Appendix A

Funding agency (if a State agency, it is also important to note if these are pass-through funds)

Summary of Grant Application for City Administrator Review

FEMA HOMERAND SECURITY				
Grant name and program description and Project Name/File Number (if	applicab	le):		
AFG ASSISTANCE TO FIRETAGITTEMS GRANT -	REGION	JAL 1	Applic	ATTON
			•	
FOR EXTRICATION EQUIPMENT HOSTED BY SALINE Program Award Amount: \$ 152,186 FEMA -138,35091/	ALLEP	+ Inc	- USPA	RTMENT
Program Award Amount: \$ 152,186 / FEMA - 138,350 / 1	CITY -	13,83	35	
Service Area contact person (grant administrator) (name, title, phone #):				
Assit FIRE CHIEF ELLEN TAYLOR 734 794-69	61 K	4960	4	
Grant Application Questions:				
Does the grant require matching funds? If yes, how much? 13,835	Yes	No	N/A	
Does the grant require an appropriation adjustment from City Council? If the grant funds FTEs, is there a requirement to retain those employees	V			Possibly
for a certain period of time? If yes, how many years?			~	
If the grant funds capital outlay, is there a requirement to track the equipment for a certain number of years after the grant award? If yes, how many? END OF USE OR VALUE USS THAN \$5,000	V			
If the grant has special reporting requirements, have those been discussed with Finance?				
If the grant has special banking requirements to receive funding, have those been discussed with the City Treasurer?		2-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	~	
Are there other commitments that the City will be making if this grant is awarded? MHTCHING FUNDS		***************************************		
an apa	ate: //	-31-1	6	l
	ite: <u>//</u>	/4/1	4	
City Administrator Approval: Return Completed Form to the Finance Director after all approvals		<i>{ </i>	W and	
TWENTY AGENCIES: TOTAL GRANT AS OF 11-1-16 \$ 2.007, 59 FEMA 36 \$ 1,825, 08 109, MATCH \$ 182, 506	364			
1090 MATCH \$ 182, 508	3 36			