From: noreply@civicplus.com

Sent: Friday, June 24, 2022 7:22 AM

To: Ruiz, Sy

**Subject:** Online Form Submittal: Yakima County ARPA Funds Application

# Yakima County ARPA Funds Application

2022 Yakima County ARPA Funds Application

Yakima County is accepting applications for American Rescue Plan Act (ARPA) Funding.

To be considered for funding, the individual/organization's (hereafter "applicant") project must align with both a project category as set forth by Yakima County and an expenditure category as set forth by the U.S. Department of the Treasury.

(Section Break)

#### Español

Puede cambiar el idioma de este formulario navegando a la esquina inferior derecha de la pantalla.

Haz clic izquierdo en "seleccionar idioma".

(Section Break)

During this application you will have the ability to save your progress so that you may continue at another time. Please be sure to save your progress. You can do so by clicking the "Save Progress" button located at the top of this form.

(Section Break)

Throughout this application, there are several forms that need to be downloaded and saved to your computer. These forms will need to be downloaded, filled out, saved to your computer, and then attached at the bottom of this application prior to submitting.

Please be sure to download, fill out, and save the following forms to your computer:

w-9 Form (if applying on behalf of a business or nonprofit organization)

### ARPA Project Budget Form

### Please attach these forms to this application prior to submitting.

| Requesting Entity Name | City of Yakima                                     |
|------------------------|----------------------------------------------------|
| Date                   | 6/15/2022                                          |
| Project Name           | Radio System Upgrade at SunComm 911 Communications |

## Yakima County Project Categories

Examples listed below are general in nature, intended to convey a broad illustration of corresponding projects. Please review the following project categories. By selecting yes or no, please indicate which category your project best aligns with.

| Supporting Recovery                                | Yes                               |
|----------------------------------------------------|-----------------------------------|
| Reconnecting Community                             | No                                |
| Building Resiliency                                | No                                |
| Department of the Treasury<br>Expenditure Category | 1.12 Other Public Health Services |

#### Checklist

This checklist is provided as a tool to assist you in the completion of your application. Remember, late and/or incomplete applications will not be accepted. If you have questions regarding your application, please contact Craig Warner at (509) 574-1313 or craig.warner@co.yakima.wa.us. (Check all boxes after reading):

| Yakima County ARPA funds will be distributed on a reimbursable basis.                                         | Yes |
|---------------------------------------------------------------------------------------------------------------|-----|
| Applicant's household, organization, and/or clients are located within the County limits of Yakima County?    | Yes |
| Does the proposed project<br>meet at least one of the<br>Yakima County Project<br>Categories and at least one | Yes |

| of the Federal Expenditure categories detailed above?                                                                                                                        |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| Applications will only be accepted electronically through the application process.                                                                                           | Yes                                                  |
| If applying on behalf of a business or nonprofit organization, did you attach a completed W-9 form to your application? A fillable W-9 form is available below for download. | Yes                                                  |
| Upload your completed W-9 Form here in PDF or JPG.                                                                                                                           | COY-W-9.pdf                                          |
| I have downloaded, filled out, and attached the required ARPA Project Budget form to this application before submission.                                                     | Yes                                                  |
| University of the state of                                                                                                                                                   |                                                      |
| Upload your completed<br>ARPA Project Budget Form<br>here in PDF or JPG.                                                                                                     | ARPA Project Budget Form_202203282055430396.pdf      |
| ARPA Project Budget Form                                                                                                                                                     | ARPA Project Budget Form_202203282055430396.pdf  Yes |

individually or in a
corporate capacity – and/or
the Yakima County
community.

I understand a project Yes
wrap-up report is required
upon completion of project.

Did you complete the Yes
Categorization questions
above, read and agree to all
Certification statements
below, and complete this
checklist?

(Section Break)

### SUBMISSION DEADLINE

Friday, June 24th, 2022

4:30 p.m.

Completed applications must be filed electronically and received by the date and time specified. Applications must be electronically filed.

Applicant Information (Business or Nonprofit Organization)

If applying on behalf of an individual/household, please skip to **Application Information** (Individual or Household).

\* All fields marked as such are required fields. Response required for application to be considered complete.

Legal Name of the Applicant (if applicable):

Doing Business As (DBA) Field not completed.

Name (if applicable):

Unified Business Identifier (UBI) Number (if applicable):

Applicant Street Address: 129 North Second Street

City Yakima

| State                                                | WA                          |
|------------------------------------------------------|-----------------------------|
| Zip Code                                             | 98901                       |
| Applicant Mailing Address (if different from above): | 129 North Second Street     |
| City                                                 | Yakima                      |
| State                                                | WA                          |
| Zip Code                                             | 98901                       |
| Applicant Website (Please enter "N/A" if none):      | https://www.yakimawa.gov/   |
| Applicant Name:                                      | Sy Ruiz                     |
| Applicant Title:                                     | Grant Writer                |
| Applicant Phone Number:                              | 5095756048                  |
| Applicant Email Address:                             | sy.ruiz@yakimawa.gov        |
| Project Contact (if different from applicant):       | Erica McNamara              |
| Project Contact Phone:                               | 5095766340                  |
| Project Contact Email:                               | Erica.McNamara@yakimawa.gov |
|                                                      | (Section Break)             |
| Applicant Information (Individual or Household)      |                             |
| Applicant Street Address:                            | 129 North Second Street     |
| City:                                                | Yakima                      |
| State:                                               | WA                          |
| Zip Code:                                            | 98901                       |
| Applicant Mailing Address (if different from above): | Field not completed.        |
| City:                                                | Field not completed.        |
| State:                                               | Field not completed.        |
| Zip Code:                                            | Field not completed.        |

| Applicant Phone:                                                                                                                    | 5095756048                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Applicant Email:                                                                                                                    | sy.ruiz@yakimawa.gov                                                                                                                                                                                                                                                                                                                                                                                                               |
| Applicant Name:                                                                                                                     | Sy Ruiz                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Project Contact (if different from applicant):                                                                                      | Field not completed.                                                                                                                                                                                                                                                                                                                                                                                                               |
| Project Contact Phone:                                                                                                              | Field not completed.                                                                                                                                                                                                                                                                                                                                                                                                               |
| Project Contact Email:                                                                                                              | Field not completed.                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                     | (Section Break)                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Project Evaluation                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Please select the eligible use category that fits your needs:                                                                       | Public Safety                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Describe how the applicant will use ARPA funds, if awarded:                                                                         | ARPA funds will be utilized to install Conventional Channel Gateway's (CCGW) into the radio system at SunComm 911 Communications. Currently the radios are at capacity for frequencies. The new equipment would provide the foundational technology to create additional space for radio frequencies, allowing SunComm to be the back-up center for all public safety agencies throughout the County in the event of an emergency. |
| Briefly describe the applicant's qualifications to administer the award and produce the project:                                    | The City of Yakima maintains all required policies and procedures that address internal controls, record keeping, accounting, payment and audit requirements. Our capacity to administer the award is illustrated throughout the various state and federal grants the City has received and properly administered to produced project outcomes.                                                                                    |
| Briefly describe the applicant's capacity to produce this project:                                                                  | Erica McNamara will lead the implementation of this project. Erica is the Public Safety Communications Manager for SunComm and manages 911 operations Countywide. She also manages other technology upgrades within the Center including radio enhancements. Erica's expertise in 911 operations will play a critical role in her ability to administer the award and produce expected project outcomes.                           |
| How does this project<br>support at least one of the<br>Yakima County's Project<br>Categories: Supporting<br>Recovery, Reconnecting | Emergency services are critical to supporting recovery. This grant request will be an investment towards emergency response capabilities that will increase effectiveness and interoperability. Currently, all public safety agencies throughout the County are on the same CAD system. The radio system                                                                                                                           |

| Community, or Building Resiliency?                                                                                                 | upgrade will further allow other County centers to utilize the radios at SunComm, so they can continue providing emergency services if their center was shut down due to catastrophe or pandemic.                                                                                                                                                                                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| How does this project specifically support the Federal Expenditure category identified above in your application?                  | This project will support the Federal Expenditure category identified above, by enhancing public health and safety services that are being provided to City and County community members. The new radio upgrade will help SunComm provide backup services to the entire County in case of an emergency. Specifically, it will allow them to take over other agency's emergency calls to ensure all community member's emergency needs are being answered during a potential catastrophe.                       |
| Please indicate how much, if any, other COVID-relief funding your organization has received and what it was used for:              | The City of Yakima has not received any COVID-relief funding for the proposed project.                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Please indicate any other COVID-related relief that you have applied for or will be applying for that you are awaiting a response. | The City of Yakima has not applied for other COVID-related relief for this specific project. The City is prioritizing the Yakima County ARPA Funds grant application due to the wide-ranging impact it will have amongst City and County residents.                                                                                                                                                                                                                                                            |
|                                                                                                                                    | (Section Break)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Demonstration of Need                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Is this project included in an adopted City/County plan or another documented community need?                                      | This project is not included in an adopted City/County plan, but it's extremely critical to SunComm's ability to manage the public safety needs for the entire Yakima County.                                                                                                                                                                                                                                                                                                                                  |
| Briefly describe the need of<br>the Yakima community that<br>this project addresses:                                               | Currently, the public safety communication centers in Yakima County do not have an interlocal agreement, nor the technology in place to be able to utilize a back-up center that can support the entire County. Not one center has the capacity to manage the public safety needs of the entire County due to the limited radio resources. The new radio technology would add each public safety agency's frequency to SunComm's radio consoles and allow them to take over for short or long periods of time. |
| Community Support and Pa                                                                                                           | artnerships                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Has the applicant secured partnerships within the Yakima County community                                                          | General discussions have started with Yakima County Sheriff and Lower Valley dispatch centers to establish back-up procedures in the event of an emergency. These conversations                                                                                                                                                                                                                                                                                                                                |

| to achieve the project? Briefly describe such partnerships and list community and/or business partners.                                                               | have led to the proposed grant request that will enhance SunComm's ability to provide emergency services throughout the County in the event of large catastrophe.                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Financial Support                                                                                                                                                     |                                                                                                                                                                                                                                        |
| Briefly describe non-County<br>funding sources that will<br>provide financial support to<br>this project, if any:                                                     | None at this moment.                                                                                                                                                                                                                   |
| Has the applicant applied for other Federal, State or local funding? If so, describe the source(s) and amount(s) applied for, and any awards received:                | The City has not applied for other Federal, State, or local funding. We are prioritizing the Yakima County ARPA grant as a funding source due to the project's immediate impact it will have on the safety on Yakima County residents. |
| List any other funding sources (e.g. fees, donations, grants) the applicant has received or is pursuing to support the project:                                       | SunComm 911 Communications has not received any additional funding for this project.                                                                                                                                                   |
| Will the project be complete with requested funds?                                                                                                                    | The requested grant funds will complete the project.                                                                                                                                                                                   |
| Can the project be completed with an award of partial funding? If so, briefly describe how the project will be adapted if partial funding is awarded:                 | A majority of the proposed project costs are being largely funded internally. The requested grant dollars will address the remaining funding gap that is still needed to help this project become a reality.                           |
| How will the applicant support the project after ARP funds are no longer available?:                                                                                  | This project will not have any recurring annual costs.                                                                                                                                                                                 |
| Has your organization been made ineligible to receive federal assistance due to debarment, suspension, or by voluntary exclusion for lower tier covered transactions? | No                                                                                                                                                                                                                                     |

### **Project Budget**

Please provide an attached line-item detailed budget (including whether your various match items will be cash or in-kind) for the project in the attachment section at the bottom of this application.

This form is available for download <u>here</u>

For an example of a line-item detailed budget see example image below:

If you have not already, please upload your completed ARPA Project Budget Form here in PDF or JPG.

ARPA Project Budget Form\_202203282055430396\_1.pdf

#### **Budget Narrative**

In the space below, please include any information which you feel may provide useful background on your proposed project budget, such as source and rate at which matching labor costs are calculated, etc.

SunComm 911 Communications is currently working on a full console upgrade which has an estimate cost of \$420,000. The requested \$48,588 is the remaining funding gap needed to complete the overall console upgrade. The requested grant dollars will fund the foundational technology needed to expand SunComm's radio channel list.

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#### Certification

By checking "Agree" or "Disagree" on this certification, I understand and affirm that:

Yakima County ARPA awards will be distributed on a reimbursement basis. Yakima County will only reimburse those costs actually incurred and only after the expense is incurred, paid for, and a signed Request for Reimbursement form (or other form acceptable to the County) has been submitted to the County,

Agree

including copies of the invoices and payment documents.
Purchases/expenses made prior to contract execution are not eligible.

Business/nonprofit applicants, or an identified partner, must have a **Washington State Business** License or a documented 501(c)3 or (c)6 designation. Such status is required to be eligible for receipt of ARPA funds. I understand it may take 30-60 days from the date of County Commissioner approval for a contract to be fully executed, and that I cannot expend monies on reimbursable expenses until that time.

Agree

Applicants may apply for multiple projects, but only one application per project.

Agree

If awarded, funds will be used only for purposes described in this application. I understand that any award is a one-time award which does not create an obligation or guarantee of continued funding by the Yakima County, and the use of funds is subject to audit by the Washington State Auditor.

Agree

If awarded, I or my organization intends to enter into a services contract with the Yakima County, provide liability insurance and additional insured endorsement documentation as may be

Agree

required for the duration of the contract naming Yakima County as an additional insured and in an amount determined by the County.

I have reviewed, and if awarded funds, will abide by federal and Yakima County procurement policies.

Agree

Awards will be determined by Yakima County in its sole discretion. Applications may be awarded for the full or a partial amount of the total requested, or declined. If not awarded the full requested amount, applicant can decline the award; if not declined, applicant will provide additional information of how a partial award will be expended.

Agree

I certify that I have the legal authority of the individual or organization represented herein to submit this request for funding on its/their behalf, and I further certify that the information submitted is true and correct to the best of my knowledge. I understand that Yakima County will rely on the accuracy of the submittals and certifications made in conjunction with this application. Any misrepresentation of inaccurate information may result in a repayment of funds.

Agree

In submitting this application, I swear under penalty of perjury under the laws of the State of Washington that the foregoing information contained in this application is true and correct to the best of my knowledge and belief.

| First and Last Name                                                                                                                                                                                                                                                                                  | Sy Ruiz              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Title                                                                                                                                                                                                                                                                                                | Grant Writer         |
| Date                                                                                                                                                                                                                                                                                                 | 6/24/2022            |
| Please attach any supporting materials that would assist us in assessing your application (pre-COVID or COVID); financial statements, operational metrics, key invoices/quotes, a detailed list for proposed use of funds, project plans for water, sewer or broadband infrastructure projects, etc. | Field not completed. |

PLEASE NOTE: The maximum file size limit for attachments is 25MB. If your file(s) exceed this size, please compress the files (by using a file compression software, such as WinZip) prior to attaching them to this form.

Email not displaying correctly? View it in your browser.