(Cal OES Use Only)							
Cal OES #	2017-0083	FIPS #	033-00000	VS #		Subaward #	2017-0083

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
GRANT SUBAWARD FACE SHEET

The California Governor's Office of Emergency Services (Cal OES), makes a Grant Subaward of funds set forth to the following:

1. Subrecipient: Lake County **1a. DUNS #:** 071554760

2. Implementing Agency: Lake County Sheriff's Office **2a. DUNS #:** 113350339

3. Implementing Agency Address: P.O. Box 489 (Street) Lakeport (City) 95453-0489 (Zip+4)

4. Location of Project: Lakeport (City) Lake (County) 95453-0489 (Zip+4)

5. Disaster/Program Title: Homeland Security Grant Program **6. Performance Period:** 09/01/17 **to** 05/31/20

7. Indirect Cost Rate: ☑ **N/A;** ☐ **10% de Minimis;** ☐ **Federally Approved ICR;** _____

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
2017	8. HSGP-SHSP		$139,894				$0	$139,894
Select	9. Select						$0	$0
Select	10. Select						$0	$0
Select	11. Select						$0	$0
	12. **TOTALS**	$0	$139,894	$139,894	$0	$0	$0	12G. Total Project Cost: **$139,894**

13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. Official Authorized to Sign for Subrecipient:

15. Federal Employer ID Number: 94-60000825

Name: Brian Martin Title: Sheriff/Coroner/OES Director

Telephone: 707-262-4091 (area code) FAX: 707-262-4220 (area code) Email: brian.martin@lakecountyca.gov

Payment Mailing Address: P.O. Box 489 City: Lakeport Zip+ 4: 95453-0489

Signature: _____ Date: 10-25-17

(FOR Cal OES USE ONLY)

I hereby certify upon my personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Cal OES Fiscal Officer Date

Cal OES Director (or designee) Date

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

AUTHORIZED BODY OF 5 - SIGNATURE AND CONTACT INFORMATION

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CFDA # 97.067

Lake County

033-00000
2017-0083

Authorized Body of 5-Signature and Contact Information

Position	Signature	Printed Name	Title	Phone	Email
County Public Health Officer		Karen Tait	Public Health Officer	707-263-2221	karen.tait@lakecountyca.gov
County Fire Chief		Willie Sapeta	LCFPD Chief	707-994-2170	fdchf700@yahoo.com
Municipal Fire Chief		Jay Beristianos	NSFPD Chief	707-489-3135	chief800@northshorefpd.com
County Sheriff		Brian Martin	Sheriff/Coroner/OES Director	707-262-4091	brian.martin@lakecountyca.gov
Chief of Police		Brad Rasmussen	Lakeport Police Chief	707-263-5491	brasmussen@lakeportpolice.org
Additional Position (Optional)					
Additional Position (Optional)					

Additional Authorized Agent Contact Information

Salutation	Authorized Agent's Name	Title	Mailing Address	City	State	Zip	Phone	Email
Sheriff	Brian L. Martin	Sheriff/Coroner/OES Director	P.O. Box 489	Lakeport	CA	95453-0489	707-262-4091	brian.martin@lakecountyca.gov
Ms.	Mary Beth Strong	Sheriff's Administrative Manager	P.O. Box 489	Lakeport	CA	95453-0489	707-262-4218	mbs@co.lake.ca.us
Ms.	Carol J. Huchingson	County Administrative Officer	255 North Forbes Street	Lakeport	CA	95453	707-263-2580	carol.huchingson@lakecountyca.gov
Salutation	Contact's Name	Title	Mailing Address	City	State	Zip	Phone	Email
Mr.	Dale Carnathan	Emergency Services Manager	P.O. Box 489	Lakeport	CA	95453-0489	707-263-3450	dale.carnathan@lakecountyca.gov
Ms.	Mary Beth Strong	Administrative Manager	P.O. Box 489	Lakeport	CA	95453-0489	707-262-4218	mbs@co.lake.ca.us
Ms.	Teresa Stewart	OES Assistant	P.O. Box 489	Lakeport	CA	95453-0489	707-263-3450	teresa.stewart@lakecountyca.gov

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

Federal Funding Accountability and Transparency Act (FFATA) Financial Disclosure

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- Public Law (PL) 109-282 (Federal Funding Accountability and Transparency Act of 2006), as amended by Section 6202(a) of the Government Funding Transparency Act of 2008 (PL 110-252), which is outlined in FEMA GPD information Bulletin No. 350.
- If the Subrecipient in the preceding year received 80 percent or more of its annual gross revenues in Federal Awards; **and** $25,000,000 or more in annual gross revenues from Federal awards, **and** the public does not have access to information about the compensation of the senior executives of the entity, **then the Subrecipient is subject to the FFATA Financial Disclosure requirements, and will need to fill out this form.**
- FFATA Financial Disclosure is **in addition** to the Authorized Body of Five page.
- Cal OES enters FFATA information on behalf of the Subrecipient.

Executive Name	Title	Annual Salary	Annual Dollar Value of Benefits	Total Compensation
N/A				

☑ Not Subject to FFATA Financial Disclosure

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

PROJECT LEDGER

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CFDA # 97.067

LEDGER TYPE: Initial Application

Today's Date: October 19, 2017

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ID	Direct / Subaward	Project Number	Project Title	Project Description	Funding Source	Discipline	Solution Area	Core Capability	Capability Building	Deployable / Shareable	Supports Prev Awarded Investment?	Total Budgeted Cost	Amount Approved Previous	**Amount This Request**	**Approval: Cal OES ONLY** Total Approved	Date & Initials (Prog. REP.): Remaining Balance	Percentage Expended
												139,894	-	-	-	**139,894**	
ID #9	Direct	001	OpArea EOC Equipment	EOC Equipment (EOC-appropriate furnishings to support a 12-15-seat OpArea EOC will be purchased and installed. Work surfaces, chairs, computers, video displays and other support equipment will be identified and acquired for the facility.)	HSGP-SHSP	EMG	Equipment	Operational Coordination	Build	Shareable	FY16; ID #1	40,248				**40,248**	
ID #4	Direct	002	Enhance County Communications Infrastructure	Communications Equipment (radios, repeaters, antennae, cavities, cables, switching gear)	HSGP-SHSP	PSC	Equipment	Operational Communications	Build	Shareable	FY16; ID #4	40,248				**40,248**	
ID #4	Direct	003	OpArea Videoconferencing System	Video-Conferencing Equipment (licensing and workstation devices to support desktop and room video-conferencing capabilities)	HSGP-SHSP	LE	Equipment	Operational Communications	Build	Shareable	FY16; ID #1	33,337				**33,337**	
ID #9	Direct	004	Functional Assessment Support Team	The OpArea will contract for, and conduct Functional Assessments of potential shelter sites throughout the County	HSGP-SHSP	PH	Planning	Mass Care Services	Build	Shareable	No	14,250				**14,250**	
ID #5	Direct	005	Purchase Triage Tags for County EMS and Fire Services	Standardized Triage Tags will be acquired for County EMS and Fire Servives	HSGP-SHSP	EMS-F	Equipment	Public Health, Healthcare, and Emergency Medical Services	Sustain	Both	No	4,750				**4,750**	
ID #9	Direct	006	M. & A.	M. & A. for the SHSGP	HSGP-SHSP	EMG	M&A	Planning	Sustain	NA	No	7,061				7,061	

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

EQUIPMENT

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CFDA# 97.067

LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

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Project Number	Equipment Description & (Quantity)	AEL#	AEL Title	SAFECOM Consult	Funding Source	Discipline	Solution Area Sub-Category	Deployable / Shareable	Part of a Procurement over 150k	Sole Source Involved	Hold Trigger	Approval Date	Invoice Number	Vendor	ID Tag Number	Condition & Disposition	Deployed Location	Acquired Date	Budgeted Cost	Amount Approved Previous	**Approval: Cal OES ONLY** Amount This Request	Date & Initials (Prog. REP.): REIMB Request #	Total Approved	Remaining Balance
																			110,583	-	-		-	**110,583**
001	EOC Equipment (EOC-appropriate furnishings to support a 12-15-seat OpArea EOC will be purchased and installed. Work surfaces, chairs, computers, video displays and other support equipment will be identified and acquired for the facility.)	21GN-00-OCEQ 04HW-01-INHW - Hardware, Computer, Integrated 04MD-03-DISP - Display, Video	Equipment and Supplies, Information/Emergency Operations/Fusion Centers	No	HSGP-SHSP	EMG	Other Authorized Equipment	Shareable	Yes	No	EHP / EOC			TBD-Multiple					40,248					40,248
002	Communications Equipment (radios, repeaters, antennae, cavities, cables, switching gear)	06CP-02-BRDG 06CP-01-BASE - Radio, Base, 06CP-01-REPT - Repeater	Equipment, Bridging/Patching/Gateway	Yes	HSGP-SHSP	PSC	Interoperable Communications Equipment	Both	Yes	No	EHP / Aviation or Watercraft			TBD					40,248					40,248
003	Video-Conferencing Equipment (licensing and workstation devices to support desktop and room video-conferencing capabilities)	06CP-05-VCON	Teleconferencing, Video	No	HSGP-SHSP	LE	Information Technology	Shareable	No	No	No Hold Indicated								33,337					33,337
005	Triage Tags for County EMS and Fire Service	09MS-01-TTAG	Tags and Supplies, Triage	No	HSGP-SHSP	EMS-F	Medical	Both	No	Yes	No Hold Indicated			Disaster Management Systems					4,750					4,750

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

ORGANIZATION

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Lake County
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CFDA # 97.067

Today's Date:

LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

											Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
Project Number	Direct/Subaward	Organization	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Certification on File	Detail	Budgeted Cost	Amount Approved Previous	**Amount This Request**	REIMB Request #	Total Approved	Remaining Balance
									-	-	-		-	-
		N/A												

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

TRAINING

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CFDA# 97.067

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Project Number	Direct/Subaward	Course Name	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Feedback Number	Training Activity	Total # Trainee(s)	Identified Host	EHP Approval Date	Part of a Procurement over 150k	Sole Source Involved	Budgeted Cost	Amount Approved Previous	**Approval: Cal OES ONLY** **Amount This Request**	Date & Initials (Prog. REP.): REIMB Request #		Total Approved	Remaining Balance
														-	-	-			-	-
		N/A																		

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

PLANNING

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CFDA # 97.067

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LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

												Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
Project Number	Direct/Subaward	Planning Activity	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Final Product	Part of a Procurement over 150k	Sole Source Involved	Budgeted Cost	Amount Approved Previous	Amount This Request	REIMB Request #	Total Approved	Remaining Balance
										14,250	-	-		-	**14,250**
004	Direct	The OpArea will contract for and conduct Functional Assessments of potential shelter sites throughout the County	HSGP-SHSP	EMG	Develop and Enhance Plans, Protocols and Systems	Consultants	Report & Database with Shelter sites and capabilities	No	No	14,250					**14,250**

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

EXERCISE

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CFDA # 97.067

LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

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															Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
Project Number	Direct/Subaward	Exercise Title	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	EHP Approval Date	Date of Exercise	Exercise Activity	Identified Host	Date of AAR entered into HSEEP	Part of a Procurement over 150k	Sole Source Involved	Budgeted Cost	Amount Approved Previous	**Amount This Request**	REIMB Request #	Total Approved	Remaining Balance
														-	-	-		-	-
		N/A																	

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

PERSONNEL

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CFDA #	97.067

LEDGER TYPE:	Initial Application
Today's Date	October 19,2017

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Project Number	Employee Name	Project/Deliverable	Funding Source	Discipline	Solution Area	Solution Area Sub Category	Dates of Payroll Period	**Approval: Cal OES ONLY** Total Salary & Benefits charged for this Reporting Period	Date & Initials (Prog. REP.): Total Project Hours	REIMB Request #	Total Cost Charged to Grant
							-	-	-	-	-
		N/A									

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

CONSULTANT / CONTRACTOR

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CFDA # 97.067

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2017-0083

LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

										Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
									Billable Hour Breakdown				
Project Number	Consulting Firm & Consultant Name	Project & Description of Services	Deliverable	Solution Area	Solution Area Sub-Category	Expenditure Category	Period of Expenditure	Fee for Deliverable	Total Salary & Benefits charged for this Reporting Period	Hourly/Billing Rate	Total Project Hours	REIMB Request #	Total Cost Charged to Grant
								-	-	-	-	-	**14,250**
004	TBD	The OpArea will contract for and conduct Functional Assessments of potential shelter sites throughout the County	Report & Database with Shelter sites and capabilities	Planning	Develop and Enhance Plans, Protocols and Systems	Consultant/Contractor Fee	10/1/2017-9/30/2018						14,250

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

M&A

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CFDA #	97.067

LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

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2017-0083

									Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
Project Number	Activity	Funding Source	Discipline	Solution Area Sub-Category	Expenditure Category	Detail	Budgeted Cost	Amount Approved Previous	**Amount This Request**	REIMB Request #	Total Approved	Remaining Balance
							6,995	-	-	-	-	**6,995**
006	SHSGP M. & A.	HSGP-SHSP	EMG	Grant Admin	Staff Salaries	Staffing	6,995					6,995

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

INDIRECT COSTS

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LEDGER TYPE:	Initial Application
Today's Date:	October 19, 2017

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								Approval: Cal OES ONLY	Date & Initials (Prog. REP.):		
Project Number	Activity	Funding Source	Solution Area Sub-Category	ICR Base	Rate	Budgeted Cost	Amount Approved Previous	Amount This Request	REIMB Request #	Total Approved	Remaining Balance
						-	-	-	-	-	-
	N/A										

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

INDIRECT COSTS - SUMMARY RECAP OF COSTS CLAIMED

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PERIOD (Month/Yr. through Month/Yr.): **N/A**
INDIRECT COST RATE FOR PERIOD:
ICR Base:

DIRECT COSTS	Total Costs	Less Excluded Contract Costs	Costs Applicable to ICR
Planning			-
Organization			-
Training			-
Exercise			-
M&A			-
Sub-Total Eligible Direct Costs	-	-	-

SUBAWARDS	Total Costs	Less Excluded Contract Costs	Costs Applicable to ICR
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
			-
Sub-Total Eligible Subaward Costs	-	-	-

DIRECT COSTS	Total Costs	Less Excluded Contract Costs	Costs Applicable to ICR
TOTAL APPLICABLE COSTS TO ICR			-
Total Allowable Indirect Costs			-

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

AUTHORIZED AGENT

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CFDA #: 97.067

Lake County
033-00000
2017-0083

Supporting Information for Reimbursement/Advance of State and Federal Funds

This request is for an/a: **Initial Application**

This claim is for costs incurred within the grant expenditure period from _____ (Beginning Expenditure Period Date) **through** _____ (Ending Expenditure Period Date) and does not cross fiscal years.

_____ (REIMB or MOD Request #)

_____ (Amount This Request)

Under Penalty of Perjury I certify that:

I am the duly authorized officer of the claimant herein. This claim is true, correct, and all expenditures were made in accordance with applicable laws, rules, regulations and grant conditions and assurances.

Statement of Certification - Authorized Agent

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729–3730 and 3801–3812). For HSGP: All equipment and training procured under this grant must be in support of the development or maintenance of an identified team or capability.

Brian L. Martin, Sheriff/Coroner/OES Director		October 20, 2017
Printed Name and Title	Signature of Authorized Agent	Date

Please reference the Instructions Page under the "Authorized Agent" section for instructions/address on where to mail workbook

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT

Subrecipient: Lake County	**DUNS #:** 071554760	**FIPS #:** 003-00000
Grant Disaster/Program Title: Homeland Security Grant Program		
Performance Period: 09/01/2017 **to** 05/31/2020	**Subaward Amount Requested:** $ 139,894	
Type of Non-Federal Entity (Check Box)	☐State Gov. ☒Local Gov. ☐JPA ☐Non-Profit ☐Tribe	

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, *grant manager* is the individual who has primary responsibility for day-to-day administration of the grant, *bookkeeper/accounting staff* means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and o*rganization* refers to the subrecipient applying for the award, or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 years
3. How many grants does your organization currently receive?	>10 grants
4. What is the approximate total dollar amount of all grants your organization receive?	$ 950,000
5. Are individual staff members assigned to work on multiple grants?	Yes
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
7. How often does your organization have a financial audit?	Annually
8. Has your organization received any audit findings in the last three years?	No
9. Do you have a written plan on how you charge costs to grants?	Yes
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Sometimes
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	>5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	Yes

Certification: *This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.*

Signature: (Authorized Agent)	**Date:** 10-25-17
Print Name: Brian L. Martin	**Print Title:** Sheriff/Coroner/OES Director

Lake County Sheriff's Office

Office of Emergency Services

2017 State Homeland Security Grant Project Narratives

FIPS-033-00000 **Grant # 2017-0083**

Application Award $139,894

25% Law Enforcement ($34,973.50)

Equipment requested to be funded by this Grant totals $118,943.00 of which $40,248.00 will be used to purchase equipment for Law Enforcement.

Intelligence Analysts Certificates

Lake County does not employ Intelligence Analysts and therefore the certificate requirement is not applicable.

5% M&A Maximum ($6,995.00)

Grant Administration is charged to M&A based on functional time sheet reporting. Although administration costs usually exceed the five percent of the total grant, only $7,061.00 M&A will be charged to the grant.

50% Personnel Maximum Cap ($69,947.00)

The Lake Op Area will not exceed the 50% Personnel Maximum Cap. The only personnel costs will be requested through the 5% M/A as defined in the supplemental application.

Equipment Typing

All equipment purchased through HSGP are identified within the AEL and SEL. The equipment purchased at times when they apply to agencies that have transitioned to FEMA typed equipment, such as fire service and engines, rescues and hazardous materials teams are aligned to ensure continuity of such items when participating locally, regionally and statewide. Recently the County of Lake Public Works has identified typed equipment, therefore when items are purchased with HSGP they are to be items required on such equipment to maintain the typing as defined by FEMA.

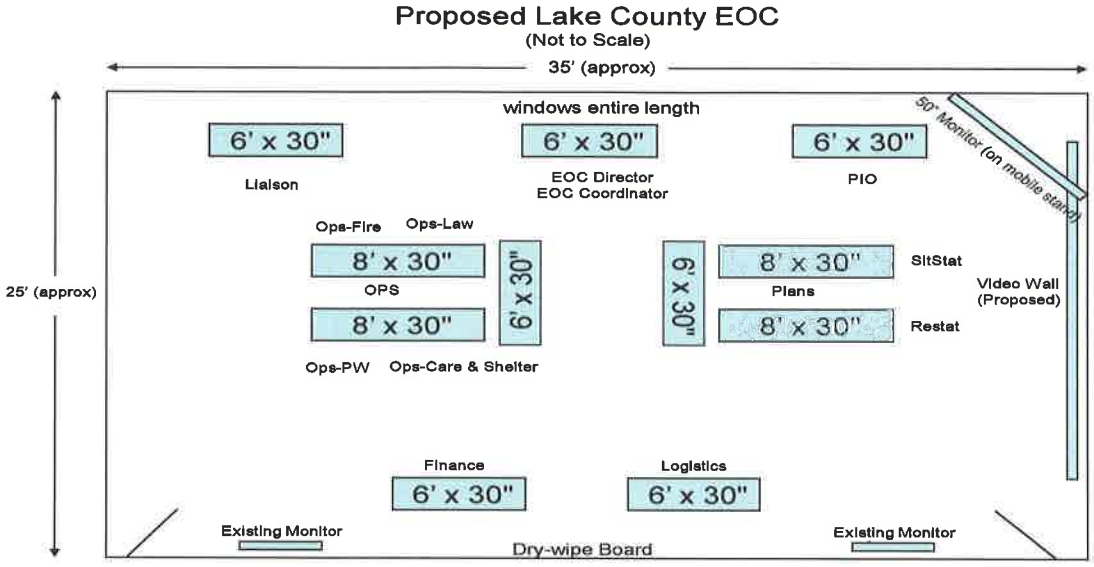
Emergency Operations Plan & Hazard Mitigation Plan

The Lake County Sheriff's Office of Emergency Services is in the process of updating both the County's Emergency Operations Plan and Local Hazard Mitigation Plan. The EOP will be submitted to the Disaster Council for approval at its' November meeting, and forwarded to the Board of Supervisors for adoption and promulgation.

The LHMP will be completed and forwarded to CalOES and FEMA for approval in early 2018. Our current plan's expiration date is March 13, 2018.

Project # 1; Investment Justification #9; Project Title: OpArea EOC Equipment; $ 40,428

The Lake County Sheriff's Office of Emergency Services proposes to create modern, functional Emergency Operations Center for the Lake County Operational Area. Using an existing facility, this project will build upon previous grant purchases (telephone system) to create a multi-disciplinary EOC for the County. Furnishings and equipment to be purchased include flexible, configurable workstations, computers, displays, chairs and video screens.



It is anticipated that the facility will be capable of seating and supporting all primary functions (in accordance with ICS, SEMS, NIMS and the NRF) required to support field operations, or county-wide events. All phone and data connections will be pre-installed to support multiple configurations (training, EOC, testing...) and future expansion within the facility.

Project # 2; Investment Justification #4; Project Title: Enhance County Communications Infrastructure; $ 40,428

The Lake County Sheriff's Office, in conjunction with allied agencies will continue to develop and improve the County-wide communications infrastructure to better support interoperability between local, state and federal responders. The Lake Operational Area has utilized Homeland Security Grant Funds to equip local responders with new technology communications equipment. Portable and mobile radios, as well as other communications devices have been purchased, and will continue to be acquired through this grant.

Additionally, mountain-top radio and repeater sites will be evaluated, upgraded and improved to support field responder safety and interoperability. The Lake County Operational Area has frequently required the assistance of mutual aid partners and other resources to respond to and recover from natural and man-made incidents. This condition will most likely repeat in future years.

We will continue to utilize Homeland Security Grant funds to equip responders with the necessary communications equipment to maintain an effective and efficient coordination locally, regionally and statewide at all times.

Project # 3; Investment Justification #4; Project Title: OpArea Video-conferencing System; $33,403

Using previous year's grant funds, the Lake County Sheriff's Office has begun the implementation of an Operational Area Wide Video-Conferencing System.

The system is being utilized to facilitate information dissemination throughout the County, and reduce expenses related to long-distance travel for meetings.

This project will fund additional sites in Lake County. Proposed sites include the Public Health Department Departmental Operations Center, hospitals and Fire Departments.

Project #4: Investment Justification # 9; Functional Assessment Support Team; $ 14,250

The Lake County Operational Area proposes to solicit qualified vendors to identify, evaluate and recommend facilities for use as shelters that are compliant with the American's with Disability Act (ADA). The vendor will also be tasked with suggesting the necessary changes to a facility that would bring it into compliance with the ADA.

There is currently a significant shortfall in ADA-compliant shelter facilities in Lake County that are able to appropriately house disaster survivors. Additional resources (that are not available in Lake County) are required when shelters are opened in response to evacuations.

Project # 5: Investment Justification #5; Purchase Triage Tags for County EMS & Fire Services; $ 4,750

The Fire Services of Lake County, the County's Emergency Medical Services Agency, and hospitals have initiated a county-wide program to standardize triage practices, tagging and tracking. The County's Fire Services provide all medical transport within Lake County.

A key element of this is training, which is conducted every Tuesday (Triage Tuesdays) by all Fire Services and local hospitals. Patients are triaged, tagged and tracked thought the entire sequence of initial contact, triage, transport, emergency room treatment, and transfer to out of county hospitals.

BOARD OF SUPERVISORS, COUNTY OF LAKE, STATE OF CA.

CALIFORNIA OFFICE OF EMERGENCY SERVICES
HOMELAND SECURITY GRANTS
Governing Body Resolution
Resolution # _____

BE IT RESOLVED BY THE BOARD OF SUPERVISORS OF THE COUNT OF LAKE, that

_____ Brian L. Martin, Sheriff/Coroner,

OR

_____ Carol J. Huchingson, County Administrative Officer,

OR _____ Mary Beth Strong, Sheriff/Coroner Administrative Manager

is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining federal financial assistance provided by the federal Department of Homeland Security and sub-awarded through the State of California.

Passed and approved this 7th day of November, 2017.

_____ Jeff Smith, Chairman, Board of Supervisors

CERTIFICATION

I, Carolyn Purdy, duly appointed Assistant Clerk of the Board of Supervisors of the County of Lake, do herby certify that the above is a true and correct copy of a resolution passed and approved by the Board of Supervisors of the County of Lake on the 7th day of November, 2017.

Assistant Clerk of the Board of Supervisors

_____
Signature

_____
Date

LAKE COUNTY SHERIFF'S OFFICE

1220 Martin Street • P.O. Box 489 • Lakeport, California 95453

Administration	Central Dispatch	Coroner	Corrections	Patrol/Investigations
(707) 262-4200	(707) 263-2690	(707) 262-4215	(707) 262-4240	(707) 262-4200

Brian L. Martin
Sheriff/Coroner

Addendum to the GBR
Authorized Agents

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