



Illinois Emergency Management Agency
and Office of Homeland Security

FFY 2023 Emergency Operations Center Grant Program Application User Guide

The FFY 2023 Emergency Operations Center Grant Program application is a cloud-based form within the AmpliFund grant management system. The application can be accessed from this link:

<https://il.amplifund.com/Public/Opportunities/Details/74f9def0-4b34-4829-99d9-f652030a2b4c>

GATA

The Grant Accountability and Transparency Act (GATA), 30 ILCS 708/1 et seq., increases accountability and transparency in the use of grant funds while reducing the administrative burden on both state agencies and grantees through adoption of the federal grant guidance and regulations codified at 2 CFR Part 200 (Uniform Requirements). IEMA-OHS has adopted the uniform data field requirements on grant applications to comply with GATA.

In addition to the IEMA program guidance and application form, sub-award recipients also need to comply with GATA requirements for grant eligibility. More information regarding GATA can be found at <http://www.illinois.gov/sites/gata>.

Accessing the Application

Internet access and an AmpliFund logon are needed to submit your completed grant application.

Contact Nichole.Strayer@illinois.gov with any technical questions. Use the following steps to access the application.

1. The FFY 2023 Emergency Operations Center Application is located here: Click <https://il.amplifund.com/Public/Opportunities/Details/74f9def0-4b34-4829-99d9-f652030a2b4c> to open the grant application in your Internet browser.
2. Review 'Opportunity Information'. Click '**Apply**' to begin the application

FY23 Emergency Operations Center (EOC)

[Print](#)[Help](#)[Download](#)[Save](#)[Apply](#)

Opportunity Information

CSFA Number 588-40-0453

CSFA Popular Name EOC Grant Program

Title FY23 Emergency Operations Center (EOC)

Description The fiscal year (FY) 2023 Emergency Operations Center (EOC) Grant Program is intended to improve emergency management and preparedness capabilities by supporting flexible, sustainable, secure, strategically located, and fully interoperable EOCs with a focus on addressing identified deficiencies and needs. Fully capable emergency operations facilities at the state and local levels are an essential element of a comprehensive national emergency management system and are necessary to ensure continuity of operations and continuity of government in major disasters or emergencies caused by any hazard. Among the five basic homeland security missions noted in the DHS Strategic Plan, the EOC Grant Program supports the goal to Strengthen National Preparedness and Resilience. The 2022-2026 FEMA Strategic Plan outlines three bold, ambitious goals in order to position FEMA to address the increasing range and complexity of disasters, support the diversity of communities we serve, and complement the nation's growing expectations of the emergency management community. The EOC Grant Program supports Goal 3: Promote and Sustain a Ready FEMA and a Prepared Nation. The FY 2023 EOC Grant Program will provide \$89,140,285 for equipping, upgrading or constructing the EOC projects included in Appendix A of this funding notice. Per the National Fire Protection Association, an EOC is defined as a "facility or capability from which direction and control is exercised in an emergency. This type of center or capability is designated to ensure that the capacity exists for leadership to direct and control operations from a centralized facility or capability in the event of an emergency." "Construction," as defined in this program, refers to building a new facility or any changes to the footprint of an existing facility, while "upgrading" refers only to internal improvements to an existing facility.

Awarding Agency Name Illinois Emergency Mgt Agency- Office of Homeland Security

Agency Contact Name Bob Evans

Agency Contact Phone 217/557-4788

Agency Contact Email Bob.P.Evans@illinois.gov

Fund Activity Categories Disaster Prevention and Relief

Completing the Application

3. Complete the 'Project Information' page when done click '**Mark as complete**' and then the '**Save & Continue**' buttons at bottom of page.

Project Information

Application Information

Application Name* ✓

Pre-Qualification Status Not Qualified

How much are you requesting from the funder?

Award Requested*

How much are you planning to contribute to the budget?

Cash Match Requirement \$250,000.00 ⓘ

Cash Match Contributions*

In-Kind Match Requirement \$0.00 ⓘ

In-Kind Match Contributions*

Other Funding Requirement \$0.00 ⓘ

Other Funding Contributions*

Total Award Budget \$1,333,333.00

Primary Contact Information

Name*

Email Address*

Address Line 1*

Address Line 2

City*

State/Province*

Postal Code*

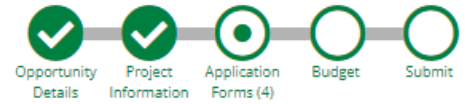
Phone Number

Save

✓ Mark as Complete

Save & Continue

4. Forms- 4 forms are contained on this page each must be completed.



Forms

Name	Status
Uniform Grant Application - Applicant Completed Section	New
Narrative	New
Project Outcomes and Milestones	New
FFATA	New

 25 items per page

[Save & Continue](#)

- Click on Uniform Grant Application (**NOTE:** you will need the jurisdictions GATA ID number found in the GATA Grantee Portal.)

Uniform Grant Application - Applicant Completed Section

1 of 4

Applicant Information

Legal Name (Name used for UEI registration and grantee pre-qualification) *

City of Rockford

Common Name (DBA)

Employer/Taxpayer Identification Number (EIN,TIN) *

366006082

Organizational Unique Entity Identifier (UEI) *

MPDSB2MNNM19

GATA ID (assigned through the grantee portal) *

687786

SAM Cage Code *

5JF09

Applicant's Organizational Unit

Department Name *

Rockford FD

Division Name

Operations

Applicant's Name and Contact Information for Person to be Contacted for Program Matters involving this Application

First Name *

Last Name *

Suffix

Title *

Organizational Affiliation *

Telephone Number *

Fax Number

Email Address *

Applicant's Name and Contact Information for Person to be Contacted for Business/Administrative Office Matters involving this Application (Legal Authorized Signature)

First Name *

Last Name *

Suffix

Title *

Organizational Affiliation *

Telephone Number *

Fax Number

Email Address *

Areas Affected

Are areas affected by the project? *

Yes

No

(NOTE: For the Applicant's Name and Contact Information for Person to be Contacted for Business/Administrative Office Matters involving this Application we need you to list who has **signing authority** for your organization.)

The project is 23EOCROCKF (Project start date is 06/01/2023 end date is 05/31/2026.) Mark the **I agree box** under Application certification. When done click 'Mark as complete' and then the 'Save & Continue' buttons at bottom of page.

Applicant's Project

Description Title of Applicant's Project

23EOCROCKF

Proposed Project Term Start Date

6/1/2023



Proposed Project Term End Date

5/31/2026



Applicant Certification

By signing this application, I certify (1) to the statements contained in and I agree to comply with any resulting terms if I accept an award. I am aware that

(*)The list of certification and assurances, or an internet site where you can find these certifications as an addendum to the application.

Applicant Certification *

I agree

When you're finished answering the questions on this page, click the [Save](#) button.
Not finished with this page yet? Click [Save](#) or [Save & Continue to Next Page](#)

Save

✓ Mark as Complete

Save & Continue

- b. Narrative: Type in the program narrative. When done click 'Mark as complete' and then the 'Save & Continue' buttons at bottom of page.

Narrative

2 of 4

Program Narrative: Please provide a brief description and time line of the proposed project that summarizes the use of the grant award.

Program Narrative *

Formats ▾ **B** *I* [List Icons] [Link Icon] [Image Icon] [Code Icon]

A facility assessment has been conducted annually by members of the Rockford Fire Department Command Staff, and included input from the senior leadership of other City Departments who routinely operate in EOC activations or participate in regular FSEs. It has long been known that the current EOC is less than ideal. In fact, there is not a stand-alone EOC for the City of Rockford, but rather a classroom housed at Rockford Fire Department Headquarters which can be converted to a make shift EOC.

The transformation from classroom to EOC is not a quick operation. It involves reorganizing and bringing in additional furniture, and the extensive use of extension cords, ethernet cords, splitters, adapters, etc. This is not only inefficient, but creates numerous trip hazards. Simply put, there is not enough power and IT infrastructure to adequately support EOC operations.

As there are no dedicated workstations for EOC staff, we rely on the use of laptops, which are stored in a mobile cart. This can lead

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When you're finished answering the questions on this page, click [Mark as Complete](#). An application cannot be submitted until all pages are marked as complete. Not finished with this page yet? Click [Save](#) or [Save & Continue](#) to fill out the missing information at a later time.

- c. Project Outcomes and Milestones: This is where you will list your 3 to 4 outcomes and the milestones.

Project Outcomes and Milestones

[Download](#) [Save](#) [Save & Continue](#)

3 of 4

Please enter the Outcome and Milestone information in the spaces provided.

Outcome 1 Name and Description

Formats ▾ **B** *I* [List Icons] [Link Icon] [Image Icon] [Code Icon]

Issue Request for Bids for generator instalmant

p

Outcome 1 - Milestone 1 Description

5

Outcome 1 - Milestone 1 Expected Completion Date

[Date Picker]

Outcome 1 - Milestone 2 Description

Outcome 1 - Milestone 2 Expected Completion Date

[Date Picker]

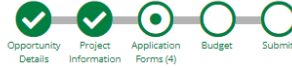
Outcome 1 - Milestone 3 Description

Outcome 1 - Milestone 3 Expected Completion Date

[Date Picker]

Outcome 2 Name and Description

- d. FFATA: You will have a YES or NO question. If NO; click 'Mark as complete' and then the 'Save & Continue' buttons at bottom of page. If YES; another YES or NO question will appear. When done click 'Mark as complete' and then the 'Save & Continue' buttons at bottom of page.



FFATA
4 of 4

[Download](#) [Save](#) [Save & Continue](#)

The "Federal Funding Accountability and Transparency Act (FFATA) was signed on September 26, 2006. The intent is to empower every American with the ability to hold the government accountable for each spending decision. The end result is to reduce wasteful spending in the government. The FFATA legislation requires information on federal awards (federal financial assistance and expenditures) be made available to the public via a single, searchable website, which is www.USASpending.gov

Q1. In your business or organization's previous fiscal year, did your business organization (including parent organization, all branches and affiliates worldwide) receive (1) 80% or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements and (2) \$25,000,000 or more in annual gross revenue from U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements? *

Yes
 No

When you're finished answering the questions on this page, click [Mark as Complete](#). An application cannot be submitted until all pages are marked as complete.

Not finished with this page yet? Click [Save](#) or [Save & Continue](#) to fill out the missing information at a later time.

[Save](#) [✓ Mark as Complete](#) [Save & Continue](#)

5. Budget: The Grant Funding and Non-Grant Funding amount are auto populated from the 'Project Information' page. Only the Categories listed are allowed.

Proposed Budget

Expense Budget

Category	Grant Funded	Non-Grant Funded	Total Budgeted
+ 4. Equipment (2 CFR 200.439)	\$0.00	\$0.00	\$0.00
+ 6. Contractual Services & Subawards (2 CFR 200.318 & 200.92)	\$0.00	\$0.00	\$0.00
+ 8. Construction	\$0.00	\$0.00	\$0.00
+ Indirect Cost (2 CFR 200.414)	\$0.00	\$0.00	\$0.00
Total Expense Budget Cost	\$0.00	\$0.00	\$0.00

Revenue Budget

Grant Funding		
Award Requested	\$1,000,000.00	\$1,000,000.00
Subtotal	\$1,000,000.00	\$1,000,000.00
Non-Grant Funding		
Cash Match	\$333,333.00	\$333,333.00
In-Kind Match	\$0.00	\$0.00
Other Funding	\$0.00	\$0.00
Subtotal	\$333,333.00	\$333,333.00
Total Revenue Budget Cost	(\$1,333,333.00)	
Total Overall Budget Cost	(\$1,333,333.00)	

[✓ Mark as Complete](#) [Save & Continue](#)

Click the **green '+'** on the category to enter details of an expense item. Enter Grant Funded for the 'Expense Budget' items. The 'total Overall Budget Cost' must be **\$0.00** after entering all the proposed budget details.

- a. When entering the amount, you will want to use the total amount. Select create when finished. (Please us narrative section on each category to add details see equipment below.)

New Line Item

Budget Item Information

Category **4. Equipment (2 CFR 200.439)**

Equipment is defined as an article of tangible personal property that has a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. An applicant organization may classify equipment at a lower dollar value but cannot classify it higher than \$5,000. (Note: Organization's own capitalization policy for classification of equipment can be used). Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the Contractual Services category.

Item Type Non-Personnel

Name*

Cost Rate*

Quantity*

Direct Cost \$48,000.00

Non-Grant Funded **Yes**

Grant Funded \$36,000.00

Cash Match

In-Kind Match

Other Funding

Total Budgeted \$48,000.00

Narrative Provide justification for the use of each item and relate them to specific program objectives. Provide both the annual (for multiyear awards) and total for equipment.

Create Cancel

Budget Item Information

Category

6. Contractual Services & Subawards (2 CFR 200.318 & 200.92) ▼

Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole contracts in excess of \$150,000 (See 2 CFR 200.88). NOTE : this budget category may include subawards. Provide separate budgets for each subaward or contract, regardless of the dollar value and indicate the basis for the cost estimates in the narrative. Describe products or services to be obtained and indicate the applicability or necessity of each to the project. Please also note the differences between subaward, contract, and contractor (vendor): 1) Subaward (200.92) means an award provided by a pass-through entity to a sub-recipient for the sub-recipient to carry out part of a Federal/State award, including a portion of the scope of work or objectives. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal/State program. 2) Contract (200.22) means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward. 3) "Vendor" or "Contractor" is generally a dealer, distributor or other seller that provides supplies, expendable materials, or data processing services in support of the project activities.

Item Type Non-Personnel

Name* Architect/Engineering

Direct Cost* \$195,000.00

Non-Grant Funded Yes ▼

Grant Funded \$146,250.00

Cash Match \$48,750.00

In-Kind Match \$0.00

Other Funding \$0.00

Total Budgeted \$195,000.00

Save

Cancel

ICR

Budget Item Information

Category **Indirect Cost (2 CFR 200.414)** 

The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s).


Item Type Non-Personnel

Name*

Base*

Rate*

Direct Cost \$1,000.00

Non-Grant Funded **No** 

Total Budgeted \$1,000.00

Narrative After the amount of indirect costs is determined for the program, a breakdown of the indirect costs should be provided in the budget worksheet and narrative below.

Attachment(s) Provide the most recent indirect cost rate agreement information with the itemized budget.

Save Cancel

The Budget is complete when the 'total Overall Budget Cost' is **\$0.00** and the expense details match the grant funded amount auto populated from the project information page. When done click 'Mark as complete' and then the 'Save & Continue' buttons at bottom of page.

Proposed Budget

Expense Budget

Category	Grant Funded	Non-Grant Funded	Total Budgeted
+ 4. Equipment (2 CFR 200.439)	\$56,950.00	\$0.00	\$56,950.00
Desktop Computers 04HW-01-DTOP	\$6,250.00	\$0.00	\$6,250.00
Projectors 04MD-02-PROJ	\$1,700.00	\$0.00	\$1,700.00
Video Conferencing 06CP-05-VCNB	\$3,000.00	\$0.00	\$3,000.00
Monitors 04MD-03-DISP	\$10,000.00	\$0.00	\$10,000.00
Printer/Plotter 04HW-02-ALL1/04HW-02-PLOT	\$5,000.00	\$0.00	\$5,000.00
Laptop Computers 04HW-01-NTBK	\$31,000.00	\$0.00	\$31,000.00
+ 6. Contractual Services & Subawards (2 CFR 200.318 & 200.92)	\$146,250.00	\$48,750.00	\$195,000.00
Architect/Engineering	\$146,250.00	\$48,750.00	\$195,000.00
+ 8. Construction	\$745,037.25	\$248,345.75	\$993,383.00
Smith Demolition	\$106,275.00	\$35,425.00	\$141,700.00
Bob Framing	\$165,750.00	\$55,250.00	\$221,000.00
bobs painting	\$243,750.00	\$81,250.00	\$325,000.00
System Rough Ins	\$147,137.25	\$49,045.75	\$196,183.00
Fixtures	\$73,125.00	\$24,375.00	\$97,500.00
IT infrastructure	\$9,000.00	\$3,000.00	\$12,000.00
+ Indirect Cost (2 CFR 200.414)	\$51,762.75	\$36,237.25	\$88,000.00
Furniture	\$51,762.75	\$36,237.25	\$88,000.00
Total Expense Budget Cost	\$1,000,000.00	\$333,333.00	\$1,333,333.00

Revenue Budget

Grant Funding		
Award Requested	\$1,000,000.00	\$1,000,000.00
Subtotal	\$1,000,000.00	\$1,000,000.00
Non-Grant Funding		
Cash Match	\$333,333.00	\$333,333.00
In-Kind Match	\$0.00	\$0.00
Other Funding	\$0.00	\$0.00
Subtotal	\$333,333.00	\$333,333.00

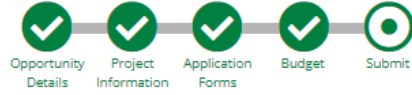
Total Revenue Budget Cost (\$1,333,333.00)

Total Overall Budget Cost \$0.00

✓ Mark as Complete

Save & Continue

6. If all the circles at the top are Green with white checks, you have completed all the sections of the application. You are ready to submit.



You are about to submit your application, **Wauconda Fire Protection District**, to **Emergency Management Agency**.

Take the time to review your application by using the timeline above. You can select any section and jump to that page.

When the application is fully complete, please select the "Submit" button. This will submit your final application to the funder.



7. You can now download a copy of your finished application if you would like.

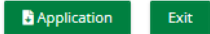


Success!

You have submitted your application.

Download your completed application by selecting the "Application" button below.

To return to the main screen with all of your applications, select the "Exit" button.



Congrats you are done!!!!