

Kentucky 9-1-1 Services Board



2017 Competitive Grant Application

ATTN: In addition to the supporting documentation you choose to incorporate to illustrate your need and request, only those pages within this document labeled (REQUIRED) in the bottom left corner should be included in your application.

Eligibility

The Kentucky 911 Services Board Grant Fund exists under the authority of KRS 65.7631(4), which states: ... “10% of the total monthly revenues deposited into the CMRS Fund shall be disbursed or reserved for disbursement to provide direct grants, matching money, or funds to PSAPs as determined by the Kentucky 911 Services Board:

1. for the establishment and improvement of E911 services in the Commonwealth, including the implementation of next generation 911 capacity;
2. for incentives to create more efficient delivery of E911 services by local governments receiving funding under KRS 65.7631(5)*;
3. for improvement of 911 infrastructure by Tier III wireless providers receiving funding under this section; and
4. for consolidation reimbursement of two hundred thousand dollars (\$200,000) per PSAP, not to exceed four hundred thousand dollars (\$400,000) per county, to any PSAP that consolidates with a CMRS certified PSAP, or creates a newly consolidated Phase II compliant PSAP. Funds shall be applied toward the cost of consolidating. If a PSAP consolidates and receives reimbursement, the Kentucky 911 Services Board shall not certify a new PSAP within the same county for a period of ten (10) years.”**

*This new provision of HB 585 states that only PSAPs expressly certified by the Kentucky 911 Services Board are eligible for grant funding.

**The PSAP Consolidation Grant is a separate, non-competitive application and should not be applied for through this application process. If you are interested in receiving a PSAP Consolidation Grant, please contact the Kentucky 911 Services Board Office for more information.

General Procedures

- The applicant must provide one original and six (6) copies of the completed grant application received by **4:30 pm** on **Wednesday, May 31st, 2017** at the Kentucky 911 Services Board Office, 125 Holmes Street, Suite 310, Frankfort.
- Applications may be postmarked by 5/31/17 but **MUST BE** sent using either Fed Ex or UPS with expedited shipping recommended.

Accounting and Reporting Procedures

- Reimbursement by the Kentucky 911 Services Board to the grantee shall be made using the Commonwealth of Kentucky’s statewide accounting system, eMars. The Kentucky 911 Services Board agrees to handle all reimbursements in a prompt manner and accepts the responsibility of notifying the grantee if more documentation is needed to complete a reimbursement.
- Grantees will be required to submit quarterly reports summarizing all expenditures and status of the grant project. **The grantees’ first quarterly report must be accompanied by a copy of the signed contract with the vendor chosen to complete the project.** Funding continuance will be based on timely submission of quarterly reports. A final site visit may be scheduled after the completion of the grant to review activities, expenditures and how the needs of the grant application were met. Documentation of all expenditures must be readily available during this time. If a final onsite visit is not scheduled, the grantee must complete a “Grant Self-Closeout Report” for the Kentucky 911 Services Board.
- Equipment obtained under a grant cannot be transferred. If a sale or transfer of such equipment occurs within three years after a grant ends, funds must be returned on a pro rata basis.

- Changes or departures from the original request must be approved in writing. The Board's Grant Committee will review such requests and make a recommendation to the full Board for approval or denial. All requests shall be submitted in writing. Any unauthorized change shall require the return of grant funds. Requests for changes to the grantee's scope of work will not be approved unless the modification request reflects the original approved goal of the grant and the change demonstrably increases the financial and technological stability of the project.

Application Process

- Applications should be collated and compiled in the following order:

	<u>Current Page in Application</u>
○ Kentucky 911 Services Board Grant Application – Cover Sheet	(Page 8)
○ 2017 Grant Fund Information Form	(Page 9-10)
○ PSAP Revenue/Expenditure Report, FY16 (right click to edit)	(Page 11)
○ PSAP Budget, FY17 (right click to edit)	(Page 12)
○ Project Description/Justification	(Page 14)
○ Assurances/Authority	(Page 15)
○ Category 1 Selection Form (if applicable)	(Page 18)
○ 2017 Proper Procurement Declaration	(Page 19-20)
▪ <i>Attachments supporting the selected procurement process should follow this form.</i>	
- It is recommended that information submitted in applications be typed using a Times New Roman, 12 point font.
- Applications and reports **must** be delivered to address below.
- Applications can be postmarked by 5/31/17 but **MUST BE** sent using either Fed Ex or UPS with expedited shipping recommended.

Kentucky 911 Services Board

125 Holmes Street, Suite 310
Frankfort, Kentucky 40601

Kentucky 911 Services Board Grant Fund Calendar

- 2017 Grant Application Released **March 1st, 2017**
- Grant Workshops **March 13th-17th, 2017**
- Applications Due **May 31st, 2017**
- Grant Committee evaluates applications **July/July 2017**
- Board approves applications at regular meeting **July 12th, 2017**
- Board sends notification to agencies approved for funding **July 13th, 2017**
- Paperwork collected from grantee to initiate contract **July 13th-August 15th, 2017**
- Grant Contract Start Date **August 15th, 2017**

Summary of the Kentucky 911 Services Board's State 911 Plan

Through deliberate and thoughtful research, the conclusion was reached by the Board to deploy an IP based network managed by the State to receive, process, route and deliver all calls to 9-1-1 within the Commonwealth.

The current delivery method of 9-1-1 is hindered by outdated technologies and networking. Current methods of adopting emerging technologies are hindered, if not blocked, by the analog environment traditional 9-1-1 systems employ. As is common within the United States, the evolution of 9-1-1 is based upon local government's ability to provide this service. The unmistakable result is a collection of independent and stand-alone deployments with little if any ability to utilize available resources to the benefit of emergency services. Migration from today's legacy analog systems to a privately managed IP network will result in the mitigation of these issues to the benefit of all.

The deployment of this statewide network will provide a uniform method of call delivery without regard to PSAP size or capabilities and offer the service provider a streamlined method of delivering calls to the emergency service providers of the Commonwealth. With the deployment of a network on the Board's immediate agenda, it is imperative that PSAPs embark on projects that will be compatible with the planned network once it is fully deployed.

NG9-1-1 Capabilities

NG9-1-1 enables a wealth of enhanced emergency (9-1-1) request processing and response capabilities including:

1. Enables present and future handset technology such as the delivery of text messages, video, and images to Public Safety Answering Points (PSAPs) and emergency responders.
2. Support for the delivery of telematics device information (automatically detected automobile accidents, health alarm monitors, and other emergency detection devices) directly to a PSAP without having to go through an intermediary call center.
3. Enhanced support for VoIP emergency calls.
4. Pre-validated location information delivered with the emergency request rather than after the emergency request is delivered to a PSAP.
5. Robust emergency request routing that supports the automatic re-routing of emergency requests (9-1-1 calls) if the destination PSAP is inoperable or busy.
6. Adoption of policy, rules, and procedures that will automatically route an emergency request to the appropriate PSAP.
7. Enables access to supplemental incident information available on a variety of emergency databases, law enforcement/crime databases, medical databases, records management, hospital, court, jail management, and other relevant systems that interface each other through the NG9-1-1 network.
8. Speeding up the delivery of emergency requests to the appropriate PSAP.
9. Cost and operational efficiencies gained through the use of standardized interfaces among disparate systems and databases.
10. Rapid support for emerging technologies in emergency request processing and response.

2017 Kentucky 911 Services Board Grant Application Guidelines

Mandatory Project Requirement

Application is consistent with State 911 Plan

Project Priorities (in no particular order):

- 1) Emergency –dire need just to survive
- 2) Compliance with State 911 Plan and NG911 Themes (IP based technologies, networking, etc)
- 3) Efficiency in cost and/or service delivery
- 4) Regional Impact/Regionalization
- 4) Innovation
- 5) The applicant exhibits sustainability/project helps the applicant become more sustainable

Funding Categories (not listed by order of importance):

- 1) Connection to existing Host/Remote configuration approved by the Board.
- 2) New or improved 911 PSAP support equipment.
- 3) Regional Host/Remote project proposals outside of current Board approved deployments.
- 4) Other.

In addition to meeting the mandatory project requirement, all projects and applications should attempt to meet at least one of the project priorities (above):

-fit allowable CMRS fund spending criteria as outlined in 202 KAR 6:090

-address a specific inadequacy or gap in service (actual or potential)

-explain how the project will be sustained

-contain adequate budget information with reasonable and realistic cost projections and a detailed equipment listing

-show good technical planning with logical progression and specific timelines

-have proper management; technical and financial oversight

-avoid encumbering funds in outdated equipment and processes

-advise if there are emergency circumstances that should be considered

-advise if there are other fund sources being used on this project

-advise if this application completes an ongoing project

-properly disclose previous grant awards

Specific Information Regarding 2017 Kentucky 911 Services Board Grants:

- 1) Host/Remote applications may be submitted for the Board approved Hosts (see attachment), BUT, the grant applicant must already have selected their provider AND the provider should sign-off on the application to prove that they are able to accommodate the request within one year of the grant award.
- 2) Proposals for additional regional projects outside of the current Board approved Hosts will be considered, but the discretion to approve is left up to the Grant Committee.
- 3) GIS projects will not be funded until the Board's GIS Working Group completes their work. **GIS hardware/software purchases will be considered however.**
- 4) Attendance at a 2017 Kentucky 911 Services Board Grant Workshop is not mandatory to be eligible for apply for a grant, but is highly encouraged.
- 5) All requests in excess of \$20,000 must be bid before the application is submitted. Applicants must complete an official RFP process, identify the items(s) to be purchased on the State Price Contract or submit proof of Sole Source. This shall be completed on the form "2017 Kentucky 911 Services Board Grant Proper Procurement Declaration" with appropriate documentation attached. Applicants shall follow their City or County procurement procedures, which will likely require assistance from those who handle the finances of the local government. The 2017 Kentucky 911 Services Board Grant applications will be "on the street" for 90 days to allow for the necessary amount of time for these processes to take place.
- 6) All award contracts will be initiated between the grant recipient and the Kentucky 911 Services Board only. No administrative fees will be allowed as part of the grant award. Applicants wishing to have agencies such as Area Development Districts write their application may do so at their own expense, however, the applicant name must be the PSAP or Local Government and may not be the Area Development District.
- 7) Requests for additional positions for any type of PSAP equipment must accompany substantial documentation to support the request such as call volumes or documentation of frequent events where an additional position would have been helpful.
- 8) It is imperative that vendors claiming to have products on the state price contract be verified. The items must be on an active contract at the time the equipment is purchased, not just when the quote is obtained. At this time, no federal contract pricing will be recognized.
- 9) The grant applicant must convey to the vendor that bids and quotes should remain valid through August 2017.
- 10) Applicants wishing to apply for 2 or more unrelated projects should submit separate applications for each project.
- 11) Only PSAPs certified by the Kentucky 911 Services Board are eligible to receive grant funding. This update was made to KRS 65.7631(6) in HB 585 passed during the 2016 Legislative Session.
- 12) After a grant award is made, additional funding will not be considered.
- 13) Grant requests for equipment located in a backup or secondary PSAP will not be considered. Only equipment designated for primary use in a primary PSAP is allowable under the Grant program.



2017 Kentucky 911 Services Board Grant Application –Cover Sheet

Board Use Only _____ **Application #** _____ **Board Staff Initials** _____
Date Received _____ *17-* _____

Lead Applicant Agency _____
(Example: 911 Board, City, County Fiscal Court, State Agency)

Partnering Cities/Counties _____
Please list ALL cities/counties that partnered for this grant

Project Information:
Title _____
Project Summary _____
A brief Project Summary that best fits your application

Qualifying Funding Category (check one):
____ 1) Connection to existing Host/Remote configuration approved by the Board.
____ 2) New or improved 911 support equipment.
____ 3) Regional Host/Remote proposals outside of current Board approved deployments.
____ 4) Other.

Budget Summary: *(Budget costs should match any requested vendor quotes, however, LOCAL MATCH SHOULD BE SUBTRACTED OUT IN SUMMARY)*

\$ _____ **Equipment**
\$ _____ **Management & Administration**
\$ _____ **Other:** _____
\$(_____) **Local Match** *(this amount should not be included in the total amount requested)*
\$ _____ **Total Amount Requested** *(this amount should be the total project cost less the local match)*

Program Officials:

	Authorizing Official <i>Judge Executive, Mayor, Ex. Director, etc.</i>	Project Manager <i>Day to Day Grant Manager</i>	Financial Officer <i>Treasurer, City Clerk, etc.</i>
Name	_____	_____	_____
Title	_____	_____	_____
Address	_____	_____	_____
City, State, Zip	_____	_____	_____
Phone	_____	_____	_____
E-mail	_____	_____	_____

Original Signatures Required:

Authorizing Official

Project Manager

Financial Officer

(REQUIRED, COVERSHEET)

2017 Kentucky 911 Services Board Grant Application Information Form

PSAP Name: _____

County: _____ **Population:** _____

Mailing Address: _____

City: _____

Zip: _____ **County:** _____

Phone: _____

E-mail Address: _____

PSAP Location: *(If other than Mailing Address)* _____

Contact Name: _____

Title: _____

Phone: _____ **Fax:** _____

E-mail Address: _____

Explain service area: *(County/ City/ Region etc.)* _____

Which agencies does your 911 center provide dispatch services?

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PSAP currently providing: *(circle one)*

Enhanced 911 Basic 911

Total # of access lines (landline phones) in your PSAP's jurisdiction: _____

Landline Surcharge: _____

Total Estimated Volume of 911 Calls for prior year: *(July-June)*

Wireline: _____

Wireless: _____

Total: _____

What other sources of funding does the PSAP receive?

(REQUIRED)

Under what authority does the PSAP operate: *(circle one)*

Agency Local/Regional Board Fiscal Court City Government

Authority Name: _____

Signing Authority Name: _____

Phone: _____

E-mail Address: _____

Estimated start and completion dates for project MUST be provided. All projects MUST be able to be completed within a 12 month period UNLESS OTHERWISE STATED.

Start Date: _____ **Completion Date:** _____

Has this PSAP (or other entity on behalf of the PSAP) received other grants for 911 purposes within the past three years, regardless of their source? Y or N

If yes, please list the source, the award amount and purpose. Is there any relation to the current request?

Is your agency and/or local government willing to commit a partial funding for the project?

Yes____No____

If yes, what percentage are you able/willing to commit? _____

(The amount requested from the Board should not include this amount.)

(REQUIRED)



PSAP REVENUE/EXPENDITURE REPORT

For the period July 1, 2015- June 30, 2016

Kentucky 911 Services Board

PSAP NAME: _____

REVENUE (Amounts received July 1, 2015-June 30, 2016)

(5) Total Amount of CMRS funds received from CMRS Board	\$ -
(6) Total Amount of Wireline Revenues received	\$ -
(7) Total Amount of County or City General Funds received in current fiscal year	\$ -
(8) Total Amount of CMRS Grant Funds received in current fiscal year	\$ -
(9) Total Amount of Other Grant Funds received in current fiscal year	\$ -
(10) Total Amount of Interest received in current fiscal year	\$ -
(11) Total Amount of Other Funds received in current fiscal year	\$ -
(12) Total 911 funds available	\$ -

EXPENDITURES

Personnel Cost

	Total Paid
(13) Dispatch Supervisor/Director Salary	\$ -
(14) Dispatcher Salaries	\$ -
(15) Mapping/Addressing Salaries	\$ -
(16) Other Salaries	\$ -
(17) Retirement Contribution	\$ -
(18) Health Insurance	\$ -
(19) Other Fringe Benefits	\$ -

Facility Costs

(20) Capital improvements	\$ -
(21) Lease or rental payments	\$ -
(22) Utilities	\$ -
(23) Telephone Service	\$ -
(24) Maintenance	\$ -
(25) Emergency Power Equipment	\$ -
(26) Insurance	\$ -
(27) Furniture and Fixtures	\$ -
(28) Office Supplies	\$ -
(29) Other Facility Costs	\$ -

Training and Memberships

(30) On -Site Training	\$ -
(31) Conferences	\$ -
(32) Training Related Travel	\$ -
(33) Membership Dues	\$ -

Equipment/Software

(34) 911 Controllers	\$ -
(35) 911 Trunks	\$ -
(36) Telephone Equipment	\$ -
(37) Remote 911 Hardware, Modems etc.	\$ -
(38) Computer workstations	\$ -
(39) Radio Systems	\$ -
(40) CAD System	\$ -
(41) GIS/ Mapping System	\$ -
(42) Software licenses	\$ -
(43) Maintenance/Service Agreements	\$ -
(44) Other Equipment and Software	\$ -

Vehicle Expenses

(45) MSAG development and Maintenance	\$ -
(46) GIS Verification & Testing	\$ -
(47) Other	\$ -

Professional Services

(48) Legal	\$ -
(49) Auditing	\$ -
(50) Mapping/Addressing	\$ -
(51) Other	\$ -
(52) Total Expenditures	\$ -

I, _____ (name)

Certify that I have written or reviewed this Revenue/Expenditure Report and that all the information in the report is true and correct as of this date.

(REQUIRED)



PSAP BUDGET

For the period July 1, 2016 - June 30, 2017

Kentucky 911 Services Board

PSAP NAME: _____

REVENUE (Amounts received July 1, 2016-June 30, 2017)

(5) Total Amount of CMRS funds projected from CMRS Board	\$ -
(6) Total Amount of Wireline Revenues projected	\$ -
(7) Total Amount of County or City General Funds projected in current fiscal year	\$ -
(8) Total Amount of CMRS Grant Funds projected in current fiscal year	\$ -
(9) Total Amount of Other Grant Funds projected in current fiscal year	\$ -
(10) Total Amount of Interest projected in current fiscal year	\$ -
(11) Total Amount of Other Funds projected in current fiscal year	\$ -
(12) Total 911 funds projected	\$ -

EXPENDITURES

Personnel Cost

	Total Budgeted
(13) Dispatch Supervisor/Director Salary	\$ -
(14) Dispatcher Salaries	\$ -
(15) Mapping/Addressing Salaries	\$ -
(16) Other Salaries	\$ -
(17) Retirement Contribution	\$ -
(18) Health Insurance	\$ -
(19) Other Fringe Benefits	\$ -

Facility Costs

(20) Capital improvements	\$ -
(21) Lease or rental payments	\$ -
(22) Utilities	\$ -
(23) Telephone Service	\$ -
(24) Maintenance	\$ -
(25) Emergency Power Equipment	\$ -
(26) Insurance	\$ -
(27) Furniture and Fixtures	\$ -
(28) Office Supplies	\$ -
(29) Other Facility Costs	\$ -

Training and Memberships

(30) On -Site Training	\$ -
(31) Conferences	\$ -
(32) Training Related Travel	\$ -
(33) Membership Dues	\$ -

Equipment/Software

(34) 911 Controllers	\$ -
(35) 911 Trunks	\$ -
(36) Telephone Equipment	\$ -
(37) Remote 911 Hardware, Modems etc.	\$ -
(38) Computer workstations	\$ -
(39) Radio Systems	\$ -
(40) CAD System	\$ -
(41) GIS/ Mapping System	\$ -
(42) Software licenses	\$ -
(43) Maintenance/Service Agreements	\$ -
(44) Other Equipment and Software	\$ -

Vehicle Expenses

(45) MSAG development and Maintenance	\$ -
(46) GIS Verification & Testing	\$ -
(47) Other	\$ -

Professional Services

(48) Legal	\$ -
(49) Auditing	\$ -
(50) Mapping/Addressing	\$ -
(51) Other	\$ -
(52) Total Expenditures	\$ -

I, _____ (name)

Certify that I have written or reviewed this Budget and that all the information in the report is true and correct as of this date.

(REQUIRED)

Financial Statement Glossary

- (5) Includes all CMRS payments excluding grants.
- (6) Includes receipts derived from local wireline fees.
- (7) Included contributions received from cities, fiscal courts and other local governments.
- (8) Includes all grant money received from CMRS
- (9) Includes all grant money received from other sources.
- (10) Includes interest received on bank balance or other investments.
- (11) Includes all revenue not listed above.
- (12) Includes the total of revenue; should be the total of lines 5-11.
- (13) Includes the salary of the 911 director, supervisor or manager.
- (14) Includes the salary of 911 call takers and dispatchers.
- (15) Includes salaries attributable to mapping and addressing. This may be prorated from the salaries of other PSAP employees.
- (16) Includes all 911 related salaries not listed above.
- (17) Includes employer paid retirement contributions.
- (18) Includes employer paid health insurance.
- (19) Includes other employer paid fringe benefits.
- (20) Includes capital improvements made to the 911 facility.
- (21) Includes rent, lease or mortgage paid for the 911 facility.
- (22) Includes electricity, gas and other utilities paid for the 911 facility.
- (23) Includes 911 telephone bills paid for the 911 facility.
- (24) Includes the cost of maintenance and upkeep of the 911 facility.
- (25) Includes emergency power equipment purchased for the 911 facility.
- (26) Includes property and equipment insurance for the 911 facility.
- (27) Includes the cost of furniture & fixtures purchased for the 911 facility.
- (28) Includes office supplies purchased for use in the 911 facility.
- (29) Includes any other facility costs not included above.
- (30) Includes the cost of training at or near the 911 facility.
- (31) Includes the cost of 911 related conferences and seminars.
- (32) Includes the cost of mileage, meals, lodging, and other travel costs related to 911 training.
- (33) Includes the cost of 911 related membership dues.
- (34) Includes the cost of 911 controllers & related equipment and software.
- (35) Includes the cost 911 trunks and related equipment.
- (36) Includes telephones and related equipment.
- (37) Includes the cost of 911 hardware, modems etc. for use in remote locations.
- (38) Includes the cost of computer workstations and related hardware.
- (39) Includes the cost of radio systems and related equipment.
- (40) Includes the cost of Computer Aided Dispatch systems & related equipment and software.
- (41) Includes the cost of Geographic Information Systems and mapping equipment.
- (42) Includes the cost of 911 related software.
- (43) Includes the cost of equipment maintenance and service agreements.
- (44) Includes any other equipment and software not listed above.
- (45) Includes vehicle and mileage cost associated with the development and maintenance of a MSAG
- (46) Includes vehicle and mileage cost associated with Global Information Systems verification & testing.
- (47) Includes vehicle and mileage cost not listed above.
- (48) Includes 911 related legal and attorney fees.
- (49) Includes 911 related audit fees.
- (50) Includes fees paid for mapping and addressing contracts.
- (51) Includes any other professional fees not listed above.
- (52) Includes the total expenditures listed in each column; should be the total of lines 13-51.

Applicant Name: _____

PROJECT DESCRIPTION AND JUSTIFICATION: Describe the details of your project. What is the purpose and end goal of the project; the specific utilization of grant funds; and the impact on and improvement to your current 911 operations? Refer to “Grant Application Guidelines” (page 6) for the type of information to include in the project description. *(Recommended: 1-3 pages)*

(REQUIRED)

Applicant Name: _____

ASSURANCES

ACCEPTANCE OF TERMS AND CONDITIONS: The grantee accepts and agrees to comply with all grant terms and conditions. The grantee understands that grants are contingent upon Board review and approval, the availability of funds and an application may only receive partial funding.

DISCLAIMER: The grantee certifies that the facts and information contained in this application and any attached documents are true and correct. A violation of this requirement may result in revocation of the grant, return of all funds and interest accrued (if any), to the Kentucky 911 Services Board and any other remedy provided by law.

NOTIFICATION OF AWARDS: The Kentucky 911 Services Board will announce awards upon approval.

CHANGES: No changes or departures from the original proposal shall be permitted unless the Kentucky 911 Services Board gives prior written authorization. Any unauthorized change will necessitate the return of grant funds.

Failure to utilize grant funds as represented may jeopardize eligibility for future funding.

AUTHORITY

I hereby affirm my authority and responsibility for the use of funds requested and further certify that all statements and supporting data in the grant application are true and correct.

Authorizing Official's Signature	Date
----------------------------------	------

Printed Name _____

Subscribed and sworn before me this ____ day of _____ 20__.

Notary Public

(REQUIRED)

KENTUCKY 911 SERVICES BOARD GRANT FUND OVERVIEW OF ALLOWABLE COSTS AND GRANT TERMS AND CONDITIONS

ALLOWABLE COSTS FOR PSAPs

Allowable costs are listed in Kentucky Administrative Regulation 202 KAR 6:090.

<http://lrc.ky.gov/kar/202/006/090.htm>

ALLOWABLE COSTS FOR CARRIERS (PROVIDERS)

Allowable costs are listed in Kentucky Administrative Regulation 202 KAR 6:020 Section 8.

<http://lrc.ky.gov/kar/202/006/020.htm>

OTHER COSTS

Any exceptions to the allowable expenses must receive prior approval by the Kentucky 911 Services Board. The awardees shall provide full rationale for other costs submitted.

KENTUCKY 911 SERVICES BOARD GRANT TERMS AND CONDITIONS

Grant Terms and Conditions are available for download from the Kentucky 911 Services Board Grant Program page of the Board's website:

<http://911board.ky.gov>

CONTRACTS FOR EQUIPMENT, HARDWARE AND SOFTWARE

Contracts with vendors for the purchase of equipment, hardware and software utilizing grant funds will contain the following conditions:

- 1) *The vendor represents and warrants that the equipment being purchased is Next Generation 911 enabled. Enabled means the equipment, hardware and software will not require additional modifications or updates to connect directly to an approved i3 solution as defined by the National Emergency Number Association (NENA).*
- 2) *The vendor will hold the purchaser harmless from any costs and actions in the event of any claim or allegation of patent infringement against the seller or manufacturer of any equipment, hardware, software, service or technology purchased from the vendor.*

Attachment #1

Explanation of Category 1 Host/Remote Grants

Beginning with the 2013 grant awards, the (former) CMRS Board made the decision to steer all grant funds requested and approved for the purpose 911 controller equipment towards Board approved Host/Remote configurations. These solutions are IP based and allow for cost savings and additional disaster recovery capabilities. The PSAP is not responsible for the maintenance of the Host, as in most cases the Host is owned by the Provider (vendor).

The Board historically has awarded a dollar amount per position to a PSAP wishing to migrate from their existing 911 controller to one of the Board approved Host/Remote configurations and intends to do the same for the 2017 Category 1 awards. **For the purpose of these awards, the number of positions awarded will be determined by the number of positions equipped with TDD's in your PSAP as self-reported on the required annual PSAP Survey.**

Beyond the Grant award per position, the PSAP is responsible for a monthly recurring cost per position paid to the vendor. **The vendor will be responsible for communicating this cost to the PSAP as well as what is included in the monthly recurring cost and the PSAP will be expected to sign a 5 year agreement with the Provider.**

The Board spent several months negotiating such topics as cost, equipment specifications, terms and conditions, required connectivity, configurations and timelines with the approved Host/Remote Providers. The Board approved equipment offerings are on some type of government contract and therefore not required to be procured by the local governments through an official bid process. Essentially, the Kentucky 911 Services Board has completed that work for you.

Below the existing Providers, their Host/Remote equipment and contact information are identified:

Provider: AT&T

Equipment Type: Airbus
Contact: Kim Rankin
(859) 699-0107
kr9465@att.com

Provider: AT&T

Equipment Type: West
Contact: Kim Rankin
(859) 699-0107
kr9465@att.com

Provider: Cincinnati Bell

Equipment Type: TCS
Contact: Don Kiely
(513) 397-7743
don.kiely@cinbell.com

Provider: LFUCG

*LFUCG/Windstream
Equipment Type: Solacom
Contact: Robert Stack
(859) 258-3380
rstack@lexington911.ky.gov

Provider: Kentucky State Police

Equipment: Solacom
Contact: Seth Hawthorne
(270) 384-4796
seth.hawthorne@ky.gov

Provider: Motorola

Equipment: Emergency CallWorks
Contact: Ken Ackerman
(502) 494-6682
ken.ackerman@motorolasolutions.com

****For those applying for a Category 1 Host/Remote grant, the accompanied "Category 1 Selection Form" must accompany your application and include a signature from the provider you select confirming that it is feasible to have your PSAP successfully deployed as a remote from their Host within one year of receiving the grant award.***



2017 Kentucky 911 Services Board Grant Category 1 Application -----Selection Form-----

Grant Applicant Name: _____

Number of Positions Requested: _____

Please check the box next to the Host/Remote Option you have chosen:

- ☐ AT&T, Airbus
- ☐ AT&T, West
- ☐ Cincinnati Bell, TCS
- ☐ Central Kentucky Network, Solacom
- ☐ Kentucky State Police, Solacom
- ☐ Motorola, Emergency Callworks

Agreed Upon Total Monthly Recurring Cost For Equipment: \$ _____

Source of Network Connection: _____

Specifications of Network Connection: _____

Monthly Recurring Cost for Network Connection: \$ _____

Locations of Solution Hosts: _____

Signature of Authorizing Official: _____

Signature of Provider*: _____

Date: _____

****By signing this form, the Host/Remote Provider is confirming that if the award is granted to this PSAP, the PSAP will be successfully deployed as a remote from the selected host within one year of receiving the grant award.***

(REQUIRED, IF CATEGORY 1 APPLICANT)



2017 Kentucky 911 Services Board Grant Proper Procurement Declaration

Grant Applicant Name: _____

Project Title: _____

All grant applicants must complete the procurement process in advance of submission of the application.

Please check the box to identify the procurement method followed. The documentation provided MUST match the amount requested.

- ☐ A) Official Request for Proposal (RFP) Completed
☐ B) Items to be purchased on State Price Contract
☐ C) Items to be purchased qualify for Sole Source Exemption
☐ D) Items to be purchased do not exceed \$20,000

Requirements for each of the above selections are identified below.

A) Official Request for Proposal (RFP) Completed

Vendor Selected: _____

Other Vendors Whom Responded: _____

Please include the following documentation if Option A was selected:

- A copy of the official RFP (should include the scoring criteria).
- A copy of the RFP advertisement.
- A copy of each response to the RFP (a few important pages including quote and description of services to be provided is sufficient).
- A narrative describing why the winning bid was chosen.

(REQUIRED)

B) Items to be purchased on State Price Contract.

Vendor Selected: _____

Master Agreement #: (MA) _____

Items #(s): _____

Please include the following documentation if Option B was selected:

-A copy of the vendor quote and description of services to be provided.

C) Items to be purchased qualify for Sole Source Exemption.

Vendor Selected: _____

Please include the following documentation if Option C was selected:

-A copy of the vendor quote and description of services to be provided.

-A narrative signed by your purchasing official (County/City Treasurer or the equivalent) justifying the Sole Source Exemption.

D) Items to be purchased do not exceed \$20,000.

Vendor Selected: _____

Please include the following documentation if Option D was selected:

-A copy of the vendor quote and description of services to be provided.

This form MUST be signed by your purchasing official (County/City Treasurer or the equivalent).

"I certify that the information reported in this document is true and the Kentucky Model Procurement Code (KRS 45A) was followed in deciding how to purchase the items requested in this grant application."

Signature

Title

Date

(REQUIRED)

2017 Grant Application Evaluation

Application # _____ Applicant _____

Mandatory Project Requirement

1) Application is Consistent with the State 911 Plan.

Project Priorities

- | | |
|--|---|
| 1) Emergency –dire need just to survive. | 2) Compliance with State 911 Plan and NG911 themes. |
| 3) Efficiency in cost and/or service delivery. | 4) Regional impact/regionalization. |
| 5) Innovation. | 6) Applicant exhibits sustainability/project helps the applicant become more sustainable. |

Funding Categories (check one):

- _____ 1) Connection to existing Host/Remote configuration approved by the Board
- _____ 2) New or improved 911 PSAP support equipment.
- _____ 3) Regional Host/Remote project proposals outside of current Board approved deployments.
- _____ 4) Other.

Each Evaluation Criteria will be evaluated in the following manner:

- Excellent (3 points)
- Good (2 points)
- Acceptable (1 point)
- Not Acceptable (0 points)

Evaluation Criteria (each criteria will receive a separate score):

- _____ The proposal is consistent with the State 911 Plan.
- _____ The proposal meets one or more of the project priorities.
- _____ The proposal clearly illustrates a critical problem or gap in service.
- _____ The proposal is a strong and/or innovative solution to address the problem.
- _____ The proposal has a reasonable deployment plan and timeline.
- _____ The proposal has a viable plan to sustain and maintain the solution long term.
- _____ The proposal demonstrates a convincing reason for funding.
- _____ The proposal is an ideal and allowable use of CMRS Funds.
- _____ The proposal followed and documented the proper procurement procedures.

_____ **Total Individual Score (out of 27 points)**

Peer Reviewer Scores

Peer Reviewer #1 Total Score _____)

Peer Reviewer #2 Total Score _____)

Peer Reviewer #3 Total Score _____)

Peer Reviewer #4 Total Score _____)

Average Score _____)

(Total of Peer Reviewer Scores ÷ 4)

Calculation of Final Score

Average Peer Reviewer Score _____

(Bonus Points, Check All That Apply)

_____ +4 points (Multi-County PSAP)

_____ +2 points (City/County PSAP, KSP PSAP)

_____ +2 points (Local Funding Contribution)

FINAL SCORE _____

(Average Peer Reviewer Score + Bonus Points)