for the waiver. Review the Grant Programs Directorate Information Bulletin No. 427 at https://www.fema.gov/media-library/assets/documents/158776 for details on what is needed for the waiver.</i>
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Your organization's operating budget (e.g., personnel, operations (rent, overhead, administration, etc.), travel, contract service, etc.) for the current (at time of application) fiscal year:	\$
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<p>Your organization's operating budget (e.g., personnel, operations (rent, overhead, administration, etc.), travel, contract service, etc.) the previous three fiscal years:</p>	<p>Fiscal Year: _____ Budget: \$ _____</p> <p>Fiscal Year: _____ Budget: \$ _____</p> <p>Fiscal Year: _____ Budget: \$ _____</p>
<p>What is the ideal number of active volunteer operational firefighters needed by your organization to assist the fire departments benefiting from this grant application on order to adequately comply with NFPA 1710 (Section 5.2.4.1 – Single Family Dwelling Initial Full Alarm Assignment Capability) or NFPA 1720 (Section 4.3 - Staffing and Deployment)? Note: This must be the cumulative total of the number of firefighters needed by all departments participating in this application. Include only operational volunteer firefighters; administrative or EMS only members should not be included.</p>	
<p>What is the total number of current active volunteer operational firefighters within your organization? Note: This must be the cumulative total of the number of volunteer firefighters of all departments participating in this application. Include only operational volunteer firefighters; administrative or EMS only members should not be included.</p>	
<p>You will be asked to describe the method(s) used to determine the numbers provided above.</p>	
<p>Over the last three years, how many active volunteer operational firefighters have joined the fire departments participating in this application? Note: This must be the cumulative total of the number of firefighters by ALL departments participating in this application</p>	
<p>Over the last three years, how many active volunteer operational firefighters left the fire departments participating in this application? Note: This must be the cumulative total of the number of firefighters by ALL departments participating in this application.</p>	
<p>Is your application based on a staffing needs assessment?</p>	<p><input type="checkbox"/> Yes* <input type="checkbox"/> No</p> <p><i>*If yes, you will need to describe how the assessment was conducted and the results of the assessment.</i></p>
<p>Does the proposed program have, or will it establish, a multi-organizational partnership and/or partnerships with other fire-related organizations?</p>	<p><input type="checkbox"/> Yes* <input type="checkbox"/> No</p> <p><i>*If yes, you will be asked to provide details on the proposed partners and their contributions.</i></p>
<p>Is it your organization's intent to deliver this program after the grant performance period?</p>	<p><input type="checkbox"/> Yes* <input type="checkbox"/> No</p> <p><i>*If yes, you will be asked to provide details on how the program will be sustained and the long-term benefits.</i></p>

Have you discussed this application with all participating fire departments?

Yes* No

If awarded, you will need to ensure that the fire department's benefits from this application have not received grants for similar activities/items and may be required to provide documentation of the fire departments consent to participate in the application.

Do you currently have a comprehensive marketing plan in place as part of your recruitment and retention efforts? **Note:** A marketing plan must be in place or requested in the application if requesting funds to recruit new members.

Yes No

No but developing one as part of the grant