## 2023 NCEM EMPG Grant Application

	Applicant:	Rowan Count	Rowan County						
Applicant	Street:	130 W Innes S	130 W Innes St						
	City:	Salisbury							
	State:	NC	Zip Code: 28144						
	EIN:	56-6000336	00336						
	SAM Registered	Yes	SAM Expiration: 07/05/2023						
	UEID:	GCB7UCV96N	GCB7UCV96NW6						
	POC Name:	TJ Brown		Title:	Emergency S	Service	s Deputy Chief		
	Email:	tj.brown@rov	wancountync.gov			Phon e:	704-216-8918		

	Title:	County EMPG
	Abstract:	Will use funds to support salary for Emergency Manager to maintain operations and complete the
		designated activity selections for WebEOC
Pro		
ojec		
Project Information	Goal:	Salary Support
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		ory <b>Optional Activity</b> Selections: (reimbursement for up to six selections)
	Activity	2023.10 Active Local Emergency Planning LEPC
	Activity	2023.12 ICS Position Training
	Activity	2023.20 Attend an additional Conference
	Activity	2023.31 Recovery Plan
	Activity	2023.33 Participate in Domestic Preparedness Region Activities
	Activity	2023.36 Storm Ready Certification
	Activity	2023.46 Search Management Overhead Team
	Activity	2023.55 EM Forums
	Activity	2023.65 Equipment Maintenance
	Project Red	quires an EHP: No

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	Drimanu	Operational coordination
	Primary:	Operational coordination

Core Capabilities/		supported:	Through response to local events.
ties/		Secondary:	Planning
		How capability is	Through creating plans to support operational needs
ori:		supported:	
Priorities			
Addressed			
sse			
ď	Na	ational Priority	Strengthen the emergency management workforce
		Area:	

Pro	Milestone	Target Completion Date:
Project	WebEOC Activity Selection	10/31/2023
t Timeline	Complete Base/Optional Activities	01/01/2023
	Execute MOA	10/31/2023
1e	Project Closeout	02/28/2024

	EM Program Manager details								
		Time Alloted for FM:	100	FT Salary:	87423.24				
		Date of Employment (Current	07/01/2022	EMPG Coursework	Yes				
		POS).		Completed:					
	All I	EM Personnel details (Supported b	y EMPG funds)						
_		All program funds (federal and ma	atch) allocated towards local EN	∕l personnel					
Q					229948.69				
.gar		All EMPG Program funds (federal a							
niza		emergency management personnel			0				
Organizational		Number of local emergency mana	1						
na		Number of local emergency mana							
		the EMPG Program	1						
Details		Number of local emergency mana							
S		partially) by the EMPG Program			1				
		Names of all EMPG-supported personnel			EMPG Coursework Completed				
		TJ Brown			Yes				

	Pl	Planning/Organization/Training/Exercise detail						
		Activity Area:	Description	Federal Share	Fed + Match			
		Planning	to support the activites selected in WebEOC	53,279.03	106,558.06			
					0.00			
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					0.00			
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Information

Εqι	Equipment detail						
	Description	Activi	AEL#	Qty	Federal Share	Fed + Match	
		ty					
						106,558.06	
						0.00	
						0.00	
						0.00	
						0.00	

	Fur	nding Summary		
ВС		Activity Area:	Federal share	Fed + Match
Budget		Planning	53,279.03	106,558.06
et S		Organization	0.00	0.00
Sum		Equipment	0.00	0.00
3		Training	0.00	0.00
ary		Exercise	0.00	0.00
		Total Funding Request:	53,279.03	106,558.06

Additional Information

Certifications

Acknowledge the Following Statements

Acknowledge the I	Following Statements:
Yes	This application includes complete and accurate information.
Yes	I understand that any project having the potential to impact the environment, historical or cultural resources must submit an Environmental & Historical Preservation Form.
Yes	I understand that in accordance with HSPD-5, the adoption of the National Incident Management System (NIMS), is a requirement to receiving federal preparedness assistance. By submitting this grant
Yes	I understand that this project is Nationwide Cybersecurity Review complaint and annual survey participation is a requirement through the grant period of performance.
Yes	I understand that projects with funds allocated towards equipment are required to check all equipment against the FEMA Allowable Equipment List.
Yes	I understand that any changes made to this grant after the submission deadline must be approved by the NCEM Grants Branch Manager and updated application must be submitted.
Yes	I understand that, if applying as a nonprofit agency, a copy of nonprofit certification must be submitted with your application
Yes	I understand that submittal of the project proposal does not guarantee funding.
Yes	I understand that any person who knowingly makes a false claim or statement in connection with this