

**EMERGENCY MANAGEMENT COORDINATOR**  
A Division of the Comal County Judge's Office  
Sherman Krause, County Judge

January 21<sup>st</sup>, 2015

**TO:** Texas Division of Emergency Management  
**RE:** 2016 EMPG Application

Please find attached the 2016 EMPG application for Comal County. If anything else is required please let me know.

Thank You

Jeff Kelley  
Emergency Management Coordinator  
Comal County  
[kellej@co.comal.tx.us](mailto:kellej@co.comal.tx.us)  
830-221-1108



**FISCAL YEAR 2016  
EMPG STATEMENT OF WORK & CUMULATIVE PROGRESS REPORT**

Applicant Name (Jurisdiction):

Jurisdiction DUN/SAM #  Congressional District #

SAM Status  Population

2014 census data available at: <http://quickfacts.census.gov/qfd/states/48000.html>

| KEY DOCUMENT SUBMISSIONS AND APPROVALS |                                |           |               |      |
|--|--------------------------------|-----------|---------------|------|
| Document                               | Submitter                      | Date      | TDEM Reviewer | Date |
| Statement of Work                      | Jeff Kelley <i>[Signature]</i> | 1/21/2016 |               |      |
| Progress Report #1                     |                                |           |               |      |
| Progress Report #2                     |                                |           |               |      |

| TASK 1—WORK PLAN & SEMIANNUAL PROGRESS REPORT |  |
|---|--|
| <input checked="" type="checkbox"/> Work Plan | Jurisdiction will submit an EMPG Application, two Progress Reports, four Quarterly FEMA Training matrices, and four Quarterly Financial Reports  |
| <input type="checkbox"/> Progress Report #1   | <input type="checkbox"/> Progress Report #1 is being submitted to TDEM OMB<br><input type="checkbox"/> First Financial Report has been submitted to TDEM OMB   |
| <input type="checkbox"/> Progress Report #2   | <input type="checkbox"/> Progress Report #2 is being submitted to the TDEM OMB<br><input type="checkbox"/> Second & Third Quarter Financial Reports have been submitted to TDEM OMB<br><input type="checkbox"/> Fourth Quarter Financial Report has been submitted to TDEM OMB |

| TASK 2—LEGAL AUTHORITIES FOR EMERGENCY MANAGEMENT PROGRAM            |   |
|--|---|
| <input checked="" type="checkbox"/> Work Plan                        | Jurisdiction will maintain current legal documents establishing emergency management program<br><input checked="" type="checkbox"/> TRRN registration completed and resources entered<br><input checked="" type="checkbox"/> Legal documents are current & on file with TDEM; no additional action is required<br><input type="checkbox"/> Jurisdiction will prepare or update & submit to TDEM:<br><input type="checkbox"/> Commissioner's Court Order #<br><input type="checkbox"/> City Ordinance(s) for:<br><input type="checkbox"/> Updated Joint Resolution dated:<br><input type="checkbox"/> NIMS Adoption dated: |
| <input type="checkbox"/> Progress Report #1<br>October 1 – March 31  | <input type="checkbox"/> TRRN registration completed and resources entered<br><input type="checkbox"/> Legal documents are current & on file with TDEM, no additional action is required<br><input type="checkbox"/> Jurisdiction completed & submitted to TDEM:<br><input type="checkbox"/> Commissioner's Court Order #<br><input type="checkbox"/> City Ordinance(s) for:<br><input type="checkbox"/> Updated Joint Resolution dated:<br><input type="checkbox"/> NIMS Adoption dated:   |
| <input type="checkbox"/> Progress Report #2<br>April 1- September 30 | <input type="checkbox"/> TRRN registration completed and resources entered<br><input type="checkbox"/> Legal documents are current & on file with TDEM, no additional action is required<br><input type="checkbox"/> Jurisdiction completed & submitted to TDEM:<br><input type="checkbox"/> Commissioner's Court Order #<br><input type="checkbox"/> City Ordinance(s) for:<br><input type="checkbox"/> Updated Joint Resolution dated:<br><input type="checkbox"/> NIMS Adoption dated:   |

| TASK 3—PUBLIC EDUCATION/INFORMATION  |  |
|--|--|
| <input checked="" type="checkbox"/> Work Plan                                | <input checked="" type="checkbox"/> Option 1: Jurisdiction will conduct 30 hours of hazard awareness activities for local citizens<br><input type="checkbox"/> Option 2: Jurisdiction will prepare & distribute public education/information materials to a <u>substantial portion</u> of the community. <b>Please describe the materials to be distributed in the remarks section found on page 6.</b><br><p style="text-align: center;"><b>**Jurisdictions may present a combination of both options</b></p> |
| <input type="checkbox"/> Progress Report #1<br><br>October 1 –<br>March 31   | <input type="checkbox"/> Jurisdiction completed the following hazard awareness and/or public education/information activities:<br><br><input type="checkbox"/> <b>No Task 3 progress was made this report period.</b>  |
| <input type="checkbox"/> Progress Report #2<br><br>April 1 –<br>September 30 | <input type="checkbox"/> Jurisdiction completed the following hazard awareness and/or public education/information activities:<br><br><input type="checkbox"/> <b>No Task 3 progress was made this report period.</b>  |

| TASK 4—EMERGENCY MANAGEMENT PLANNING DOCUMENTS                               |  |
|--|--|
| <input checked="" type="checkbox"/> Work Plan                                | <input checked="" type="checkbox"/> Jurisdiction reviewed emergency management plan & annexes for currency and NIMS compliance<br><input checked="" type="checkbox"/> Emergency management plan and all annexes are current and NIMS compliant<br><input type="checkbox"/> Jurisdiction will develop, update, or change these planning documents:<br><input type="checkbox"/> Basic Plan<br>Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M<br><input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V<br><input type="checkbox"/> Other documents:<br><br><b>NOTE: Plans &amp; annexes dated prior to September 30, 2010 must be revised or updated this year. All Plans and Annexes must be NIMS compliant.</b> |
| <input type="checkbox"/> Progress Report #1<br><br>October 1 –<br>March 31   | <input type="checkbox"/> Jurisdiction reviewed our emergency management plan & annexes for currency and NIMS compliance<br><input type="checkbox"/> Emergency management plan and all annexes are current and NIMS compliant<br><input type="checkbox"/> Jurisdiction updated by revision or change the following planning documents:<br><input type="checkbox"/> Basic Plan<br>Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M<br><input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V<br><input type="checkbox"/> Other documents:<br><input type="checkbox"/> <b>No Task 4 progress was made this report period.</b>  |
| <input type="checkbox"/> Progress Report #2<br><br>April 1 –<br>September 30 | <input type="checkbox"/> Jurisdiction reviewed our emergency management plan & annexes for currency and NIMS compliance<br><input type="checkbox"/> Emergency management plan and all annexes are current and NIMS compliant<br><input type="checkbox"/> Jurisdiction updated by revision or change the following planning documents:<br><input type="checkbox"/> Basic Plan<br>Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M<br><input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V<br><input type="checkbox"/> Other documents:<br><input type="checkbox"/> <b>No Task 4 progress was made this report period.</b>  |

**TASK 5—TEP, NOTIFICATION AND INDIVIDUAL EXERCISE PARTICIPATION**

|   |  |
|---|--|
| <input checked="" type="checkbox"/> Work Plan<br><input checked="" type="checkbox"/> TEP<br>Date Submitted:<br>04/08/2015 | <p><b>Training and Exercise Plan</b></p> <p>Each jurisdiction must develop and submit a multi-year Training and Exercise Plan (TEP), not less than three years, to <a href="mailto:TDEM.EMPG@dps.texas.gov">TDEM.EMPG@dps.texas.gov</a> by January 31, 2016.</p> <p>Each jurisdiction must submit the Pre-Exercise Notification Form to the TDEM Exercise Unit not less than <b>45</b> days prior to a planned exercise event.</p> <p>Each jurisdiction must submit an After Action Report (AAR) and Improvement Plan (IP) for a minimum of two (2) discussion-based exercises and one (1) operations-based exercise. All AARs/IPs all exercise activities to the TDEM Exercise unit not more than <b>45</b> days after the conclusion of the exercise.</p> <p>One real world event is currently allowed per fiscal year.</p> <p><b>NOTE:</b> A Full-Scale exercise must be conducted every three (3) years.</p> <p><b>**Each EMPG-funded person must complete and submit Individual Exercise Participation forms. All EMPG funded personnel must participate in at least three exercises per year.</b></p> <p><b>***Please include any additional information on page 6 of this form.</b></p> |
|---|--|

**REQUIRED EXERCISE SCHEDULE**

| Performance Period   | Exercise Type    | Exercise Date & Name<br>(List All) | Quarter of Year  |
|--|------------------|------------------------------------|--|
| Fiscal Year 2016<br>(October 1, 2015 - September 30, 2016)       | Full Scale       | Comal County SNS POD               | <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
|  | Real World Event | October Flash Flood                | <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
|  | Discussion Based | Comal May X                        | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 |
|  | Exercise 4       |                                    | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4            |
|  | Exercise 5       |                                    | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4            |
| Our last Full-Scale exercise was conducted on (date): 10-02-2015 |                  |                                    |  |

|  |  |                               |                    |
|--|--|-------------------------------|--------------------|
| <input type="checkbox"/> Progress Report #1<br>October 1 – March 31<br><input type="checkbox"/> TEP<br>Date Submitted:   | <b>Conducted the following exercises and provided documentation to TDEM:</b> |                               |                    |
|  | <b>Exercise Type</b>   | <b>Exercise Date and Name</b> | <b>EMPG Funded</b> |
|  | Exercise 1   |                               | Exercise 1         |
|  | Exercise 2   |                               | Exercise 2         |
|  | Exercise 3   |                               | Exercise 3         |
| <input type="checkbox"/> Our jurisdiction completed NO exercise and did not request credit for a real world event<br><input type="checkbox"/> Exercise approved documentation attached |  |                               |                    |

|  |  |                               |                    |
|--|--|-------------------------------|--------------------|
| <input type="checkbox"/> Progress Report #2<br>April 1 – September 30<br><input type="checkbox"/> TEP<br>Date Submitted:   | <b>Conducted the following exercises and provided documentation to TDEM:</b> |                               |                    |
|  | <b>Exercise Type</b>   | <b>Exercise Date and Name</b> | <b>EMPG Funded</b> |
|  | Exercise 1   |                               | Exercise 1         |
|  | Exercise 2   |                               | Exercise 2         |
|  | Exercise 3   |                               | Exercise 3         |
| <input type="checkbox"/> Jurisdiction completed NO exercise and did not request credit for a real world event<br><input type="checkbox"/> Exercise approved documentation attached |  |                               |                    |

**TASK 6—TRAINING FOR EMERGENCY MANAGEMENT PERSONNEL**

|  |  |                                     |                       |
|--|--|-------------------------------------|-----------------------|
|  | <b>All EMPG funded emergency management personnel will participate in the following training during FY 2016:</b> |                                     |                       |
|  | <b>Position &amp; Name</b>   | <b>Course Name or Number</b>        |                       |
| <input checked="" type="checkbox"/> Work Plan                                | EMC Jeff Kelley  | L-954 Safety Officer                |                       |
|  | EMC Jeff Kelley  | IS-907 Active Shooter               |                       |
|  | PH Dir. Gwen Mills   | IS-200 HCa Applying ICS Health Care |                       |
|  | PH Dir. Gwen Mills   | IS-288a The Role of Voluntary       |                       |
|  | PIO Paul Anthony   | IS-120a Intro Exercises             |                       |
|  | PIO Paul Anthony   | IS-242b Effective Communication     |                       |
|  | <b>Emergency management personnel completed the following training and documentation is attached:</b>            |                                     |                       |
|  | <b>Position &amp; Name</b>   | <b>Course Name or Number</b>        | <b>Date Completed</b> |
| <input type="checkbox"/> Progress Report #1<br><br>October 1 –<br>March 31   |  |                                     |                       |
|  |  |                                     |                       |
| <input type="checkbox"/> No training took place this report period.          |  |                                     |                       |
|  | <b>Emergency management personnel completed the following training and documentation is attached:</b>            |                                     |                       |
|  | <b>Position &amp; Name</b>   | <b>Course Name or Number</b>        | <b>Date Completed</b> |
| <input type="checkbox"/> Progress Report #2<br><br>April 1 –<br>September 30 |  |                                     |                       |
|  |  |                                     |                       |
| <input type="checkbox"/> No training took place this progress report period. |  |                                     |                       |

| <b>TASK 7—EMERGENCY MANAGEMENT TRAINING FOR OTHER PERSONNEL</b>   |  |                     |                          |                  |
|---|--|---------------------|--------------------------|------------------|
| <input checked="" type="checkbox"/> Work Plan   | Jurisdiction will conduct or arrange emergency management related training for elected officials, other local officials, & support agencies. |                     |                          |                  |
| <input type="checkbox"/> Progress Report #1<br>October 1 – March 31<br><br><input type="checkbox"/> No training took place this progress report period.   | <b>The following formal training courses were taught or contracted:</b>  |                     |                          |                  |
|   | <b>Date</b>  | <b>Course Title</b> | <b>Class Description</b> | <b># Trained</b> |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
| <input type="checkbox"/> Progress Report #2<br>April 1 – September 30<br><br><input type="checkbox"/> No training took place this progress report period. | <b>The following formal training courses were taught or contracted:</b>  |                     |                          |                  |
|   | <b>Date</b>  | <b>Course Title</b> | <b>Class Description</b> | <b># Trained</b> |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |
|   |  |                     |                          |                  |

| <b>TASK 8—EMERGENCY MANAGEMENT ORGANIZATIONAL DEVELOPMENT</b>   |  |
|---|--|
| <input checked="" type="checkbox"/> Work Plan   | Jurisdiction will participate in the following emergency management organizational development activities:<br><br>Attend meetings of the AACOG REPAC, CC LEPC, SCEMA, Damage Prevention Council, CC ESA (Comal County Emergency Services Association), HSR R-8 CRI Meetings. as well as the Texas Emergency Management Conference. |
| <input type="checkbox"/> Progress Report #1<br>1 October - March 31<br><br><input type="checkbox"/> No progress this reporting period   | Jurisdiction completed the following staff development activities:   |
| <input type="checkbox"/> Progress Report #2<br>April 1 - September 30<br><br><input type="checkbox"/> No progress this reporting period | Jurisdiction completed the following staff development activities:   |

**REMARKS**  
(Use an Additional Sheet if Necessary)

**JURISDICTION NAME:**

DRAFT

**FISCAL YEAR 2016  
DESIGNATION OF EMPG GRANT OFFICIALS**

**APPLICANT NAME (JURISDICTION):** Comal County

| <b>EMERGENCY MANAGEMENT COORDINATOR*</b>                  |  |
|---|--|
| <b>NAME</b>   | <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Jeffrey P Kelley<br>*If newly appointed, attach form TDEM-147 |
| Official Mailing Address<br>Please include mail stop code | 150 N Seguin<br>New Braunfels Texas 78130  |
| Daytime Phone Number                                      | ( 830 ) 221-1108      Alternate Number (      )  |
| Fax Number  | ( 830 ) 608-2026   |
| E-mail Address  | kellej@co.comal.tx.us  |

| <b>POINT OF CONTACT (RESPONSIBLE FOR APPLICATION)</b>      |   |
|--|---|
| <b>NAME</b>  | <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Jeffrey P Kelley |
| Title  | EMC   |
| Official Mailing Address<br>Please include mail stop code. | 150 N Seguin<br>New Braunfels Texas 78130   |
| Daytime Phone Number                                       | ( 830 ) 221-1108      Alternate Number (      )                                       |
| Fax Number   | ( 830 ) 608-2026  |
| E-mail Address   | kellej@co.comal.tx.us   |

| <b>GRANT FINANCIAL OFFICER (CANNOT BE THE SAME AS EMC)</b> |   |
|--|---|
| <b>NAME</b>  | <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. David Renken |
| Title  | County Auditor  |
| Official Mailing Address<br>Please include mail stop code. | 150 N Seguin<br>New Braunfels Texas 78130<br>Suite 201                            |
| Daytime Phone Number                                       | ( 830 ) 221-1206  |
| Fax Number   | ( 830 ) 620-5592  |
| E-mail Address   | browna@co.comal.tx.us   |

| <b>AUTHORIZED OFFICIAL (MAYOR, COUNTY JUDGE, CITY MANAGER)</b> |   |
|--|---|
| <b>NAME</b>  | <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Sherman Krause |
| Title  | Count Judge   |
| Official Mailing Address<br>Please include mail stop code.     | 150 N Seguin<br>New Braunfels Texas 78130   |
| Daytime Phone Number   | ( 830 ) 221-1100  |
| Fax Number   | ( 830 ) 620-2026  |
| E-mail Address   | krause@co.comal.tx.us   |

**FISCAL YEAR 2016  
EMPG STAFFING PATTERN**

| 1. APPLICANT NAME (as is appears on EMPG application)   |  |  |  | 2. COUNTY                     |                                 |                                       |                               |  |                               |
|---|--|--|--|-------------------------------|---------------------------------|---------------------------------------|-------------------------------|--|-------------------------------|
| <b>3. FULL-TIME EMPLOYEES</b><br><i>(including those who work all or only a portion of their time in emergency management duties)</i> |  |  |  | <b>4. Gross Annual Salary</b> | <b>5. Gross Annual Benefits</b> | <b>6. Gross Salary &amp; Benefits</b> | <b>7. % Work in EM Duties</b> | <b>8. Salary &amp; Benefits for EM (6x7)</b> | <b>9. Est EM Travel Costs</b> |
| Name: Jeffrey Kelly   |  |  |  | 66,550.00                     | 21,479.00                       | 88,029.00                             | 100%                          | 88,029.00                                    | 4,300.00                      |
| Position: EMC   |  |  |  |                               |                                 |                                       |                               |  |                               |
| Name: Gwen Mills  |  |  |  | 84,652.00                     | 24,758.00                       | 109,410.00                            | 25%                           | 27,352.50                                    | 0.00                          |
| Position: Public Health Director  |  |  |  |                               |                                 |                                       |                               |  |                               |
| Name: Paul Anthony  |  |  |  | 61,800.00                     | 20,288.00                       | 82,088.00                             | 10%                           | 8,208.80                                     | 0.00                          |
| Position: Public Information Officer  |  |  |  |                               |                                 |                                       |                               |  |                               |
| Name:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| Position:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| Name:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| Position:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| Name:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| Position:   |  |  |  |                               |                                 | 0.00                                  |                               | 0.00   |                               |
| <b>A. SUBTOTAL:</b>   |  |  |  |                               |                                 |                                       |                               | 123,590.30                                   | 4,300.00                      |

| 10. PART-TIME EMPLOYEES |  | 11. % of Full Time | 12. Gross Annual Salary | 13. Gross Annual Benefits | 14. Gross Salary & Benefits | 15. % Work in EM Duties | 16. Salary & Benefits for EM (14x15) | 17. Est EM Travel Costs |
|-------------------------|--|--------------------|-------------------------|---------------------------|-----------------------------|-------------------------|--------------------------------------|-------------------------|
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| Name:                   |  |                    |                         |                           |                             |                         |                                      |                         |
| Position:               |  |                    |                         |                           | 0.00                        |                         | 0.00                                 |                         |
| <b>B. SUBTOTAL:</b>     |  |                    |                         |                           |                             |                         | 0.00                                 | 0.00                    |
| <b>TOTAL:</b>           |  |                    |                         |                           |                             |                         | <b>18.</b>                           | <b>19.</b>              |
|                         |  |                    |                         |                           |                             |                         | 123,590.30                           | 4,300.00                |

|   |
|---|
| <b>CERTIFICATION:</b> <i>I certify that no individual listed above holds an elected office.</i> |
| Signature of Authorized Official:   |
| Printed name of Authorized Official:  |
| Date Signed:  |

**FISCAL YEAR 2016**  
**APPLICATION FOR FEDERAL ASSISTANCE**  
(Instructions on Reverse)

|   |   |  |
|---|---|--|
| <b>NAME OF PROGRAM/ ASSISTANCE:</b><br>EMERGENCY MANAGEMENT<br>PERFORMANCE GRANT (EMPG) | <b>1. CFDA NUMBER:</b><br><br><p style="text-align: center;">97.042</p> | <b>2. APPLICANT STATUS:</b><br>New Applicant <input type="checkbox"/><br>Renewal <input checked="" type="checkbox"/> |
| <b>3. FEDERAL FISCAL YEAR:</b><br>FY 2016   | <b>4. START DATE:</b><br>OCTOBER 1, 2015                                | <b>5. END DATE:</b><br>SEPTEMBER 30, 2016  |

**APPLICANT INFORMATION**

|  |  |
|--|--|
| <b>a. Legal Name of Applicant Organization (as it appears on the EMPG Application (TDEM-17):</b><br><br>Comal County                                 | <b>b. Name &amp; Telephone Number(s) of Emergency Management Coordinator:</b><br><br>Jeffrey Kelley          |
| <b>c. Mailing Address:</b><br>150 N. Seguin Suite 201<br>New Braunfels, TX 78130<br><br>Employer Identification Number/Tax ID# <u>1-74-6001775-3</u> | <b>d. Physical Address (if different from Mailing Address):</b><br>100 Main Plaza<br>New Braunfels, TX 78130 |

**EMPG PERSONNEL SUMMARY (include only those staff that will be paid with EMPG funds)**

|   |                |                |                |                |                |                |
|---|----------------|----------------|----------------|----------------|----------------|----------------|
| <b>e. Number of EMPG Staff &amp; Percentage of Time Worked in Emergency Management Duties</b> |                |                |                |                |                |                |
|   | <b># Staff</b> | <b>Percent</b> | <b># Staff</b> | <b>Percent</b> | <b># Staff</b> | <b>Percent</b> |
| 1) Full Time:   | 1              | 100            | 2              | 25             | 3              | 10             |
| 2) Part Time  |                |                |                |                |                |                |

Total Number of EMPG-Funded Personnel: 3

**ESTIMATED EXPENSES**

|  |               |
|--|---------------|
| <b>f. Salary &amp; Benefits (from line 18, form TDEM-66)</b> | \$123,590.30  |
| <b>g. Travel Expenses (from line 19 form TDEM-66)</b>        | \$ 4,300.00   |
| <b>h. Other Expenses (from section 11 on reverse)</b>        | 39812.00      |
| <b>i. Total Expenses (F + G + H)</b>                         | \$ 167,702.30 |
| <b>j. Federal Share (I x .50)</b>                            | \$ 83,851.15  |

**Note:** If you cannot meet the cash match requirement, check the box below and attach a match proposal as specified in Section 2 of the *Local Emergency Management Performance Grant Guide*. TDEM must review and approve any exceptions made to the cash match requirement at the time of application.  Cash Match Exception Requested

**CERTIFICATION:** I certify that to the best of my knowledge and belief this application and its attachments are true and correct.

|  |                |
|--|----------------|
| <b>k. Typed Name of Authorized Official:</b>         | Sherman Krause |
| <b>l. Title of Authorized Official:</b>              | County Judge   |
| <b>m. Original Signature of Authorized Official:</b> |                |
| <b>n. Date Signed:</b>                               |                |



# EMPG STAFF JOB DESCRIPTION

|                                |                                  |
|--------------------------------|----------------------------------|
| <b>Jurisdiction Name</b>       | Comal County                     |
| <b>Staff Member Name</b>       | Jeffrey Kelley                   |
| <b>Position Title</b>          | Emergency Management Coordinator |
| <b>Description Prepared By</b> | Jeffrey Kelley                   |
| <b>Date Prepared</b>           | 01/12/2016                       |

## JOB DESCRIPTION

Current Job Description Attached

See Below

**A. Provide a general description of the duties performed by this staff member.**

Immediate Supervisor: Emergency Management Director (County Judge)  
 Office Duties: Manage the Emergency Management Preparedness Program.  
 Planning: Direct and Coordinate the preparation and management of annual work plan and semi-annual progress report documents. Review legal documents. Update and re-certify the basic plan and annexes per work plan requirements. Direct the development of the hazards analysis documents and hazard migration projects documentation.  
 Exercising: Direct and coordinate the preparation and development of a tabletop, functional or full scale exercise.  
 Training: Attend emergency management classes. Direct and coordinate training of staff and support agency personnel.  
 Public Awareness: Direct and coordinate public awareness programs for citizens.  
 Professional Development: Promote emergency management staff professional development.  
 Participate in Emergency Management Associations. Attend the State Emergency Management Conference and the Regional LEPC Conference.  
 Supervisory: Either directly or indirectly, during emergencies, other department staff, office or volunteers through subordinate offices.

**B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.**

Manages the Emergency Management Plan for the County and Cities within Comal County. Performs a wide variety of administrative, technical, consultative, coordinating, developmental, planning evaluative work in the preparation, implementation and maintenance of county-wide emergency management system, including emergency plans, emergency response operations, and response, recovery, mitigation and emergency preparedness programs. Researches, prepares and submits grant applications for private, state and federal funding for applicable emergency management projects. Meets with elected or appointed officials, other emergency management officials, community and business representatives and the public on all aspects of the department's activities. Ensure the overall coordination of emergency management systems during emergency and disaster operations and effectively manages all phases of emergency activities. Participates in emergency and disaster operations and research, plans, coordinates, evaluates, recommends and applies methods and procedures during all phases of emergency management: preparedness, response, recovery and mitigation. Attends conferences and meetings to keep abreast of current trends in the field; represents the county and cities in variety of local, county, state and other meetings.

# EMPG STAFF JOB DESCRIPTION

|                                |                        |
|--------------------------------|------------------------|
| <b>Jurisdiction Name</b>       | Comal County           |
| <b>Staff Member Name</b>       | Gwen Mills             |
| <b>Position Title</b>          | Public Health Director |
| <b>Description Prepared By</b> | Jeffrey Kelley         |
| <b>Date Prepared</b>           | 01/12/2016             |

## JOB DESCRIPTION

Current Job Description Attached

See Below

**A. Provide a general description of the duties performed by this staff member.**

**Special Duties:** Coordinates with the Emergency Management Coordinator reference response to public health related emergencies to include mass casualty, bio-terrorism and weapons of mass destruction. Manages and directs the Health Alert Network activities.

**Office Duties:** Directs county health staff in emergency preparedness and response for mass casualty, bio-terrorism and weapons of mass destruction.

**Planning:** Coordinates with Emergency Management Coordinator in the development of plans, protocols, warnings, response, public information and other activities pertaining to public health related emergencies.

**Exercising:** Participates and assists in coordination, preparation and development of tabletop, functional or full-scale exercise.

**Training:** Attends public health and emergency management classes. Directs and coordinate training for staff and support agency personnel.

**Public Awareness:** Directs and coordinates public health awareness programs of citizens.

**Professional Development:** Promotes public health and emergency management professional development . Participates in public health and emergency management meetings.

Either directly or indirectly, during emergencies, directs other department staff, officers or volunteer through subordinate officers.

**B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.**

Assist with the development, planning, preparation, implementation and maintenance of the county-wide emergency management system pertaining to public health including plans, response, operations, recovery, mitigation and emergency preparedness programs.

Meets with elected or appointed officials, emergency management officials, community health representatives and the public on aspects of the public health department's emergency management activities.

Ensure coordination of public health systems during emergency and disaster operations and effectively manage all phases of public health emergency management activities.

Participate in emergency and disaster operation: coordinates, recommends and assist in applying methods and procedures during all phases of emergency management; preparedness, response, recovery and mitigation.

Attends conferences and meetings to keep abreast of current trends in the public health field reference mass casualty, bio-terrorism or weapons of mass destruction.

# EMPG STAFF JOB DESCRIPTION

|                                |                |
|--------------------------------|----------------|
| <b>Jurisdiction Name</b>       | Comal County   |
| <b>Staff Member Name</b>       | Paul Anthony   |
| <b>Position Title</b>          | PIO            |
| <b>Description Prepared By</b> | Jeffrey Kelley |
| <b>Date Prepared</b>           | 01/12/2016     |

## JOB DESCRIPTION

Current Job Description Attached

See Below

A. Provide a general description of the duties performed by this staff member.

**Special Duties:** Coordinates with the Emergency Management Coordinator for response to emergencies. Manages and directs the Public Information Office activities.

**Planning:** Coordinates with Emergency Management Coordinator in the development of plans, protocols, warnings, response, public information and other activities pertaining to public information during emergencies.

**Exercising:** Participates and assists in coordination, preparation and development of tabletop, functional or full-scale exercise.

**Training:** Attends PIO and emergency management classes. Directs and coordinate training for staff and support agency personnel.

**Public Awareness:** Directs and coordinates public awareness programs of citizens.

**Professional Development:** Promotes PIO and emergency management professional development . Participates in emergency management meetings.

Either directly or indirectly, during emergencies, directs other department staff, officers or volunteer through subordinate officers.

B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.

Assist with the development, planning, preparation, implementation and maintenance of the county-wide emergency management system including plans, response, operations, recovery, mitigation and emergency preparedness programs.

Meets with elected or appointed officials, emergency management officials, community health representatives and the public on aspects of the public information department's emergency management activities.

Ensure coordination of public information systems during emergency and disaster operations and effectively manage all phases of public information emergency management activities.

Participate in emergency and disaster operation: coordinates, recommends and assist in applying methods and procedures during all phases of emergency management; preparedness, response, recovery and mitigation.

Attends conferences and meetings to keep abreast of current trends in the public information field.

FEDERAL EMERGENCY MANAGEMENT AGENCY  
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS

O.M.B. No. 3067-0206  
Expires February 28, 2007

FOR  
FY 2016

CA FOR (Name of Applicant)  
COMAL COUNTY

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, Certifications 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.

David Renken  
Typed Name of Authorized Representative

Comal County Auditor  
Title

David Renken  
Signature of Authorized Representative

11/13/16  
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. Burden means the time, effort and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0206). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send your completed form to the above address.

FEDERAL EMERGENCY MANAGEMENT AGENCY  
ASSURANCES-NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have any 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:

1. 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.
2. 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 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 U.S.C. 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 C.F.R. 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 (P.L. 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 U.S.C. Sections 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 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 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 (P.L. 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 U.S.C. 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 Acts of 1968 (42 U.S.C. 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 Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 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 interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 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 the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Sections 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 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 (P.L. 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 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 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 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 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 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 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 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

**FEDERAL EMERGENCY MANAGEMENT AGENCY  
ASSURANCES-CONSTRUCTION PROGRAMS**

**NOTE:** Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal assistance 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:

1. 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.
2. 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 assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure nondiscrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or state.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. 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.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Sections 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 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Sections 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 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 U.S.C. Sections 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 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to non-discrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to non-discrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 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 Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other non-discrimination provision in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other non-discrimination statute(s) which may apply to the application.
11. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 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 interest in real property acquired for project purposes regardless of Federal participation in purchase.
12. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 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.

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Section 874), the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333) regarding labor standards for federally assisted construction subagreements.

14. Will comply with the 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.

15. 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 (P.L. 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 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and preservation of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

19. Will comply with all applicable requirements of all other Federal laws, Executive Orders, regulations and policies governing this program.

20. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

21. It will obtain approval by the appropriate Federal agency of the final working drawings and specifications before the project is advertised or placed on the market for bidding; that it will construct the project, or cause it to be constructed, to final completion in accordance with the application and approved plans and specifications; that it will submit to the appropriate Federal agency for prior approval changes that alter the cost of the project, use of space, or functional layout, that it will not enter into a construction contract(s) for the project or undertake other activities until the conditions of the construction grant program(s) have been met.

22. It will operate and maintain the facility in accordance with the minimum standards as may be required or prescribed by the applicable Federal, State, and local agencies for the maintenance and operation of such facilities.

23. It will require the facility to be designed to comply with the "American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped," Number A117. - 1961, as modified (41 CFR 101-17.703). The applicant will be responsible for conducting inspections to ensure compliance with these specifications by the contractor.

24. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transfer, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

25. In making subgrants with nonprofit institutions under this Comprehensive Cooperative Agreement, it agrees that such grants will be subject to OMB Circular A-122, "Cost Principles for Non-profit Organizations" included in Vol. 49, Federal Register, pages 18260 through 18277 (April 27, 1984).

**FEDERAL EMERGENCY MANAGEMENT AGENCY  
CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND  
OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

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 (Nonprocurement) 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 section 1352, Title 31 of the U.S. 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 the 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 an employee of Congress, or 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;

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

Standard Form LLL, "Disclosure of Lobbying Activities" attached.  
(This form must be attached to certification if nonappropriated funds are to be used to influence activities.)

**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 local) 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 attached an explanation to this application.

**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 17.620:

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

8. 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 address, City, County, State, Zip code)

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Check  if there are workplaces on file that are not identified here.

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.

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## DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure)

Approved by OMB  
0348-0046

|   |   |  |
|---|---|--|
| <b>1. Type of Federal Action:</b><br><input type="checkbox"/> a. contract<br><input type="checkbox"/> b. grant<br><input type="checkbox"/> c. cooperative agreement<br><input type="checkbox"/> d. loan<br><input type="checkbox"/> e. loan guarantee<br><input type="checkbox"/> f. loan insurance   | <b>2. Status of Federal Action:</b><br><input type="checkbox"/> a. bid/offer/application<br><input type="checkbox"/> b. initial award<br><input type="checkbox"/> c. post-award | <b>3. Report Type:</b><br><input type="checkbox"/> a. initial filing<br><input type="checkbox"/> b. material change<br><b>For Material Change Only:</b><br>year _____ quarter _____<br>date of last report _____ |
| <b>4. Name and Address of Reporting Entity:</b><br><input type="checkbox"/> Prime <input type="checkbox"/> Subawardee<br>Tier _____, if known :<br><br>Congressional District, if known :   |   | <b>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</b><br><br>Congressional District, if known :   |
| <b>6. Federal Department/Agency:</b>  | <b>7. Federal Program Name/Description:</b><br><br>CFDA Number, if applicable : _____   |  |
| <b>8. Federal Action Number, if known :</b>   | <b>9. Award Amount, if known :</b><br>\$ _____  |  |
| <b>10. a. Name and Address of Lobbying Registrant</b><br>(if individual, last name, first name, MI):  | <b>b. Individuals Performing Services</b> (including address if different from No. 10a)<br>(last name, first name, MI):   |  |
| <b>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 information 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.</b> |   | <b>Signature:</b> _____<br><br><b>Print Name:</b> _____<br><br><b>Title:</b> _____<br><br><b>Telephone No.:</b> _____ <b>Date:</b> _____   |
| <b>Federal Use Only:</b>  |   | Authorized for Local Reproduction<br>Standard Form LLL (Rev. 7-97)   |

# TRAVEL POLICY CERTIFICATION

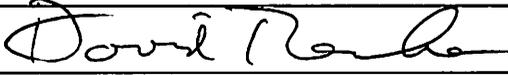
|                           |  |
|---------------------------|--|
| <b>Jurisdiction Name:</b> |  |
|---------------------------|--|

**Check one of the two blocks below**

This jurisdiction has no qualifying travel regulations. EMPG participants requesting reimbursement for travel expenditures will do so in accordance with State of Texas travel regulations and reimbursement rates as published by the Texas Comptroller of Public Accounts. State travel regulations are available at <https://fmx.cpa.state.tx.us/fmx/travel/texttravel/index.php>

**OR**

This jurisdiction has its own qualifying travel policy, a copy of which is attached. EMPG participants requesting reimbursement for travel expenditures will do so in accordance with that policy.

|  |  |
|--|--|
| <b>Name of Grant Financial Officer</b><br>(Printed or Typed) | David Renken   |
| <b>Original Signature of Grant Financial Officer</b>         |  |
| <b>Date Signed</b>   | 11/16/15   |

## **5.15 BUSINESS TRAVEL EXPENSES**

1. Comal County will reimburse employees for reasonable business travel expenses incurred while on County related business away from the normal work location. All business travel must be approved in advance by the elected official or department head. Employees are expected to limit expenses to reasonable amounts. Expenses that generally will be reimbursed are:

- Air or train fare for travel in coach or economy class or the lowest available fare.
- Car rental fees (only for compact or mid-sized).
- Fares for shuttle or airport bus service, or other public ground travel.
- Taxi fares, only when there is no less expensive alternative.
- Mileage costs for use of personal vehicles when less expensive transportation is not available.
- Overnight accommodations at moderately priced establishments.
- Meals (exclusive of alcohol) reimbursed only with detailed original receipt(s). Receipts must show the food items purchased, the amount of the expense, the date of the expense, the time of the expense, the location of the expense, and business reason for the expense. Note: A maximum daily cap for meal reimbursement is \$35. Those using County credit cards who exceed the cap will be required to reimburse the County accordingly.
- Charges for telephone calls, fax, and similar charges required for business purposes.

2. Meal reimbursements will be made subject to the following policy:

- Reimbursements for meals are authorized only when they are purchased outside the confines of Comal County.
- When en route to business destination, reimbursement is authorized only for meals purchased 50 miles outside the confines of Comal County.
- For one-day travel (not overnight) only the lunch meal will be reimbursed.

3. With prior approval, employees on business travel may be accompanied by a family member or friend, when the presence of a companion will not interfere with successful completion of business objectives. Generally, employees are also permitted to combine personal travel and business travel, as long as time away from work is approved. Additional expenses arising from such non-business travel are the responsibility of the employee. Costs incurred by persons other than County employees will not be reimbursed. Detailed meal expense receipts must not contain expenses for non-County employee travel companion(s).

4. When travel is completed, employees should submit completed travel expense reports to the Treasurer's office on the appropriate form(s) within 15 days. Employees should contact their supervisor or County Treasurer for guidance and assistance on procedures related to travel arrangements, expense reports, reimbursement for specific expenses, or any other travel arrangements. Travel expense reports must include supporting documentation for mileage, toll fares, parking expense, and any other related travel expense.

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5. Two or more employees traveling to the same location for the same purpose should travel together whenever possible to avoid unnecessary travel expenses. When two or more employees travel in a single automobile, only one employee will receive mileage reimbursements.
6. Expenses which are not permitted under the terms of grants, contracts, or agreements with other agencies must not be charged as costs to those grants, contracts, or agreements.
7. Employees subject to the overtime provisions of FLSA that travel overnight on business (more than one day), will be paid for time spent away on business (except for meal periods) for their normal working hours and for their normal working hours on their non working days such as Saturdays or holidays. Travel time spent as a passenger on an airplane, train, bus or car outside of regular working hours is not considered work time.
8. When a rental car is used, optional insurance coverage is not required; the County auto liability will suffice.
9. County officials and employees who receive automobile allowances are provided these allowances for travel within the County. In the event one of these officials or employees is required to travel outside the County, he or she is entitled to reimbursement for actual expenses for such trip(s) provided the travel was authorized. Employees or officials who receive monthly automobile allowances are not eligible for per mile reimbursement for travel within the County.
10. Where use of a personal vehicle is judged to be the most reasonable means of transportation in conducting official County business, reimbursement will be at the current IRS mileage reimbursement rate.
11. Employees are expected to report the shortest distance between points of departure and destinations for all travel. All reimbursements must be approved by the elected official or department head and be within the office or department's budget.
12. Employees who travel in a County-owned vehicle will be reimbursed for the actual receipted cost of fuel, oil, or other expenses related to the safe operation of the vehicle.
13. Conference registration checks will be made out only to the organization sponsoring the conference.
14. Abuse of this business travel expenses guidance, including falsifying expense reports to reflect costs not incurred by the employee, can be grounds for legal and disciplinary action, up to and including termination of employment.