## **FISCAL YEAR 2018 EMERGENCY MANAGEMENT PERFORMANCE GRANT APPLICATION**

1. APPLICANT NAME (Jurisdiction): Williamson County Office of Emergency Management	
2. COUNTY: Williamson	3. DISASTER DISTRICT: 12
4. EMPG STATUS: ☑ Current EMPG Program participant ☐ New EMPG Program applicant	
5. PROGRAM PARTICIPANTS: (List all jurisdictions that are participants in your emergency management program. Identify any jurisdictions that have joined or withdrawn from your program in the last year.)	
Cities of Coupland, Florence, Granger, Hutto, Liberty Hill, Thrall, Weir	
6. CHECKLIST OF APPLICATION ATTACHMENTS: (See the FY 2018 Emergency Management Performance Grant (EMPG) Guide for information on completing these forms.)  Designation of Grant Officials (TDEM-17B) Statement of Work & Cumulative Progress Report (TDEM-17A) - This form shall be signed by the EMC EMPG Staffing Pattern (TDEM-66) - The Authorized Official shall sign this form Application for Federal Assistance (TDEM-67) - The Authorized Official shall sign this form EMPG Staff Job Description (TDEM-68) - A current job description is required for each staff member listed in the FY 2018 EMPG Staffing Pattern (TDEM-66) FEMA Form 20-16 Summary Sheet for Assurances & Certifications - Shall be signed by an Authorized Official Attached: FEMA Form 20-16A, Assurances - Non-Construction Programs FEMA Form 20-16C, Certifications Regarding Lobbying, Debarment, Suspension, & Other Responsibility Matters; and Drug-Free Workplace Requirements FEMA Form SF LLL, Disclosure of Lobbying Activities - Signed by the Authorized Official required only if the applicant performs lobbying to influence federal actions Direct Deposit Authorization (form 74-146) or Application for Payee ID Number (form AP-152) - The Grant Financial Officer shall sign this form Travel Policy Certification (TDEM-69) - The Grant Financial Officer shall sign this form 7. CERTIFICATION: This Application, together with the approved EMPG Statement of Work & Cumulative Progress Report	
(TDEM-17A), constitutes the annual work plan for the emergency management program whose participants are listed above. The undersigned agree to exert their best efforts to accomplish all activities listed in the Statement of Work & Cumulative Progress Report approved by the Texas Division of Emergency Management.	
Date	Date
Authorized Official Date Emergency Man (Original Signature) (Original Signature)	agomon contains
Dan Gattis Jarred Tho	omas
Printed Name Printed Name:	
DEM 47	Page 1 of 1

TDEM-17 10/17

Page 1 of 1

Completed forms and application materials can be sent by email or mail to:

Email address:

TDEM.EMPG@dps.texas.gov

Physical Address:

Texas Department of Public Safety Division of Emergency Management Emergency Management Support 5805 N Lamar Blvd. Austin, TX 78752