| Grant Title/Project Name: | Hazmat Level A Flash Suits |
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| Department: | 541 - Emergency Management |
| Requestor: | Jarred Thomas |
| Contact Email: | jthomas@wilco.org |
| Contact Phone Number: | jthomas@wilco.org |
| Start Date: | 7/24/2018 |
| End Date: | 7/31/2018 |
| Please select request category: | Asset |
| Describe the request category in detail to include all requirements. | Homeland Security Grant for 12 Level A Hazmat Suits with Flash Fire Protection and a pressure test kit for the biannual inspection of the suits. |
| Select the type of grant your department is applying for: | Federal |
| What is the amount of the grant? | \$25,467.90 |
| Please provide a breakdown of the total cost above. | (6) FRONTLINE 500 NFPA 1991 FLASH LEVEL A FLASH SUIT. ANTIFOG, 2N1 GLOVE SYSTEM. FRONT ENTRY SIZE LG/XL - \$12,127.56 (6) FRONTLINE 500 NFPA 1991 FLASH LEVEL A FLASH SUIT. ANTIFOG, 2N1 GLOVE SYSTEM. FRONT ENTRY SIZE 2XL/3XL - \$13,340.34 (1) NEW AUTOMATIC LCD PRESSURE TEST KIT (INCLUDED WITH PURCHASE OF 10 OR MORE FRONTLINE 500 SUITS) - \$0.00 |
| Is there a match requirement? | No |
| If yes, describe the type and source of match. | |
| Does the grant cover the cost of the request 100%? | No |
| If not, how much is left unpaid? | \$498.23 |
| What is the plan to obtain grants/funds for the remaining amount? | Hazmat (Dept. 542) currently has funds in 3110 - other supplies allocated to purchase Hazmat Suits and we would pull the funds from that line item. |
| List other similar assets in the County and/or region and if they are available for use? | Currently Hazmat has 6 of these suits in stock, on a Hazmat call where these are utilized, they will use a minimum 4 suits for the Entry and Backup team. |
| How is this asset request different from any similar assets currently in the County and/or region? | Currently, we are the only Hazmat team in the region that is stocking these suits. Due to multiple incidents we have had that required the use of this suit. |
| What types of events/purpose would this asset be used for that cannot be accomplished with a current County asset? | Currently we are down to 6 of these special suits in inventory, if we have an incident where these suits are needed, it will deplete our inventory. |
| How often do these events occur? | Varies - 1 - 3 times per year |
| Identify the number of personnel required to operate this asset and/or be available for the function where it is to be used? How much time is required of those personnel? What is the cost of the personnel? | These suits will be utilized by the Williamson County Hazmat team in the event of a chemical leak that has toxic and flammable characteristics. The team is comprised of on duty personnel. |
| Where will the asset be stored? | 4 on each Hazmat trailer across the County |
| What is the useful life of the asset? | There is no Shelf Life on Kappler Suits as long as they pass the biannual pressure test kit. The suits are single exposure suits. Once they have been exposed to a chemical, they must be disposed of. |
| Will a replacement be requested from general funds when useful life has been exhausted? | No |

| Will other agencies be billed for the use of this asset (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)? | The County will bill the responsible party for Hazmat Incidents to assist in cost recovery. |
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| Does this asset require insurance coverage? | No |
| If yes, what is the estimate of asset insurance coverage? | |
| Will this asset require on-going maintenance? Please describe the maintenance required along with an estimate for these costs. | Personnel from the Hazmat Division will utilize the pressure test kit to perform the biannual test on the suits. As long as the suits are stored in a climate controlled area there is no other maintenance required. |
| How will this asset be funded when the grant ends? | In the past, the Hazmat Division has purchased these suits out of their operating budget. We were able to get the grant funds this time to help offset that cost to the County. We continue to work on getting Homeland Security Funds to provide our Regional Hazmat Team with specialized equipment such as these suits. |
| What is the impact if the grant is not received? | If we do not receive this grant, we will need to budget for the purchase of these suits. |
| New Personnel position is: | |
| Where will this position office? | |
| Who will this position report to? | |
| What tasks will this position perform? Include the five primary functions and the percentage of time spent to be spent on each function. | |
| Will this position take over tasks from current County employee? | |
| If yes, please explain the impact to current employee. | |
| How will this position be funded when the grant ends? | |
| Does this position or a similar position currently exist within the department? | |
| If "yes" how many of these similar positions exist | |
| Describe any alternatives considered to achieve desired outcome in lieu of a position (i.e. equipment, software, technology or change in business practice). | |
| Describe how workload will be accomplished/re- allocated should grant not be approved. | |
| List other similar items in the County and/or region and if they available for use? | |
| How is this item request different from any similar assets currently in the County and/or region? | |
| What types of events/purpose would this item be used for that cannot be accomplished with a current County asset? | |
| Identify the number of personnel required to operate this item and/or be available for the function where it is to be used? | |
| Please explain how this item will create the need for more or less personnel (or mark n/a for no change)? | |
| Where will the item be stored? | |
| What is the useful life of the item? | |

| Will other agencies be billed for the use of this item (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)? | |
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| Does this item require insurance coverage? | |
| Will this item require any form of licensing? | |
| Will this item require on-going maintenance? Please describe the maintenance required along with an estimate for these costs? | |
| How will this item be funded when the grant ends? | |
| What is the overall budgetary impact? (i.e. revenue generation, expense reduction, etc.) | Receiving this Grant will reduce budget expenses because we will not need to budget the purchase of these suits |
| Please identify any additional equipment needed/required (now or in the future) should the grant/asset is awarded. | None |
| What is the cost and frequency to maintain/update the additional equipment? | None |
| What is the impact of this grant application on other internal/county departments? | None |
| If yes, what is the estimate of that license fee? | |
| If yes, what is the estimate of insurance coverage? | |
| Will a replacement be requested from general funds when useful life has been exhausted? (OR) | Yes |
| ID | 4 |
| Attachments | False |
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| Created By | Michael Wofford |
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