

## Project Worksheet—FY 2014 Homeland Security Grant Program

**NOTE:** The Project Worksheet for FY 2014 has been changed to incorporate the information required by the state. In previous years, the task of converting the CAPCOG Project Worksheet Form to the state-mandated format required considerable staff time, time that is not available this year due the short timeline for submission of projects to the state.

**Instructions:** Fill in a copy of this form for each project. The three highlighted items at the end are required only for projects recommended for funding and do not need to be completed at the time the project worksheet is submitted. Jurisdictions that were approved for funding from the FY 2013 Homeland Security Grant Program can request from CAPCOG staff an electronic copy of last year's completed form to use as a template in completing this year's form.

You can use the <Tab> key to move between text fields or you can click on the desired field. If needed for clarity, you can use the <Enter> key to create paragraphs within the larger text boxes.

When this form is complete, print it and have the form signed by the Authorizing Chief Official and the Project Manager. If you are unable to obtain the signature of the Authorizing Chief Official prior to submission, the project worksheet must be accompanied by a statement that a signature is forthcoming. The required signatures must be provided before the project is submitted to the state.

Send the signed copy and an electronic copy in Microsoft Word format of the unsigned form to:

Cindy Hood, Assistant Director, Homeland Security Division  
Capital Area Council of Governments  
6800 Burlison Road, Building 310, Suite 165  
Austin, TX 78744  
[chood@capcog.org](mailto:chood@capcog.org)

***CAPCOG MUST receive all completed and signed (except as noted above) project worksheets by 5:00 p.m., Monday, March 10, 2014. Late or incomplete submissions cannot be accepted.***

### CONTACT INFORMATION

**Region:** CAPCOG

**Name:** (Name of person filling out application) Jarred Thomas

**Email:** [jthomas@wilco.org](mailto:jthomas@wilco.org)

**Phone:** 512-864-8269

The project coordinator is the person that you would like us to contact in regard to this project.

**Project Coordinator Name:** Jarred Thomas

**Project Coordinator Email:** [jthomas@wilco.org](mailto:jthomas@wilco.org)

**Project Coordinator Phone Number:** 512-864-8269

**Please select the most relevant investment category:**

Sustaining Special Response Teams

**Project Title:** [Not to exceed 150 characters including spaces. Begin with the name of your jurisdiction.]

Weather Monitoring Equipment Replacement Project

Check if this project is for law enforcement terrorism prevention.

Check if this project supports a fusion center.

Check if this project supports a NIMS Typed Resource (i.e. Team, Training, or Equipment).

**Describe the project and the activities that will be implemented; include information about building or sustaining NIMS Typed Resources (i.e. Team, Training, or Equipment) as applicable.** Not to exceed 1250 characters, including spaces.

The Williamson County Hazardous Materials Response Team is classified as a Type II Team. The equipment being requested in this project will replace current and aging grant funded equipment purchased with pre-2004 and 2004 SHSP funding. The weather monitoring equipment is an essential equipment on all HazMat/CBRNE and is frequently used for other all-hazards incidents. Currently the manufacturer of the equipment is offering an equipment upgrade which will allow for multiple weather station monitoring and Gamma radiation detection. The current monitoring equipment will be returned to the manufacturer and the upgraded systems will be returned. This project serves both as a sustainment and enhancement to monitoring capabilities. Vehicle mounting devices will also be purchased to allow for faster deployment while maintaining the ability for remote setup.

**The response to the next three (3) sections should be consistent with the region's (1) Threat and Hazard Identification and Risk Assessment (THIRA); (2) State Preparedness Report; and (3) Texas Homeland Security Strategic Implementation Plan. [You may request a copy of these documents by sending an e-mail request to: [chood@capcog.org](mailto:chood@capcog.org).]**

**Describe the threats and hazards that create the need for the project.** Not to exceed 1250 characters, including spaces.

The Williamson County HazMat Response Team is one of 3 CAPCOG Regional CBRNE Teams with the primary response for 3 counties. Aside from the CBRNE responsibilities, Williamson County contains multiple petrochemical pipelines, railroads, IH-35, and multiple industrial sites with chemical processes. This equipment is vital to an accurate identification of chemical substances to ensure proper mitigation tactics and the safety and health of responders and the public.

**Describe the capability gap(s) which will be addressed by the project:** Not to exceed 1250 characters, including spaces.

This project will reduce a potential gap in environmental monitoring capability by replacing aging weather station equipment through a manufacturer trade-in and equipment enhancement program. This will also fill a gap in wide-area weather monitoring and Gamma radiation detection. The upgraded weather stations allow for the simultaneous wide-area monitoring or for the monitoring among buildings. The upgraded systems link together via radio forming a network allowing for wide-area usage. This new capability also allows for comprehensive monitoring among buildings that routinely experience wind channeling. This is caused by the prevailing winds to shift or change direction upon entering areas congested with buildings or other structures.

**How will the project reduce the capability gap(s):** Not to exceed 1250 characters, including spaces.  
 This project will eliminate the gap by replacing the aging equipment and increasing the monitoring capabilities.

**Measuring project impact: List 2-5 specific performance outcomes/outputs that can be used to measure the success of the project (At least one outcome and one output are required per project)**

**Outcome 1:** Not to exceed 300 characters, including spaces

Provide comprehensive weather/environmental monitoring during hazmat/cbrne events.

**Outcome 2:** Not to exceed 300 characters, including spaces

**Output 1:** Not to exceed 300 characters, including spaces

Upgrade current weather equipment to newer equipment with mesh network capability and gamma detection.

**Output 2:** Not to exceed 300 characters, including spaces

**Output 3:** Not to exceed 300 characters, including spaces

**Please select applicable Core Capabilities and amount of funding for each.**

Priorities were identified in the region's THIRA. Enter decimal numbers only, no characters (dollar signs, commas), do not put N/A, only numbers.

(Link to definitions of Core Capabilities: <http://www.fema.gov/core-capabilities> )

<u>High Priority</u>	<u>Amount of Funding</u>
<input type="checkbox"/> Operational Coordination .....	\$
<input type="checkbox"/> Intelligence and Information Sharing .....	\$
<input type="checkbox"/> Interdiction and Disruption .....	\$
<input type="checkbox"/> Screening, Search, and Detection .....	\$
<input type="checkbox"/> Access Control and Identity Verification .....	\$
<input type="checkbox"/> Cybersecurity .....	\$
<input type="checkbox"/> Physical Protective Measures .....	\$
<input type="checkbox"/> Critical Transportation .....	\$
<input checked="" type="checkbox"/> Environmental Response/Health and Safety .....	\$ 54,000
<input type="checkbox"/> Fatality Management Services .....	\$
<input type="checkbox"/> Infrastructure Systems .....	\$

<input type="checkbox"/> Mass Care Services .....	\$
<input type="checkbox"/> Mass Search and Rescue Operations .....	\$
<input type="checkbox"/> Operational Communications .....	\$
<input type="checkbox"/> Public and Private Services and Resources .....	\$
<input type="checkbox"/> Public Health and Medical Services .....	\$
<input type="checkbox"/> Situational Assessment .....	\$
<b>Medium Priority</b>	
<input type="checkbox"/> Planning .....	\$
<input type="checkbox"/> Public Information and Warning .....	\$
<input type="checkbox"/> Risk Management for Protection Programs and Activities .....	\$
<input type="checkbox"/> Community Resilience .....	\$
<input type="checkbox"/> Long-term Vulnerability Reduction .....	\$
<input type="checkbox"/> Risk and Disaster Resilience Assessment .....	\$
<input type="checkbox"/> Threats and Hazard Identification .....	\$
<input type="checkbox"/> On-scene Security and Protection .....	\$
<input type="checkbox"/> Economic Recovery .....	\$
<input type="checkbox"/> Health and Social Services .....	\$
<input type="checkbox"/> Housing .....	\$
<b>Low Priority</b>	
<input type="checkbox"/> Forensics and Attribution .....	\$
<input type="checkbox"/> Supply Chain Integrity and Security .....	\$
<input type="checkbox"/> Natural and Cultural Resources .....	\$

**Indicate if this project focuses on building New Capabilities or sustaining Existing Capabilities.**  
**Sustaining Existing Capabilities**

**Describe existing capability levels and prior homeland security funded projects that address the identified goals/objectives and what will be in place to support the Investment prior to the use of FY 2014 funds. Not to exceed 1250 characters, including spaces**  
 The original prime mover and trailer were purchased with pre-2004 SHSP funds. This equipment has allowed the Williamson County obtain and maintain its Type II designation.

**Explain the long-term approach to sustaining the capabilities developed by this project.**  
 Not to exceed 1250 characters, including spaces  
 Williamson County will continue to seek out grant opportunities to aid in the sustainability of the Regional HazMat/CBRNE Team. Any gaps in funding will be fulfilled by Williamson County.

**Provide an explanation on the regional impact of this project.**  
 Not to exceed 1250 characters, including spaces  
 The replacement of this equipment will ensure the regional response capability for future years. This equipment will enhance the teams capabilities by providing comprehensive weather/environmental monitoring vital to the safety of the public as well as responders.

**Enter the amount of funding for each category.**  
 Enter decimal numbers only, no characters (dollar signs, commas), do not put N/A, only numbers.

Planning .....	\$
Organization .....	\$
Equipment .....	\$ 54,000
Training .....	\$
Exercise .....	\$
M/A* .....	\$
*Maximum allowed is 3% of award total	
<b>Total</b> .....	<b>\$ 54,000</b>

Provide a description and amount for any in-kind and/or local match for this project:  
 Not to exceed 1250 characters, including spaces  
**Amount:** \$ 0  
**Description:**

**You must include a specific breakdown by funding category (Planning, Organization, Equipment, Training, Exercises, and M&A). Provide detailed information on exactly what the funding will be used to purchase. Include the details of your cost estimates by AEL code and jurisdiction (if applicable) within each category.**

**Planning: (Include AEL Codes)** Not to exceed 1500 characters, including spaces

**Organization: (Include AEL Codes)** Not to exceed 1500 characters, including spaces

**Equipment: (Include AEL Codes - Provide Title, estimated quantity and total cost by each AEL Code)**  
 Not to exceed 1500 characters, including spaces  
 AEL 07SE-03-ENVS Detection Support Site Sampling Weather QTY 4 \$13,500 ea.

**Training: (Include AEL Codes)** Not to exceed 1500 characters, including spaces

**Exercises: (Include AEL Codes)** Not to exceed 1500 characters, including spaces

**M&A\*: (Include AEL Codes)** Not to exceed 1500 characters, including spaces  
 \*Maximum allowed is 3% of award total

**Does this Investment require new construction or renovation, retrofitting, or modification of existing structures?**  
 No

**Time period for completion of project**  
 Choose a time period from the dropdown menu:  
 9-12 months

**List 3-5 milestones of this project, and then list the intended completion date for each milestone. Milestones should occur throughout the project.**

**Milestone 1:** Not to exceed 300 characters, including spaces  
 Approve the funds in Commissioner's Court  
**Intended Start Date:** Must be in MM/DD/YYYY format 01/1/2015  
**Intended Milestone Completion Date:** Must be in MM/DD/YYYY format 01/30/2015

**Milestone 2:** Not to exceed 300 characters, including spaces

Place order and return equipment.

**Intended Milestone Completion Date:** Must be in MM/DD/YYYY format 03/01/2015

**Milestone 3:** Not to exceed 300 characters, including spaces

Recieve new equipment

**Intended Milestone Completion Date:** Must be in MM/DD/YYYY format 05/01/2015

**Milestone 4:** Not to exceed 300 characters, including spaces

Train on equipment and install vehicle mounts.

**Intended Milestone Completion Date:** Must be in MM/DD/YYYY format 08/01/2015

**Milestone 5:** Not to exceed 300 characters, including spaces

Place equipment into service in service

**Intended Milestone/Project Completion Date:** Must be in MM/DD/YYYY format 08/01/2015

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## Certification

### Signature of Authorizing Chief Official

This signature certifies that the requestor understands the requirements, procedures, and deliverables, coinciding with this request for funding and has the authority to represent the governing body of this organization.

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Authorizing Chief Official

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Date

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Printed Name

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Title

### Signature of Project Manager

The following person is authorized to receive direction, manage work performed, complete and sign required reports, and otherwise act on behalf of the jurisdiction for this project.

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Project Manager

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Date

Jarred Thomas

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Printed Name

EM Coordinator

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Title

Check box if letters of support are attached.