

LOCAL BORDER SECURITY PROGRAM FY 2013 (LBSP-13) APPLICATION

1. APPLICANT NAME (Jurisdiction): HIDALGO COUNTY CONSTABLE PRECINCT 4			
2. COUNTY: HIDALGO			
3. TYPE: <input type="checkbox"/> City Government <input checked="" type="checkbox"/> County Government			
4. PAYMENT TYPE: <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Will you want the ONE TIME advance			
4. REQUESTED PERIOD OF PERFORMANCE (NOT TO EXCEED AUGUST 31, 2013) <p style="text-align: center;">January 1, 2013 – August 31, 2013</p>			
6. CHECKLIST OF APPLICATION ATTACHMENTS: (See the Local Border Security Program 2013 (LBSP- 13) Guide for information on completing these forms.)			
<input type="checkbox"/> 1. Designation of Grant Officials (Form A-2). <input type="checkbox"/> 2. Application for State Assistance (Form A-3). The Authorized Official must sign this form. <input type="checkbox"/> 3. Financial Cost Estimate (Form A-4). The Grant Financial Officer must sign this form. <input type="checkbox"/> 4. Assurances and Certifications (Form A-5). The Authorized Official must sign this form. <input type="checkbox"/> 5. Statement of Work (Form A-6) <input type="checkbox"/> 6. Direct Deposit Authorization Form (Form 74-176). The Grant Financial Officer must sign this form. <input type="checkbox"/> 7. Copy of local overtime policy <input type="checkbox"/> 8. Copy of pay schedule during the grant period <input type="checkbox"/> 9. Copy of resolution with the verbiage given in Section 3 number 10 of the LBSP Grant Guidance.			
7. CERTIFICATION			
<p>This Application, together with the Local Border Security Program FY2013 (LBSP-13) Guide, constitutes the work plan for the participants listed above. The undersigned agree to comply with all terms, conditions, and statements of work in the Local Border Security Program FY2013 (LBSP-13) Guide.</p> <p>The applicant is also assuring that the county (or counties) in which the applicant is located must have an overall 90% average on reporting adult and juvenile criminal history dispositions to the Texas Department of Public Safety for calendar years 2006 through 2010. This is reported via the Uniform Criminal Report Database (UCR).</p>			
_____ Authorized Official (Original Signature)	_____ Date	_____ Grant Performance Officer (Original Signature)	_____ Date

Form A-1
(11/01)

Mail completed forms and application materials to:

LBSP – 13 Grant Coordinator
 C/O Brandy Prinz, Grant Coordinator
 Texas Rangers Division
 Texas Department of Public Safety
 PO Box 4087
 Austin, TX 78773-0602
 brandy.prinz@dps.texas.gov

**LOCAL BORDER SECURITY PROGRAM FY2013 (LBSP-13)
DESIGNATION OF GRANT OFFICIALS**

GRANT:	LOCAL BORDER SECURITY PROGRAM FY2013 (LBSP-13)
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GRANT PERIOD:	January 1, 2013 – August 31, 2013
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AGENCY NAME:	HIDALGO COUNTY CONSTABLE PRECINCT 4
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Grant Performance Officer	<i>(This is typically your Chief or Sheriff)</i>
<i>Name</i>	JOSE EDUARDO GUERRA
<i>Title</i>	CONSTABLE
<i>Official Mailing Address</i>	2814 S. BUSINESS HIGHWAY 281 EDINBURG, TEXAS 78539
<i>Daytime Phone Number</i>	956-383-8560
<i>Fax Number</i>	956-383-8565
<i>E-mail Address</i>	JOEL.RIVERA@CO.HIDALGO.TX.US

Grant Financial Officer	<i>(This is typically your CFO or County Auditor)</i>
<i>Name</i>	RAY EUFRACIO
<i>Title</i>	HIDALGO COUNTY AUDITOR
<i>Official Mailing Address</i>	2808 S. BUSINESS HIGHWAY 281 EDINBURG, TEXAS 78539
<i>Daytime Phone Number</i>	956-318-2511
<i>Fax Number</i>	956-318-2577
<i>E-mail Address</i>	RAY.EUFRACIO@AUDITOR.CO.HIDALGO.TX.US

Authorized Official	<i>(This should be the County Judge, Mayor, or City Manager not the Sheriff or Police Chief)</i>
<i>Name</i>	RAMON GARCIA
<i>Title</i>	HIDALGO COUNTY JUDGE
<i>Official Mailing Address</i>	302 W. UNIVERSITY DR. EDINBURG, TEXAS 78539
<i>Daytime Phone Number</i>	956-318-2600
<i>Fax Number</i>	956-318-2699
<i>E-mail Address</i>	RAMON.GARCIA@CO.HIDALGO.TX.US

If at any point during the grant period these POC's change make necessary changes and resubmit this form immediately.

APPLICATION FOR STATE ASSISTANCE

(Instructions on Reverse)

1. NAME OF PROGRAM/ ASSISTANCE: LOCAL BORDER SECURITY PROGRAM FY2013 (LBSP- 13)	2. APPLICANT STATUS: <input type="checkbox"/> City <input checked="" type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> County <input type="checkbox"/> One time Advance
3. START DATE: JANUARY 01, 2013	4. END DATE: AUGUST 31, 2013
5. APPLICANT INFORMATION	
a. Legal Name of Applicant Organization (as it appears on the LSBP- 13 Application/Form A-1): HIDALGO COUNTY CONSTABLE PRECINCT 4	b. Name & Telephone Number of Grant Performance Officer: JOSE EDUARDO GUERRA 956-383-8560
c. Mailing Address: 2814 S. BUSINESS HIGHWAY 281 EDINBURG, TEXAS 78539	d. Physical Address (if different from Mailing Address):
6. EMPLOYER IDENTIFICATION NUMBER / TAX ID # <u>74-6000717</u>	
7. ESTIMATED EXPENSES:	
a. Salary & Benefits (from line ___ Form A-4)	135,761.25
b. Travel Expenses (from line ___ Form A-4)	0.00
c. Operating Expenses (from line ___ Form A-4)	36,230.00
d. Total Expenses (A + B + C)	171,991.65
8. CERTIFICATION: I certify that to the best of my knowledge and belief this application and its attachments are true and correct.	
a. Typed Name of Authorized Official:	RAMON GARCIA
b. Title of Authorized Official:	HIDALGO COUNTY JUDGE
c. Original Signature of Authorized Official:	
d. Date Signed:	

FINANCIAL COST ESTIMATE

1. NAME OF PROGRAM / ASSISTANCE: Local Border Security Program FY 2012

2. APPLICANT NAME: HIDALGO COUNTY CONSTABLE PRECINCT 4

3. ESTIMATED MONTHLY EXPENSES:

a. Personnel Estimate

Position	Number of Personnel	Hourly Rate	Overtime Rate (Time and 1/2)	Number of O/T Hours per Person per Day	Number of Days	Salary	FICA 7.65%	Retirement 10.32%	Life Insurance \$	Total Salary & Fringe
Chief Deputy Constable II Step II	1	\$25.92	\$38.88	10	4	\$1,555.33	\$118.98	\$160.51	\$27.00	\$1,861.82
Sr. Deputy Constable Step III	1	\$22.17	\$33.26	10	4	\$1,330.38	\$101.77	\$137.30	\$27.00	\$1,596.45
Deputy Constable Step II	4	\$19.48	\$29.21	10	4	\$4,674.23	\$357.58	\$482.38	\$135.00	\$5,649.19
Sr. Deputy Constable Step II	2	\$20.10	\$30.14	10	4	\$2,411.54	\$184.48	\$248.87	\$54.00	\$2,898.89
Sr. Deputy Constable Step III	1	\$22.17	\$33.26	10	4	\$1,330.38	\$101.77	\$137.30	\$27.00	\$1,596.45
Sr. Deputy Constable Step II - BP	1	\$21.42	\$32.14	10	4	\$1,285.41	\$98.33	\$132.65	\$27.00	\$1,543.40
Sergeant Step IV	1	\$25.39	\$38.08	10	4	\$1,523.22	\$116.53	\$157.20	\$27.00	\$1,823.94
Total Personnel Estimates										\$16,970.16

b. Travel & Per Diem Estimate

Position	Number of Personnel	Commercial Travel Costs	Mileage from / to County	Estimated Ave. Daily Miles	Number of Days	Total Mileage Cost	Hotel Rate \$85 Maximum	Hotel Tax Rate	Meals \$36 Maximum	Travel Totals
	0	\$0.00	0	0	0	\$0.00		\$0.00		\$0.00
	0	\$0.00	0	0	0	\$0.00		\$0.00		\$0.00
Total Travel & Per Diem Estimate										\$0.00

c. Operational Cost Estimate

Number of Cars	Number of Miles per Car	Number of Days	Rate per Mile	Subtotal
12	170	4	\$0.555	\$4,528.80
Total Operational Cost Estimate				\$4,528.80

FILL IN SHADED FIELDS ONLY

*NOTE: Estimate either for fuel or mileage, not both.

4. NUMBER OF MONTHS IN THE GRANT PERIOD:

5. ARE YOU PAID MONTHLY OR BI-MONTHLY:

6. INDICATE THE NUMBER OF HOURS IN YOUR PAY PERIOD:

7. TOTAL AMOUNT OF APPLICATION

a. Personnel Estimate	\$135,761.25
b. Travel & Per Diem Estimate	\$0.00
c. Operational Cost Estimate	\$36,230.40
Total Expenses	\$171,991.65
Total Grant	\$135,761.25

8. TYPE OF PAYMENT YOU PREFER: (check one)

Reimbursement X Advance Payment

X

Signature of Grant Official

**State of Texas Assurances and Certifications
State Uniform Administrative Requirement for Grants and Cooperative Agreements,
Subpart B, §.14**

Note: Certain of these assurances may not be applicable to your program. If you have any questions, please contact the awarding agency.

NAME OF APPLICANT	GRANT PROGRAM
HIDALGO COUNTY CONSTABLE PRECINCT 4	Local Border Security Program FY 2013 (LBSP-13)

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

As the duly authorized representative of the applicant, I hereby certify that the applicant (subgrantee) will comply with the assurances and certifications below.

JOSE EDUARDO GUERRA	HIDALGO COUNTY CONSTABLE PRECINCT 4
Typed Name of Authorized Official	Title
Signature of Authorized Official	Date Signed

ASSURANCES

(1) RELATIVES. A subgrantee must comply with Texas Government Code, Chapter 573, by ensuring that no officer, employee, or member of the applicant's governing body or of the applicant's contractor shall vote or confirm the employment of any person related within the second degree of affinity or the third degree of consanguinity to any member of the governing body or to any other officer or employee authorized to employ or supervise such person. This prohibition shall not prohibit the employment of a person, who shall have been continuously employed for a period of two years, or such other period stipulated by local law, prior to the election or appointment of the officer, employee, or governing body member related to such person in the prohibited degree.

(2) PUBLIC INFORMATION. A subgrantee must insure that all information collected, assembled, or maintained by the applicant relative to a project will be available to the public during normal business hours in compliance with Texas Government Code, Chapter 552, unless otherwise expressly prohibited by law.

(3) OPEN MEETINGS. A subgrantee must comply with Texas Government Code, Chapter 551, which requires all regular, special, or called meetings of governmental bodies to be open to the public, except as otherwise provided by law or specifically permitted in the Texas Constitution.

(4) CHILD SUPPORT PAYMENTS. A subgrantee must comply with Section 231.006, Texas Family Code, which prohibits payments to a person who is in arrears on child support payments.