

Legal Review

Declined Denied Awarded PSGrant#	
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## **GRANT INFORMATION FORM (GIF)**

## Complete either side A or if awarded, complete side B in this same form

This form is to be used to provide information to the Grants Administration Division (GAD) for grant applications, grant awards, and/or grant contract amendments. After completing either side, please forward to the GAD Office at <a href="Grants-1@elpasotexas.gov">Grants-1@elpasotexas.gov</a>. Once a grant has been awarded and a contract/agreement needs to be processed, please complete SIDE B and forward to GAD, we will submit for Legal Review and further processing. Please use the same GIF to complete Part A & Part B so it is all kept on the same sheet.

Department El Paso Fire Department		DUNS-058873019/UEI-KLZGKXNFVTL4		
A. GRANT APPLICATION		B. CONTRACT/AGREEMENT/AMENDMENTS		
A1. Department Programmatic Contact Person Name: Daniel P Roy Title: Deputy EMC Phone No.: (915) 838-3271 Email: RoyDP@elpasotexas.gov		B1. Department Financial Grant Contact Person Name: Title: Phone No.: Email:		
Application Due Date: February 8, 2024 @ Requires Signature or Review from:	Extremism - Functional Exercis N/A	B2. Grant Data Funding Agency: Grant Name: Program Name: Agency Contract No.: Grant Type: Please Select Pass through Agency:		
<b>A3. Financial Data</b> Amount of Grant Funding Request:	\$ 175,000.00	Grant Start & End Date: Month Day Yea  New, Continuation, or Amendment: Please S		
Amount of Matching Funds Requested:	\$ 0.00	B3. Financial Data		
Amount of In-Kind Funds and/or Additional City Contributions:	\$ 0.00	Post-Award Amount: (As indicated in the grant contract/	\$	
Total Amount Requested:	\$ 175,000.00	agreement) - Actual Amount of Cash Match:	\$	
A4. Grant Classification		_		
☐ Competitive (award based on competition) ☐ Entitlement (a set of funds determined under a formula) ☐ Continuation (ongoing funding)  A5. City Match Certification  Has City Match been certified by the Department Director?  Yes		Actual Amount of In-Kind:  Total Award for Project/Program:  \$ 0.00   B4.  CM Signature required  Mayor Signature required  City Council approval required  B5.  Grant Accounting String:  City Match Accounting String:  Comments:  OOG: Solicitation - SHSP Competetive NPA		
(HSEEP) complaint functional exercise involved focused to include open source analysis of misthreats; sharing and leveraging intelligence an	ving a domestic terrorism threat sinformation campaigns, targete d information, including open-s	evelop and implement a Homeland Security Exerc impacting the El Paso region. Functional exercise of violence and threats to life, including tips/leads, source analysis; and execution and management of c violent extremists in a given exercise scenario.	e activities will be intelligence and online/social media-based	
REQUIRED SIGNATURES				
Department Director Signature Onathan Killings, Fire Chief	Date 1/11/2024	Department Director Signature	Date	
Printed Name of Department Director	01/16/2024	Printed Name of Department Director	or	
<del></del>	Date	Grants Administration Division	Date	

01/16/2024

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REV Sept 2021 Questions? Call the Grants Administration Division at (915) 212-1795

Date