

Project #59: Application - BALDWIN COUNTY FY26 EMPG

Routing in Progress: Applicant Submission (Step 1 of 6)

Application Summary

This form outlines all project details, including Scope of Work, all costs, and location worksheets.

Title: BALDWIN COUNTY FY26 EMPG

Total Project Cost: \$1,148,404.00

Eligible Amount: \$1,148,404.00

Cost Summary:

Organization	\$407,530.00
Planning	\$718,374.00
Training	\$22,500.00

Note: these values will only update after the form is saved.

Funding Sources:

Federal	- \$574,202.00
State	- \$0.00
Local	- \$574,202.00

DUNS #: [REDACTED]

UEI #: [REDACTED]

Districts:

US Congressional	- < no value >
State Legislative (House)	- < no value >
State Legislative (Senate)	- < no value >

FEMA Obligation Data:

Federal Number	- < no value >
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Grant

26EMPG FY 2026 EMPG

Grant

Emergency Management

Performance Grant

Start Date: October 1, 2025

Applicant

Baldwin County EMA-EMPG

County Jurisdiction: Baldwin

Baldwin County (Division A Region)

UEI: [REDACTED]

FIPS: AL01033

DUNS #: [REDACTED] Type: County

Project

F # S #59

BALDWIN COUNTY FY26

EMPG

STD Standard

Project POP Deadline:

September 30, 2026

Eligible: \$0.00

Un-Expended Eligible:

\$1,148,404.00

Workflow Summary

Current Step: 1) Applicant Submission
Description: Applicant completes and submits Grant Application Form

Recipients: Danon Hoagland Smith

Last Returned: Nov 4, 2025 at 1:45 PM by
Deborah Link

Documentation Requested

Last Modified: Nov 4, 2025 at 1:47 PM by
Deborah Link

Submission: Nov 3, 2025 at 9:12 AM by Danon
Hoagland Smith

Introduction

Summary Information

Grant: 26EMPG FY 2026 EMPG Grant

Project Type: Standard

UEI Number:

Title:

BALDWIN COUNTY FY26 EMPG

Used to help identify the Project. Ex: "Jurisdiction - Project Name".

Program Participants:

Baldwin County Commission

List all jurisdictions that are participants in your emergency management program. Identify any jurisdictions that have joined or withdrawn from your program in the last year.

Primary Contact:

Anna-Marie O'Brien - Baldwin County Planning & Grants Division
Manager

Edit

Email Address: annamarie.obrien@baldwincountyal.gov

Phone:

Alternate Contact:

Danon Hoagland Smith - Baldwin County EMA Deputy Director

Edit

Organization: Baldwin County EMA

Email Address: Danon.Smith@baldwincountyal.gov

Phone:

Authorized Contact:

Commission Chairman - Chairman of Baldwin County Commission

Edit

Email Address: BCEMA@baldwincountyal.gov

Phone:

Emergency Management
Director:

Tom Tyler - Director - Emergency Management Agency

Edit

Email Address: tom.tyler@baldwincountyal.gov

Phone: [REDACTED]

Grant Financial Officer:

Katrina Taylor - Grants Coordinator

Edit

Email Address: katrina.taylor@baldwincountyal.gov

Phone: [REDACTED]

This application contains
Work Activity and Costs in the
following areas:

Planning
Training
Exercise
Organization

Hold Ctrl key to select multiple areas.

Federal Funding Accountability and Transparency Act Certification (FFATA)

You shall report the names and total compensation of each of the five most highly compensated executives for the preceding completed fiscal year, if:

- a. in the sub-grantee's preceding fiscal year, the sub-grantee received
 - i. 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and
 - ii. \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and
- b. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

Are all of the above
statements true?

No

Costs

Cost Line Items

Classification	Description	Qty	Price	Total
Area				
Training				
Type	21GN-00-TRNG - Training	1	\$ 7,500.00	\$7,500.00
Supplies and Operating Expenses				
AEL Code (List)				
Area				
Planning				
Type	140HF-01-PLSB - Planning Staff Salary and Benefits (direct costs)	1	\$ 718,374.00	\$718,374.00
Salaries				
AEL Code (List)				
Area				
Organization				
Type	21GN-00-MAIN - Maintenance	1	\$ 60,500.00	\$60,500.00
Repairs and Maintenance				
AEL Code (List)				
Area				
Training				
Type	140TP-01-OTST - Out-of-state travel supporting Planning activities	1	\$ 15,000.00	\$15,000.00
Travel Out of State				
AEL Code (List)				
Area				
Organization				
Type	06CC-05-PRTY - Priority Services, Communications	1	\$ 50,300.00	\$50,300.00
Utilities and Communication				
AEL Code (List)				
Area				
Organization				
Type	140HF-01-PLSB - Planning Staff Salary and Benefits (direct costs)	1	\$ 279,230.00	\$279,230.00
Fringe Benefits				
AEL Code (List)				
Application Total				\$1,148,404.00
Grand Total				\$1,148,404.00

Classification	Description	Qty	Price	Total
Area				
Organization				
Type	100RE-01-OTHE - Other expenses to support EM Activities	1	\$ 17,500.00	\$17,500.00
Supplies and Operating Expenses				
AEL Code (List)				
Application Total				\$1,148,404.00
Grand Total				\$1,148,404.00

Funding Sources

Method:



By Percent



By Amount

Funding Source /
Other Agency

Estimated Federal Share:

50

%

\$574,202.00

Estimated State Share:

%

\$0.00

Estimated Non-Federal
Share:

50

%

\$574,202.00

Total Allocated:

100

%

\$1,148,404.00

Please upload a Cost
Estimate document to support
the estimated cost of this
Project:

Attach Files

No documents.

Documentation

Document Name:

Actions:

FEMA Assurances & Certifications, Disclosure of Lobbying
Activities (F20-16, SF-LLL)

Planning Work Plan

EMF #:

EMF 5 - Planning

EMF 2 - Hazard Identification & Risk Assessment

Identify how the grant activities relate to the EMFs outlined in the September 2013 version of the Emergency Management Accreditation Program (EMAP) Standard (e.g. Resource Management, Communications and Warning, etc.)

Project Name:

Review and Revise Emergency Operations Plan (EOP)

Review and Revise Threat and Hazard Identification and Risk Assessment (THIRA)

Finalize and Implement the Integrated Preparedness Plan (IPP)

Provide a descriptive name of each planned project. Examples include "Development of Emergency Function Annexes", "Development of Earthquake Scenario Loss Estimations", "Implementation of Statewide Interoperability Plan", "NIMS Training for Emergency Management Personnel", "Development of Emergency Preparedness Plan for Individuals with Disabilities", etc.

Project Objective:

Update, finalize, approve, and implement BCEMA's plans, guides, and associated annexes/standard operating procedures for all BCEMA divisions and municipal partners.

Briefly explain the major objective of the project, including how the project will address gaps identified through various assessments conducted.

Performance Measures &
Basis of Evaluation:

Analysis and estimation of planning requirements through training, exercising, and seeking input from community partners and stakeholders on the plans and planning elements.

This information is required for all projects and should describe how progress toward the project objective shown above will be measured, and the basis for developing and evaluating the measure. Please also describe the linkage to the National Preparedness System (NPS).

Core Capabilities Addressed:

Planning, Mass Care Services, Operational Communications, Healthcare, Emergency Medical Services, and Logistics.

Briefly describe which of the core capabilities (could be multiple) the project addresses.

Challenges / Risks:

Scheduling challenges, time constraints, manpower, regulations, and policies

Identify all challenges and risks associated with implementing this Activity/Project and how these challenges and risks will be mitigated.

Budget Description for This Activity/Project:

Personell involved with plan development, coordination, and reporting

1. Provide budget total and detail that includes allowable cost categories and descriptive breakdowns of projected expenditures for this Activity/Project); include management and administration costs, if applicable.
2. This section should explain how costs were estimated and justify the need for all costs.
3. Describe how expenditures support maintenance and sustainment of current Goal core capabilities.
4. Describe how expenditures support a capability target identified in the THIRA or a gap identified in the SPR and report these within the quarterly performance progress reports.

Emergency Management Planning Documents**Work Plan Description:**

Reviewing and revising plans such as the Emergency Operations Plan (EOP), THIRA, etc.

Quarter 1**Actions/Deliverables:**

Meetings with staff, stakeholders, and partners (Hazard Mitigation Planning Committee (HMPC), Local Emergency Planning Committee (LEPC), and VOAD, etc.).

Analysis of planning needs and items to be revised if/when needed.

Quarter 2**Actions/Deliverables:**

Continue planning meetings and discussions. Continue to review and revise plans.

Quarter 3**Actions/Deliverables:**

Execution of the plan, revisions, and review/approval by leadership and required signatories.

Quarter 4**Actions/Deliverables:**

Continue maintenance and revision of plans.

Training Work Plan

EMF #:

10 - Training

Identify how the grant activities relate to the EMFs outlined in the September 2013 version of the Emergency Management Accreditation Program (EMAP) Standard (e.g. Resource Management, Communications and Warning, etc.)

Project Name:

BCEMA Target Training and Capability Verification of Personnel.

Provide a descriptive name of each planned project. Examples include "Development of Emergency Function Annexes", "Development of Earthquake Scenario Loss Estimations", "Implementation of Statewide Interoperability Plan", "NIMS Training for Emergency Management Personnel", "Development of Emergency Preparedness Plan for Individuals with Disabilities", etc.

Project Objective:

Completion of NDEMU Basic Academy and ICS Task Specific Training.

Briefly explain the major objective of the project, including how the project will address gaps identified through various assessments conducted.

Performance Measures &
Basis of Evaluation:

The Integrated Preparedness Plan (IPP)
Training Work Plan

Identify needs and areas of improvement, interests, and required continuous education within the EMA staff and partners.

This information is required for all projects and should describe how progress toward the project objective shown above will be measured, and the basis for developing and evaluating the measure. Please also describe the linkage to the National Preparedness System (NPS).

Core Capabilities Addressed:

Operational Coordination, Community Resilience, Operational Communications, Long-Term Vulnerability Reduction.

Briefly describe which of the core capabilities (could be multiple) the project addresses.

Challenges / Risks:

Budget, Staff Turnover, Class Availability

Identify all challenges and risks associated with implementing this Activity/Project and how these challenges and risks will be mitigated.

Budget Description for This
Activity/Project:

Supplies, Materials, etc.

1. Provide budget total and detail that includes allowable cost categories and descriptive breakdowns of projected expenditures for this Activity/Project); include management and administration costs, if applicable.
2. This section should explain how costs were estimated and justify the need for all costs.
3. Describe how expenditures support maintenance and sustainment of current Goal core capabilities.
4. Describe how expenditures support a capability target identified in the THIRA or a gap identified in the SPR and report these within the quarterly performance progress reports.

Upload Current TEP:

Attach File No documents.

Training for Emergency Management Personnel

Work Plan Description:

Training Work Plan submitted.

List all training which EMPG-funded personnel will participate in during this Grant year.

Employee Name	Course Name or Number
Anna-Marie O'Brien	L0101, L0146
Kavika Duff	L0101, L0102, L0105, L014

List all formal emergency management related training courses that will be offered for elected officials, other local officials & support agencies during this Grant year.

Quarter	Date	Course Title	Course Description
1	Jan 19, 2026	G402 Overview for Executiv	To orient executives and senior officials to the ICS and their role in supporting incident management.

Exercise Work Plan

EMF #:

11 - Operations and Procedures

Identify how the grant activities relate to the EMFs outlined in the September 2013 version of the Emergency Management Accreditation Program (EMAP) Standard (e.g. Resource Management, Communications and Warning, etc.)

Project Name:

BCEMA Multi-Year Training and Exercise Plan

Provide a descriptive name of each planned project. Examples include "Development of Emergency Function Annexes", "Development of Earthquake Scenario Loss Estimations", "Implementation of Statewide Interoperability Plan", "NIMS Training for Emergency Management Personnel", "Development of Emergency Preparedness Plan for Individuals with Disabilities", etc.

Project Objective:

Maintain the multi-year Integrated Preparedness Plan (IPP) using a whole-community approach to enable all partners to evaluate and improve their level of preparedness.

Ensure EMA, Emergency Response, Public Service, and Community Partners are prepared for the next emergency and/or disaster through hosting, providing, and coordinating exercise opportunities.

Briefly explain the major objective of the project, including how the project will address gaps identified through various assessments conducted.

Performance Measures &
Basis of Evaluation:

Ensure EMA, Emergency Response, Public Service, and Community Partners are prepared for the next emergency and/or disaster through hosting, providing, and coordinating exercise opportunities.

This information is required for all projects and should describe how progress toward the project objective shown above will be measured, and the basis for developing and evaluating the measure. Please also describe the linkage to the National Preparedness System (NPS).

Core Capabilities Addressed:

Mass Care Services, Operational Communications, Situational Awareness, Operational Coordination, Long-Term Vulnerability Reduction, THIRA

Briefly describe which of the core capabilities (could be multiple) the project addresses.

Challenges / Risks:

Time constraints, Budget, Staff Turnover, and Scheduling.

Identify all challenges and risks associated with implementing this Activity/Project and how these challenges and risks will be mitigated.

Budget Description for This
Activity/Project:

See submitted budget information. Costs were estimated based on historical costs, required resources, and personnel time estimates.

1. Provide budget total and detail that includes allowable cost categories and descriptive breakdowns of projected expenditures for this Activity/Project); include management and administration costs, if applicable.
2. This section should explain how costs were estimated and justify the need for all costs.
3. Describe how expenditures support maintenance and sustainment of current Goal core capabilities.
4. Describe how expenditures support a capability target identified in the THIRA or a gap identified in the SPR and report these within the quarterly performance progress reports.

TEP, Notification and Individual Exercise Participation

Date when last Full-Scale
exercise was conducted:

Jul 31, 2025

A Full-Scale exercise must be conducted every three (3) years.

Work Plan Description:

Exercise Work Plan submitted.

Quarter 1

Actions/Deliverables:

Quarter 2

Actions/Deliverables:

Host a workshop

Identify training needed for partners and stakeholders

HazMat training, public information training, active aggressor

Quarter 3

Actions/Deliverables:

Quarter 4

Actions/Deliverables:

Schedule Training and Exercises for 2026-2027.

Organization Work Plan

EMF #:

5 - Planning

Identify how the grant activities relate to the EMFs outlined in the September 2013 version of the Emergency Management Accreditation Program(EMAP) Standard (e.g. Resource Management, Communications and Warning, etc.)

Project Name:

Geospatial Resource Working Group

Provide a descriptive name of each planned project. Examples include "Development of Emergency Function Annexes", "Development of Earthquake Scenario Loss Estimations", "Implementation of Statewide Interoperability Plan", "NIMS Training for Emergency Management Personnel", "Development of Emergency Preparedness Plan for Individuals with Disabilities", etc.

Project Objective:

To enhance BCEMA and Baldwin County Commissions' capabilities through the coordinated development, integration, and utilization of geospatial data and technologies.

Briefly explain the major objective of the project, including how the project will address gaps identified through various assessments conducted.

Performance Measures &
Basis of Evaluation:

GIS Data Integration, Mapping Development, Intragency Collaboration

This information is required for all projects and should describe how progress toward the project objective shown above will be measured, and the basis for developing and evaluating the measure. Please also describe the linkage to the National Preparedness System (NPS).

Core Capabilities Addressed:

Planning, Situational Awareness, Operational Coordination, and Infrastructure Systems

Briefly describe which of the core capabilities (could be multiple) the project addresses.

Challenges / Risks:

Data Accuracy, Staffing Limitations, Cybersecurity, Data Projection

Identify all challenges and risks associated with implementing this Activity/Project and how these challenges and risks will be mitigated.

**Budget Description for This
Activity/Project:**

1. Provide budget total and detail that includes allowable cost categories and descriptive breakdowns of projected expenditures for this Activity/Project); include management and administration costs, if applicable.
2. This section should explain how costs were estimated and justify the need for all costs.
3. Describe how expenditures support maintenance and sustainment of current Goal core capabilities.
4. Describe how expenditures support a capability target identified in the THIRA or a gap identified in the SPR and report these within the quarterly performance progress reports.

Emergency Management Organizational Development**Work Plan Description:**

The working group will establish geospatial data layers, improve interagency data-sharing, and develop mapping products that enhance situational awareness during emergency operations and planned events.

Quarter 1**Actions/Deliverables:**

Establish the working group framework.
Inventory existing geospatial data.
Develop data-sharing between agencies.
Attend classes and trainings.

Quarter 2**Actions/Deliverables:**

Begin producing priority maps.
Conduct GIS Workshop.
Integrate into plans, guides, and the EOC.

Quarter 3**Actions/Deliverables:**

Expand partner agency integration.
Evaluate data maintenance.

Quarter 4**Actions/Deliverables:**

Conduct EOY review of progress & plan for FY27.

Elected Official

Is the Emergency
Management Coordinator a
full-time position?

Name of Chief Elected
Official:

Title of Chief Elected Official:

Email of Chief Elected
Official:

Chief Elected Official Mailing Address

Same as Agency:

Alabama,

Civil Rights Compliance Certification

Instructions: This form should be completed by the local jurisdiction Equal Opportunity Compliance Officer to ensure subgrantee compliance with applicable provisions of laws and policies prohibiting discrimination as identified in the County/City Emergency Management Agency (EMA) subaward for funding from U.S. Department of Homeland Security and FEMA.

Civil Rights Requirements

To ensure subgrantee compliance with applicable provisions of laws and policies prohibiting discrimination, subgrantees must obtain certification from their jurisdiction Equal Opportunity compliance official stating that the EMA is in compliance with:

- Title VI of the Civil Rights Act of 1964
- Section 504 of the Rehabilitation Act of 1973
- Title IX of the Education Amendments Act of 1972
- The Age Discrimination Act of 1975, and,
- U.S. Department of Homeland Security regulation 6 C.F.R. Part 19

Local EMA Organization Information

Organization Name: Baldwin County Emergency Management Agency

Unique Entity Identifier (UEI): [REDACTED] (Baldwin County Commission)

Address: 23100 McCauliffe Drive, Robertsedale, Alabama 36567

Contact Person/Title: James E. Ball, Chairman - Baldwin County Commission

Email: Jeb.Ball@baldwincountyal.gov

Telephone:

Cooperative Agreement Number(s):

Federal Award: Emergency Management Performance Grant (EMPG)

Certification

By signing below, I certify that the Emergency Management Agency for Baldwin County is compliant with the above listed Civil Rights requirements.

Printed Name of Jurisdiction Equal Opportunity Compliance Official: James E. Ball

Signature/Date:

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS

O.M.B. No. 1660-0025
Expires July 31, 2007

FOR

FY

2026

CA FOR (Name of Recipient)

This summary sheet includes Assurances and Certifications that must be read, signed, and submitted as a part of the Application for Federal Assistance.

An applicant must check each item that they are certifying to:

Part I ☒ FEMA Form 20-16A, Assurances-Nonconstruction Programs

Part II ☐ FEMA Form 20-16B, Assurances-Construction Programs

Part III ☒ FEMA Form 20-16C, Certification Regarding Lobbying;
Debarment, Suspension, and Other Responsibility
Matters; and Drug-Free Workplace Requirements

Part IV ☐ SF LLL, Disclosure of Lobbying Activities *(If applicable)*

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified attached assurances and certifications.

James E. Ball

Typed Name of Authorized Representative

Chairman-Baldwin County Commission

Title

Signature of Authorized Representative

Date Signed

NOTE: By signing the certification regarding debarment, suspension, and other responsibility matters for primary covered transaction, the applicant agrees that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by FEMA entering into this transaction.

The applicant further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the FEMA Regional Office entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. (Refer to 44 CFR Part 17.)

Paperwork Burden Disclosure Notice

Public reporting burden for this form is estimated to average 1.7 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing, reviewing, and maintaining the data needed, and completing and submitting the form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472. You are not required to complete this form unless a valid OMB control number is displayed in the upper corner on this form. **Please do not send your completed form to the above address.**

FMA Planning Application

* **Application Title:** Baldwin County FY26 EMPG

* **Application Number:**

* **Application Year:** 2026

* **Grant Type:** FMA Planning Application

* **Address:**

Applicant Information

* Name of Applicant	Baldwin County Commission -- EMA
* State	Alabama
Congressional District	ONE (1)
* Type of Applicant	☐ State Government ☒ Local Government ☐ Indian Tribal Government ☐ Special Governmental District ☐ Private Non-Profit ☐ Other
If Private Non-Profit,	
Legal status, function, and facilities owned:	
State Tax Number: (e.g. 11-111111)	
Federal Tax Number: (e.g. 11-111111)	
If Other, please specify:	
* Federal Employer Identification Number (EIN). If Indian Tribe, this is Tribal Identification Number.	
* What is your DUNS Number?	
* Are you the application preparer?	☒ Yes ☐ No
* Does your organization have a Smartlink account?	☐ Yes ☒ No
* Is the application preparer the Point of Contact?	☒ Yes ☐ No
* Is application subject to review by Executive Order 12372 Process?	
Yes. ☐ This preapplication/application was made available to the Executive Order 12372 Process for review on:	
No. ☐ Program is not covered by E.O. 12372 ☐ Or program has not been selected by state for review	
* Is the applicant delinquent on any Federal debt?	☐ Yes ☒ No
Explanation:	

Contact Information

Point of Contact Information

☐ Mr.

Title	☒ Ms. ☐ Mrs. ☐ Dr.
* First Name	Anna-Marie
Middle Initial	K.
* Last Name	O'Brien
Title	Planning & Grants Division Manager
* Agency/Organization	Baldwin County Emergency Management Agency
* Address 1	23100 McAuliffe Dr
Address 2	
* City	Robertsdale
* State	AL
* ZIP	36567
* Phone	
Fax	
* Email	annamarie.obrien@baldwincountyal.gov

Alternate Point of Contact Information	
Title	☐ Mr. ☒ Ms. ☐ Mrs. ☐ Dr.
First Name	Danon
Middle Initial	
Last Name	Smith
Title	Deputy Director
Agency/Organization	Baldwin County Emergency Management Agency
Address 1	23100 McAuliffe Dr
Address 2	
City	Robertsdale
State	AL
ZIP	36567
Phone	
Fax	
Email	danon.smith@baldwincountyal.gov

Subgrant Applications						
Rank	Application Number	Application Title	Name	Non-Federal Share	Federal Share	Federal Share %

Plan Schedule		
Subgrant Applicant	Total Duration	Unit of Time
Title of your proposed activity		
Proposed Period of Performance		
Overall duration of the grant		Unit of Time
		☐ Day(s) ☐ Week(s) ☐ Month(s) ☒ Year(s)

Budget	
File Name	Date Attached
Subgrant Applicant	Requested Amount
Total	\$

Assurances and Certifications	
Forms	Status
Part I: FEMA Form 20-16A, Assurances Non-Construction Programs.	Incomplete/Complete
	☐ Not Applicable
Part II: FEMA Form 20-16C, Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibilities Matters; and Drug-Free Workplace Requirements.	Incomplete/Complete
Part III: SF-LLL, Disclosure of Lobbying Activities (Complete only if applying for a grant of more than \$100,000 and have lobbying activities using Non-Federal funds. See Form 20-16C for lobbying activities definition.)	Incomplete/Complete
	☐ Not Applicable

FEMA Form 20-16A, Assurances-Non-Construction Programs
Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified. As the duly authorized representative of the applicant, I certify that the applicant: - Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application. - Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State,

- through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 USC Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (PL 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 USC Section 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 USC Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 USC Section 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (PL 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (PL 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 USC 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 USC Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) Any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) The requirements of any other nondiscrimination statute(s) which may apply to the application.
 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (PL 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
 8. Will comply with the provisions of the Hatch Act (5 USC Section 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
 9. Will comply, as applicable, with the provisions of Davis-Bacon Act (40 USC Section 276a to 276a-7), Copeland Act (40 USC Section 276c and 18 USC 874), and the Contract Work Hours and Safe Standards Act (40 USC Section 327-333), regarding labor standards for federally assisted construction subagreements.
 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (PL 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 USC Section 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 USC Section 17401 et seq.); (g) protection of underground source of drinking water under the Safe Drinking Water Act of 1974, as amended, (PL 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (PL 93-205).
 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 USC Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 USC Section 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 USC Section 469a-1 et seq.)

14. Will comply with PL 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (PL 89-544, as amended, 7 USC 2131 et seq.) pertaining to the care, handling, treatment of warm blooded animals held research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 USC Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
19. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 USC Section 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

I, _____, hereby sign this form as of _____.

FEMA Form 20-16C

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 28 CFR Part 17, "Government-wide Debarment and suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons entering into a grant or cooperative agreement over \$100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions;

☐ **Standard Form LLL Disclosure of Lobbying Activities Attached**

(c) The undersigned shall require that the language of this certification be included in the award documents for all the sub awards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s)) and that all subrecipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A. The applicant certifies that it and its

principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or locally) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

Explanation:

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17.615 and 17.623:

(A) The applicant certifies that it will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an on-going drug free awareness program to inform employees about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.
- (e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i.e. regional office or FEMA office.

(f) Taking one of the following actions against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Require such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency.

(g) Making a good effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

*** Place of Performance**

Street	City	State	Zip
23100 McAuliffe Drive	Robertsdale	AL	36567

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification.

I, _____, hereby sign this form as of _____.

Standard Form LLL: Disclosure of Lobbying Activities

*** 1. Type of Federal Action**

- B a. contract
B b. grant
 c. cooperative agreement
 d. loan
 e. loan guarantee
 f. loan insurance

*** 2. Status of Federal Action**

- A a. bid/offer/application
 b. initial award
 c. post award

*** 3. Report Type**

- A a. initial filing
A b. material change

For Material Change Only :

year : _____ quarter : _____

date of last report : _____

4. * Name and Address of Reporting Entity:

Reporting Entity Type:

☐ Prime ☐ Subawardee

Tier, if known: _____

Congressional District, if known: _____

5. If Reporting Entity in No.4 is a Subawardee, Enter Name and Address of Prime:

Congressional District, if known: _____

*** 6. Federal Department/Agency**

Federal Emergency Management Agency

*** 7. Federal Program Name/Description**

CFDA Number, if applicable: _____

8. Federal Action Number, <i>if Known</i> :	9. Award Amount, <i>if Known</i> : \$
10a. Name and address of Lobbying Registrant: (if individual, last name, first name, MI)	10b. Individuals Performing Services: (including address if different from No.10a) (last name, first name, MI)
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	
I, _____, hereby sign this form as of _____.	

Note: Fields marked with an * are required.