

**TEXAS DEPARTMENT OF PUBLIC SAFETY  
TEXAS HOMELAND SECURITY STATE ADMINISTRATIVE AGENCY (THSSAA)**

**2013 ELIGIBILITY CERTIFICATION FORM**

<b>Certification:</b>	PLEASE FILL IN THE APPROPRIATE INFORMATION AND CERTIFY BY SIGNING BELOW THAT THE INFORMATION SUBMITTED ON THIS ELIGIBILITY FORM IS COMPLETE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE.		
<b>Printed Name of Jurisdiction/ Organization:</b>	<b>HIDALGO COUNTY</b>		
<b>DUNS Number:</b>	<b>103110834</b>		
<b>Signature:</b>		<b>Date:</b>	
<b>Printed Name of Authorized Official*:</b> (*See instructions for Definition of Authorized)	<b>Ramon Garcia</b>		
<b>Title:</b> (Judge, Mayor, ED, City Manager, CFO)	<b>Judge</b>		
<b>I. NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS)</b>			
Please initial to certify to <u>one</u> of the NIMS statements below (initial only one box, A or B):			
<b>A</b>	<b>To Certify to I.A, Initial Here:</b>  <b>X</b>	My jurisdiction/organization has adopted and implemented NIMS <u>and</u> is compliant with all NIMS objectives issued to date (FY2005-FY2009).  <a href="https://www.fema.gov/nimscast/Logoff.do?a=55062&amp;m=ML2010">https://www.fema.gov/nimscast/Logoff.do?a=55062&amp;m=ML2010</a>	
<b>B</b>	<b>To Certify to I.B, Initial Here:</b>	My jurisdiction/organization has adopted and implemented NIMS, but is not fully compliant with all NIMS implementation objectives.  <b>Required Attachment:</b> A letter explaining the a) the implementation objectives not yet met; b) the steps taken to achieve 100% NIMS compliance; and c) the date the jurisdiction expects to be in full compliance with all objectives and metrics.	
<b>II. EMERGENCY MANAGEMENT PLANS (INTERMEDIATE LEVEL)</b>			
<b>To Certify to II., Initial Here:</b>  <b>X</b>	<input checked="" type="checkbox"/>	A. My jurisdiction has its own current emergency management plan that meets the state preparedness standards at the Intermediate Level on file with the Texas Division of Emergency Management (TDEM).	
<b>and check <u>one</u> of the three boxes at right</b>	<input type="checkbox"/>	B. My jurisdiction is a legally established member of an inter-jurisdictional emergency management program that has a plan that meets the state preparedness standards at the Intermediate Level on file with TDEM.	
	<input type="checkbox"/>	C. My jurisdiction/organization is not a city or county and is not required by Texas law to have an emergency management plan, e.g., COG or nonprofit organization.	

<b>III. OMB CIRCULAR A-133 SINGLE AUDIT</b>	
My jurisdiction's/organization's fiscal year (FY) end for 2012 was <b>(check one)</b> :	
<input type="checkbox"/> <b>August 31, 2012</b> (Reporting Package is due 30 days after completion or May 31, 2013, whichever is sooner) <input type="checkbox"/> <b>September 30, 2012</b> (Reporting Package is due 30 days after completion or June 30, 2013, whichever is sooner) <input checked="" type="checkbox"/> <b>December 31, 2012</b> (Reporting Package is due 30 days after completion or September 30, 2013, whichever is sooner) <input type="checkbox"/> <b>Other (please specify date here):</b> _____	
Please initial to certify to <b>one</b> of the A-133 Audit statements below <b>(initial only one box, A or B)</b> .	
<b>A</b>	To Certify to III.A, Initial Here:  I certify my jurisdiction/organization <b>did not</b> expend over \$500,000 in Federal or State funding during <b>FY 2012</b> so no A-133 audit was necessary or obtained.
<b>B</b>	To Certify to III.B, Initial Here: <b>X</b> I certify my jurisdiction/organization <b>expended over \$500,000</b> in Federal or State funding in <b>FY 2012</b> and that the required reporting package has been/will be provided 1) to the Texas Department of Public Safety (TXDPS) and 2) to the Federal Clearinghouse.
<b>IV. TEXAS REGIONAL RESPONSE NETWORK (TRRN)</b>	
To Certify to IV., Initial Here:  <b>X</b> and check <b>one</b> of the two boxes at right	My jurisdiction/organization is registered with the Texas Regional Response Network (TRRN) and <b>(check one)</b> : <a href="https://www.trrn.state.tx.us/TRRN/Tier01/Security/SignIn.aspx">https://www.trrn.state.tx.us/TRRN/Tier01/Security/SignIn.aspx</a> <input checked="" type="checkbox"/> A. My jurisdiction <b>has entered all deployable equipment with a cost of \$5,000 or more</b> purchased with Homeland Security Grant funds into the TRRN. <input type="checkbox"/> B. My jurisdiction <b>does not have any deployable equipment with a cost of \$5,000 or more</b> purchased with Homeland Security Grant funds.
<b>V. DUNS, CCR and FFATA</b>	
To Certify to V., Initial Here:  <b>X</b>	I certify my jurisdiction/organization has entered all required information, including FFATA/employee compensation, into the System for Award Management (SAM) and has an active registration status with no "Active Exclusion Records". ( <a href="https://www.sam.gov/portal/public/SAM/">https://www.sam.gov/portal/public/SAM/</a> )
<b>VI. CRIMINAL HISTORY DISPOSITION REPORTING (If Applicable)</b>	
This certification section applies to <b>County jurisdictions only for the State Homeland Security Grant Program (SHSP)</b> . For FY 2013, this section <b>DOES NOT APPLY</b> to cities within counties or to NSGP, OPSG, or UASI applicants. Please initial to certify to <b>one</b> of the criminal history disposition reporting statements below <b>(initial only one box, A or B)</b> .	
<b>A</b>	To Certify to VI.A, Initial Here:  <b>X</b> My County has documented a <b>90% average disposition completeness rate for adult arrests and a 90% average disposition completeness rate for juvenile arrests</b> under calendar years 2007-2011 as required by Chapter 60, Texas Code of Criminal Procedure.
<b>B</b>	To Certify to VI.B, Initial Here:  My County <b>DOES NOT</b> currently have a documented <b>90% average disposition completeness rate for adult arrests and a 90% average disposition completeness rate for juvenile arrests</b> under calendar years 2007-2011, but my County intends to attain the required averages <b>by August 1, 2013</b> . I understand that my County will not be Eligible for 2013 SHSP funds if the required averages are not achieved by the August 1, 2013 deadline.