| | , Awaru Number: Er | 1W-2013-PU-00094-S01 | | | |
|------------------------------------|-----------------------------|-----------------------|-------------------------|-------------|--|
| Program Name: | Port Security Grant Program | | Total Cost Approved: | \$80,000.00 | |
| Year: | 2013 | | Federal Share: | \$60,000.00 | |
| Project Period of Performance: | 09/01/2013 to 08/31/2015 | | Applicant Share: | \$20,000.00 | |
| View: Application D | etails | | | | |
| | | | | | |
| Overview | | | | | |
| Overview Submission Type | | Preapplication | | | |
| | | Preapplication New | | | |

| City of | Key West Port, Awa | rd Number: | EMW-2013-PU- | -00094-S0 | 1 | | | |
|-------------------|---|--|---|-----------------|-----------------------------|-------------------------------------|----------|----------------|
| Progra | m Name: Por | Security Grar | nt Program | | Total Cost Approved: | \$80,000.00 | | |
| Year: | 201 | 2013 | | | Federal Share: | \$60,000.00 | | |
| | t Period of 09/ mance: | 01/2013 to 08 | /31/2015 | | Applicant Shar | e: \$20,000.00 | | |
| View | : Application Details | | | | | | | |
| | mary contact and se designated to sign a | | | this applic | cation is shown below. Also | Contact Information | who is t | Go he |
| erson (| | | | this applic | cation is shown below. Also | | who is t | he |
| erson (| designated to sign a | nd submit th Signing | e application. | | | b shown is the authorizing official | who is t | |
| erson (Select | designated to sign a | nd submit th Signing Authority No | e application. Authorizing Official | Name Carolyn | Title | Address | who is t | Action View |

| | , Award Number: EMW-2013-PU-0 | 00094-S01 | |
|--|------------------------------------|--|----------------------------|
| Program Name: | Port Security Grant Program | Total Cost Approved: | \$80,000.00 |
| Year: | 2013 | Federal Share | \$60,000.00 |
| Project Period of Performance: | 09/01/2013 to 08/31/2015 | Applicant Sha | re: \$20,000.00 |
| View: Application [| Details | | |
| | | | |
| | | | Applicant Information 🔽 Go |
| Please provide the fol | lowing information about your orag | anization and press the Save and C | |
| | | anization and press the Save and C | |
| lote: Fields marked v | vith an * are required. | | |
| Organization Inform | ation | | |
| Organization Name: | | City of Key West Port | |
| Employer Identificati | on Number | 59-6000346 | |
| | EIN with another organization? | No | |
| • • | he name of the entity with whom | | |
| ou share an EIN: | · | | |
| | nber of your Organization | 07-986-4898 | |
| Applicant Type: | | Eligible Port Area | |
| Other Applicant Type | 9: | | |
| Headquarters or Ma | in Station Physical Address | | |
| Address1: | | 3132 Flagler Avenue | |
| Address2: | | | |
| | | Key West | |
| City: | | Florida | |
| City: State: | | | |
| - | | 33040 | |
| State: | | | |
| State: Zip: | ddress: | | |
| State: Zip: Mailing Address | ddress: | 33040 | |
| State: Zip: Mailing Address Same As Physical A | ddress: | 33040 Yes | |
| State: Zip: Mailing Address Same As Physical A Address1: | ddress: | 33040 Yes | |
| State: Zip: Mailing Address Same As Physical A Address1: Address2: | ddress: | 33040 Yes 3132 Flagler Avenue | |
| State: Zip: Mailing Address Same As Physical A Address1: Address2: City: | ddress: | 33040 Yes 3132 Flagler Avenue Key West | |
| State: Zip: Mailing Address Same As Physical A Address1: Address2: City: State: | | 33040 Yes 3132 Flagler Avenue Key West Florida | |
| State: Zip: Mailing Address Same As Physical A Address1: Address2: City: State: Zip: Additional Information | | 33040 Yes 3132 Flagler Avenue Key West Florida | |

| City of Key West Po | rt, Award Number: EMW-2013-PU | -00094-S01 | | | | | |
|---|---|---|--|--|----------------------|--------------|-----|
| Program Name: | Port Security Grant Program | | otal Cost Approved: | \$80,000.00 | | | |
| Year: | 2013 | F | ederal Share: | \$60,000.00 | | | |
| Project Period of Performance: | 09/01/2013 to 08/31/2015 | Ą | Applicant Share: | \$20,000.00 | | | |
| View: Application | Details | | | | | | |
| · | ollowing information and press the | Save and Continue but | tton below. | | Project | v | Go |
| | | Construction of Port 3 at the Port of Key We This dock processes this facility per year. | est, the busiest in | ternational po | ort-of-call in the l | United State | es. |
| Project Information Descriptive Title of Areas Affected by F | n | at the Port of Key We | est, the busiest in s between 175,00 | ternational po 0 and 190,00 | ort-of-call in the l | United State | es. |
| Project Information Descriptive Title of Areas Affected by F | n Applicant Project: | at the Port of Key We This dock processes this facility per year. | est, the busiest in s between 175,00 onroe County, Flo | ternational pc 0 and 190,00 rida | ort-of-call in the l | United State | es. |
| Project Information Descriptive Title of Areas Affected by F etc.) | n Applicant Project: Project (Cities, Counties, States, | at the Port of Key We This dock processes this facility per year. City of Key West, Mo | est, the busiest in s between 175,00 onroe County, Flo | ternational pc 0 and 190,00 rida | ort-of-call in the l | United State | es. |

| | t, Award Number: EMW-2013-PL | J-00094-S01 | | | |
|--|---|--|-------------------------|-----------------|----|
| Program Name: | Port Security Grant Program | | Total Cost Approved: | \$80,000.00 | |
| Year: | 2013 | | Federal Share: | \$60,000.00 | |
| Project Period of Performance: | 09/01/2013 to 08/31/2015 | | Applicant Share: | \$20,000.00 | |
| View: Application I | Details | | | | |
| | | | | | |
| | | | | Budget 🗸 | Go |
| lote: Fields marked v Budget Object Clas | | | | | |
| a. Personnel 😰 | | | | | |
| b. Fringe Benefits 👔 | 2 | | | | |
| c. Travel 🕐 | | | | | |
| d. Equipment 🕐 | | 61,920 | | | |
| e. Supplies 😰 | | | | | |
| f. Contractual 😰 | | | | | |
| g. Construction 🕐 | | 18,080 | | | |
| h. Other 🕐 | | | | | |
| i. Indirect Charges | 2 | | | | |
| Total Budget | | 80,000 | | | |
| Federal and Applica | ant Share (These values will u | pdate on "Save" o | or "Save and Continue | e"). | |
| Federal Share Amou | unt | 60,000 | | | |
| | | 20,000 | | | |
| Applicant Share | a (9/) | 75 | | | |
| | y (%) | 75 | | | |
| Federal Rate Sharin | g (%) rces (Please ensure combined r | | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin | | | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin Non-Federal Resou | | non federal resource | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin Non-Federal Resou a. Applicant | | 20,000 | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin Non-Federal Resou a. Applicant b. State c. Local d. Other Sources | | 20,000 0 0 0 0 0 | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin Non-Federal Resou a. Applicant b. State c. Local | | 20,000 0 0 | ces meet your cost sha | re requirement) | |
| Federal Rate Sharin Non-Federal Resou a. Applicant b. State c. Local d. Other Sources | | 20,000 0 0 0 0 0 | ces meet your cost sha | re requirement) | |

PSPG Detailed Budget Worksheet and Narrative - Port Security Building

D. Equipment. \$61,920

Purchase of an 11'6" x 24' prefab security building built to Florida State Code with DCA State Label manufactured to wind loads of energy codes of Key West, Florida. The required location of this structure mandates that it most be moveable and removed before anticipated storm events. The existing modular unit was placed in 2003 and has reached the end of its useful life, it cannot be moved without danger of collapse. Additionally, it is not large enough for the required security contingent and has no restroom. Please see attached cost estimate.

G. Construction (minor) \$18,080

- 11'6" x 24" concrete slab with rebar \$14,080
- Utility hookups (electricity, water, sewer) \$4,000

Labor to be provided by City of Key West employees.

PAR-KUT INTERNATIONAL, INC.

40961 Production Drive • Harrison Twp,. Michigan 48045-1351 Telephone: (586) 468-2947 • Fax: (586) 463-6059 www.parkut.com e-mail: sales@parkut.com Owned and operated by the Duemling family since 1954



December 17, 2012

CITY of KEY WEST ATT : Jim Fitton RE: QUOTE- Prefab Guard House

11' 6" x 24'0" x 8'8" High (interior size is 11' wide by 23'6" long) Prefab Guard House Including:

| BUILT TO FLORIDA STATE CODE w | ith DCA State Label - manufac | tured to the Wind Loads and |
|---|------------------------------------|-----------------------------------|
| Energy Codes in Key West, FL - includes | | |
| facility by a FL Approved Third Party be | fore the Label is placed on the | structure |
| Welded Galvanized Steel Construction - | shipped fully assembled , excep | t the plumbing which is by others |
| on-site, shipped on a flat bed truck | | 1 8 |
| Flat Roof Design - slight pitch to roof dra | in pipes | |
| 3" Roof overhangs on all sides | 6" Vertical Fascia | 4" Base |
| ADA Compliant | FOUR- Roof Lift Eyes | 7'6" Ceiling height |
| FOUR- Exterior Anchor Clips (anchor bo | | 00 |
| Floor is 12 Ga galvanized steel treadplate | system | |
| 14 Ga steel outer walls, ceiling and roof | 18 Ga steel inner v | valls |
| Painted in One Color with Premium Dup | ont Gloss IMRON Polyuretha | ane Paint |
| | | 6 in the floor (includes a steel |
| bottom pan) | | |
| Special #2 Sunglass, Low E, dark gray tir | nted, fixed, insulated, glass, lar | ninated to HURRICANE RATED |
| GLASS, 40" high, in three walls,(none in | the rear 24' wall) with steel fra | ames (painted to match the booth |
| color)- NOTE- The dark gray tint is requi | red to pass the FL COMCHEC | K Energy Code which we have |
| already completed- (we would rather use | the lighter tint but it will NOT | pass the FL Code) |
| ONE- 11'6" long painted steel counter, a | | drawer |
| ONE- 6' long painted steel counter nex | t to the bathroom | |
| | | |
| ADA HALF BATH Including: Lav,wa | ter closet w./seat and hot water | heater shipped loose (ALL |
| PLUMBING, SURFACE MOUNTED, E | BY OTHERS on-site) ; Mirror; | Stainless steel grab bars, |
| Fluorescent light; Fiberglass backsplash; | TP holder; Paper towel dispens | er; Exhaust fan; Coat hook; |
| Hinged door w/lock; Holes in steel floor i | for pipes; No HVAC in bath; G | FI outlet |

TWO- 12000 BTU,GE Zoneline, 220v, thru the wall, HVAC Units ,with wall thermostats and the FL required Exterior Impact Shroud

Floor access hole for service 3" Thick walls instead of std 2"

20 Space single phase panel with 100A Main breaker

All wire in EMT, in the walls-no surface wires

SIX- Duplex outlets (115V)

FOUR- 2LT32W, surface mounted, fluorescent light with a wall switch

FOUR- Rough-in empty conduits, in the walls, from wall j-boxes to the floor service hole location for Data or Phone-eliminates surface wires

ONE- 36" Wide, top-hung, commercial steel insulated sliding door, with half fixed glass and a hook bolt locking system

PAGE TWO

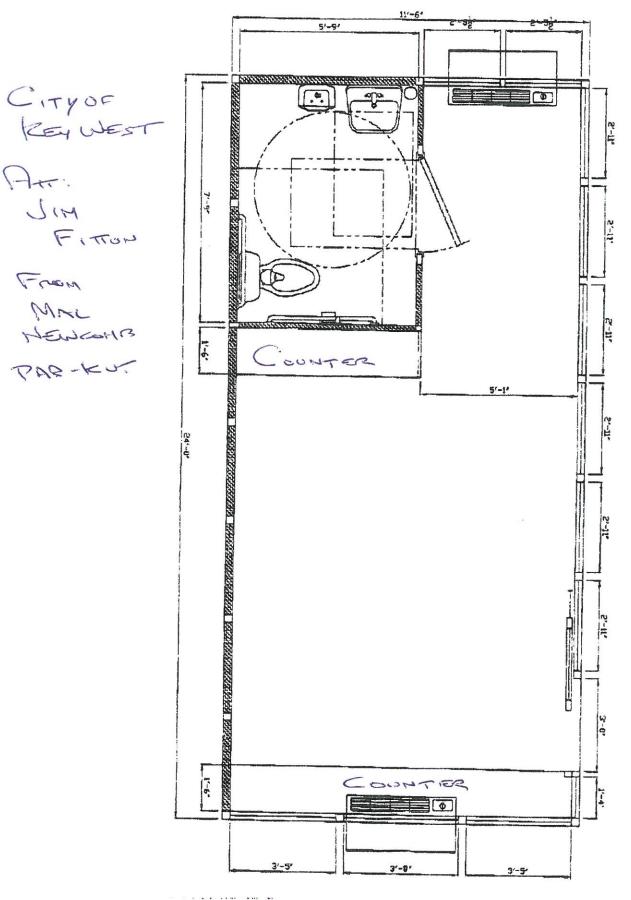
PRICE: \$55920.00 plus \$6000.00 Freight (WIDE LOAD- ship as a 12' wide load), plus Florida Sales Tax (or exempt certificate)

Payment terms: NET 30 Days Delivery 12-13 weeks, AFTER shop drawing approval-subject to change NO ON-SITE WORK INCLUDED-Unloaded by others Prices are valid for 45 days Purchaser is responsible for all on-site work

Please call me at 813-641-2900 if you need more information. I am faxing you a floor plan showing this basic layout. If the dark tint, which is difficult to see out at night, is a problem we may be able to use a lighter tint if we increase the roof overhangs and redesign the roof structure. This would increase the cost of the booth and be a 14' Wide Load, that would increase the freight cost, plus we are not sure it would still pass the FL Energy Code. There are numerous options that we could also include such as exterior lighting, transaction windows, another door, second paint colors, acoustical staple up ceiling, etc

Very truly yours,

Mal Newcomb Par-Kut International



FY 2013 PORT SECURITY GRANT PROGRAM (PSGP) Investment Justification Template

| Investment Heading | | |
|------------------------|---------------------------------|--|
| Port Area | City of Key West | |
| State | Florida | |
| Applicant Organization | City of Key West | |
| Investment Name | Key West Port Security Building | |
| Investment Amount | \$80,000 | |

I. Background

Note: This section only needs to be completed once per application, regardless of the number of Investments proposed. The information in this section provides background and context for the Investment(s) requested, but does not represent the evaluation criteria used by DHS for rating individual Investment proposals.

| I. Provide an overview | of the port area, MTSA regulated facility, or MTSA regulated vessel |
|------------------------|---|
| Response Type | Narrative |
| Page Limit | Not to exceed 1 page |
| Response Instructions | Area of Operations: Identify COTP Zone Identify eligible port area |
| | Identify exact location of project site (i.e., physical address of facility being enhanced) Identify who the infrastructure (project site) is owned or operated by, if not by your own organization Point(s) of contact for organization (include contact information): |
| | Identify the organization's Authorizing Official for entering into grant agreement, including contact information |
| | Identify the organization's primary point of contact for management of the project(s) |
| | Ownership or Operation: |
| | Identify whether the applicant is a private entity or a State or local agency |
| | Role in providing layered protection of regulated entities (applicable to State or local agencies only): |
| Martin and States | Describe your organization's specific roles, responsibilities and activities in delivering layered protection |
| | Important features: |
| | Describe any operational issues you deem important to the consideration of your application (e.g., interrelationship of your operations with other eligible high-risk ports, etc.) |
| | Ferry systems required data: |
| | Infrastructure |
| and the second second | Ridership data |
| | Number of passenger miles |
| | Number of vehicles per vessel, if any |
| | Types of service and other important features |
| | System map |
| | Geographical borders of the system and the cities and counties served |

| | Other sources of funding being leveraged for security enhancements |
|----------|---|
| Response | Although Key West Harbor is actually a port of call rather than a shipping port, it is the Southernmost gateway to the United States and plays host to nearly 2.5 million visitors annually. The city's long maritime history is founded in its port. Though many travelers arrive by other means in this modern era, the cruise industry delivers thousands of daily travelers to the city. In addition, the port facilitates the connection to other Florida cities through its ferry terminal. This heavy traffic to the small island city at the end of the nation is a challenge to the city and its police department, which must help maintain homeland security, personal safety of our visitors, and the famed laid-back atmosphere that Key West visitors expect. |
| | The project proposed is located at the U.S. Navy's Outer Mole Pier located at latitude 24 degrees, 32 minutes, 56 seconds north and longitude 081 degrees, 48 minutes, 34 seconds west. The City of Key West has a lease with the U.S. Navy for mixed and joint use of the Outer Mole for Navy and cruise ships. Mixed use and joint use is typical of deep-water berths. The military is an important partner and has priority berthing at the Outer Mole Pier. |
| | Bob Vitas, City Manager is the Authorizing Official for the City of Key West and he can be reached at 3132 Flagler Avenue, Key West, phone number (305) 809-3888. The City's Senior Grant Administrator is Carolyn Sheldon, who can be reached at 350-809-3741. The City of Key West's Director of Building has reviewed and |
| | approved the proposed project and his letter is attached. The total estimate cost of the Key West Port Security Initiative is \$80,000 of which the City of Key West will contribute \$20,000. The federal grant request is \$60,000. |
| | |

II. Strategic and Program Priorities

| II.A. Provide a brief abstract of the Investment list just ONE investment. | | | |
|--|--|--|--|
| Response Type | Narrative | | |
| Page Limit | Not to exceed 1/2 page | | |
| Response Instructions | Provide a succinct statement summarizing this Investment | | |
| Response | The City of Key West desires to improve our Maritime Situational | | |

| Awareness (MSA) by improving and enhancing our ability to monitor and respond to Transportation Security Incidents (TSI) in the City's port facilities. The below request is designed to support the Florida Keys Area Maritime Security Plan (AMSP) and will result in a more cohesive response to potential threats to the Port of Key West. |
|--|
| The security building at Navy's Outer Mole provides security and screening for a dual use pier that serves over 190,000 passenger and crew a year at an international port of call. It has reached the end of its useful life and is inadequate for the number of personnel in the required security contingent. |

| PRMP for Group I a Response Type | Narrative |
|-------------------------------------|--|
| Page Limit | Not to exceed 1/2 page |
| Response Instructions | Describe how, and the extent to which, the investment addresses: Enhancement of Maritime Domain Awareness Enhancement of IED and CBRNE prevention, protection, response and recovery capabilities Port resilience and recovery capabilities Training and exercises Efforts supporting the implementation of TWIC Describe how the investment builds or sustains one or more NPG core capabilities |
| Response | The project will enhance access control at one of the nation's largest international ports-of-call. In addition, the project will enhance TWIC implementation in Key West. The project will support NPG by providing improved access control and TWIC implementation at the Port of Key West. The need to protect and deter threats at this facility has been documented and an adequate facility for security personal and for electronic screening is considered to be an effective posture to accomplish these objectives. |

III. Impact

| III.A. Describe how the project offers the highest risk reduction potential at the least cost. | | | |
|--|--|--|--|
| Response Type | Narrative | | |
| Page Limit | Not to exceed 1/2 page | | |
| Response Instructions | Discuss how the project will reduce risk in a cost effective manner Discuss how this investment will reduce risk (e.g., reduce vulnerabilities or mitigate the consequences of an event) by addressing the needs and priorities identified in earlier analysis and review | | |
| Response | The City currently utilizes a security building that is too small for the | | |

| required contingent of security personnel and is at the end of its useful life (10 years). It houses the electronic screening equipment purchased with the assistance of a PSPG grant in 2008. It also hosts over 190,000 visitors and crew for screening annually. A permanent structure is not allowed by hurricane codes,, and given the tropical climate a tent is not adequate for personnel, persons being screened nor screening |
|--|
| equipment. A modular building is the most cost effective option, with a ten year life expectancy yields an annual investment of \$8000. |

| III.B. Describe current capabilities similar to this Investment | | | |
|---|---|--|--|
| Response Type | Narrative | | |
| Page Limit | Not to exceed 1/2 page | | |
| Response Instructions | Describe how many agencies within the port have existing equipment that are the same or have similar capacity as the proposed project Include the number of existing capabilities within the port that are identical or equivalent to the proposed project | | |
| Response | N/A | | |

IV. Funding & Implementation Plan

- Complete the IV.A. to identify the amount of funding you are requesting for this investment only
- Funds should be requested by allowable cost categories as identified below
- Applicants must make funding requests that are reasonable and justified by direct linkages to activities outlined in this particular Investment

The following template illustrates how the applicants should indicate the amount of FY 2012 PSGP funding required for the investment and how these funds will be allocated across the cost elements.

| IV.A. Investment Funding Plan | FY 2013 PSGP Request Total | Match | Grand Total |
|---|-------------------------------|----------|-------------|
| Maritime Domain Awareness | \$60,000 | \$20,000 | \$80,000 |
| IED and CBRNE Prevention, Protection, Response and Recovery Capabilities | | | |
| Training | | | |
| Exercises | | | |
| TWIC Implementation | | | |
| Operational Costs | | | |
| M&A | | | |
| Total | \$60,000 | \$20,000 | \$80,000 |

 IV.B. Provide a high-level timeline, milestones and dates, for the implementation of this Investment such as stakeholder engagement, planning, major acquisitions or purchases, training, exercises, and process/policy updates. Up to 10 milestones may be provided.

 Response Type
 Narrative

 Page Limit
 Not to exceed 1 page

 Response Instructions
 • Only include major milestones that are critical to the success of the Investment

 • Milestones are for this discrete Investment – those that are covered by the requested FY 2012 PSGP funds and will be completed over the 24-month grant period starting from the award date, giving consideration for review

| | and approval process up to 12 months (estimate 24 month project period) Milestones should be kept to high-level, major tasks that will need to occur (i.e., Design and development, begin procurement process, site preparations, installation, project completion, etc.) List any relevant information that will be critical to the successful completion of the milestone (such as those examples listed in the question text above) |
|----------|--|
| | Note: Investments will be evaluated on the expected impact on security relative to the amount of the investment (i.e., cost effectiveness). An itemized Budget Detail Worksheet and Budget Narrative must also be completed for this investment. See following section for a sample format |
| Response | September – October 2013 AWARD October– December 2013 Issue RFP January – June 2014 Permitting July – December 2014 Installation of security building |





Director of Building P.O.Box 1409, Key West, FL 33040

May 30, 2013

City of Key West Port and Transit Authority

Attn: Jim Fitton

Re: Modular Security Bldg. on Truman Waterfront

Dear Jim,

The State of Florida has a Modular Building Program administered by the Department of Business and Professional Regulation (DBPR). This program was previously administered by the Department of Community Affairs (DCA) which no longer exists. Modular Units are built by a DBPR Registered Manufacturer who has on-site DBPR licensed modular plans examiners and inspectors regulate the modular fabrication and application of the DBPR Insignia and ID number.

The unit must be built to our weather conditions (180mph ultimate wind-speed). The foundation must be engineered and constructed on site prior to the modular unit delivery. Additional considerations would be if hurricane shutters are required and whether the unit will be dry flood-proofed or elevated above base flood elevation.

Subject to the above qualifications, DBPR Modular Units are routinely issued permits by the City Building Department.

Sincerely,



| Application for Federal Assis | tance SF-424 |
|--|--|
| * 1. Type of Submission: Preapplication Application Changed/Corrected Application | * 2. Type of Application: * If Revision, select appropriate letter(s): New |
| * 3. Date Received: 06/11/2013 | 4. Applicant Identifier: |
| 5a. Federal Entity Identifier: | 5b. Federal Award Identifier: |
| State Use Only: | N |
| 6. Date Received by State: | 7. State Application Identifier: |
| 8. APPLICANT INFORMATION: | |
| * a. Legal Name: City of Key We | est |
| * b. Employer/Taxpayer Identification N 596000346 | Iumber (EIN/TIN): * c. Organizational DUNS: 0798648980000 |
| d. Address: | |
| * Street1: 3132 Flagler Street2: Key West County/Parish: * State: Province: | r Avenue |
| * Country: | USA: UNITED STATES |
| * Zip / Postal Code: 33041-1409 | |
| e. Organizational Unit: | |
| Department Name: | Division Name: |
| f. Name and contact information of | person to be contacted on matters involving this application: |
| Prefix: Mr. Middle Name: | * First Name: Jim |
| Title: Port and Transit Direc | tor |
| Organizational Affiliation: City of Key West | |
| * Telephone Number: (305)809-3 | 795 Fax Number: |
| * Email: jfitton@keywestcity. | com |

| Application for Federal Assistance SF-424 |
|--|
| * 9. Type of Applicant 1: Select Applicant Type: |
| C: City or Township Government |
| Type of Applicant 2: Select Applicant Type: |
| |
| Type of Applicant 3: Select Applicant Type: |
| |
| * Other (specify): |
| |
| * 10. Name of Federal Agency: |
| Department of Homeland Security - FEMA |
| 11. Catalog of Federal Domestic Assistance Number: |
| 97.056 |
| CFDA Title: |
| Port Security Grant Program |
| |
| * 12. Funding Opportunity Number: |
| DHS-13-GPD-056-000-01 |
| * Title: |
| Fiscal Year (FY) 2013 Port Security Grant Program (PSGP) |
| |
| |
| 13. Competition Identification Number: |
| |
| Title: |
| |
| |
| |
| |
| 14. Areas Affected by Project (Cities, Counties, States, etc.): |
| Add Attachment Delete Attachment View Attachment |
| * 15. Descriptive Title of Applicant's Project: |
| Construction of Port Security Building |
| |
| |
| Attach supporting documents as specified in agency instructions. |
| Add Attachments Delete Attachments View Attachments |
| |

1

| Application | for Federal Assistan | ce SF-424 | | | | | |
|---|---|--|--|--|--|--------------------|--|
| 16. Congressi | onal Districts Of: | | | | | | |
| * a. Applicant | FL-026 | | | b. Progra | m/Project FL-026 | б | |
| Attach an additi | ional list of Program/Project | Congressional Distri | cts if needed. | | | | |
| | | | Add Attachme | nt Delete A | ttachment Viev | w Attachment | |
| 17. Proposed | Project: | | | | | | |
| * a. Start Date: | 09/01/2013 | | | * b | b. End Date: 08/31 | /2015 | |
| 18. Estimated | Funding (\$): | | | | | | |
| * a. Federal | | 60,000.00 | | | | | |
| * b. Applicant | | 20,000.00 | | | | | |
| * c. State | | 0.00 | | | | | |
| * d. Local | | 0.00 | | | | | |
| * e. Other | | 0.00 | | | | | |
| * f. Program Ind | come | 0.00 | | | | | |
| * g. TOTAL | | 80,000.00 | | | | | |
| b. Program c. Program * 20. Is the Ap Yes If "Yes", provid 21. *By signin herein are tru comply with a | plication was made availa n is subject to E.O. 12372 n is not covered by E.O. 1 plicant Delinquent On An No de explanation and attach the explanation and attach g this application, I certi le, complete and accura iny resulting terms if I acc criminal, civil, or adminis | but has not been s 2372. y Federal Debt? (fy (1) to the stater te to the best of cept an award. I an | If "Yes," provide e Add Attachmer nents contained in my knowledge. I n aware that any fa | te for review. xplanation in attain t Delete A | achment.) ttachment View fications** and (2) t e required assurance r fraudulent stateme | ces** and agree to | |
| | ertifications and assurance: ions. | s, or an internet site | e where you may o | btain this list, is c | contained in the anno | uncement or agency | |
| | - | | | | |] | |
| Prefix: Middle Name: | Mr. | "FI | rst Name: Jim | | | | |
| * Last Name: | Fitton | | | | | | |
| Suffix: | | | | | | | |
| * Title: Po | ort and Transit Dire | ector | | | | | |
| * Telephone Nu | Imber: (305)809-3795 | | | Fax Number: | | | |
| * Email: jfit | ton@keywestcity.com | | | | | | |
| * Signature of A | Authorized Representative: | Jim Fitton | | * Date Signed | d: 06/11/2013 | | |

| | t, Award Number: EMW-2013-PU-00094-S03 | l | | |
|---|--|-------------------------------|------------------------------------|--|
| Program Name: | Port Security Grant Program | Total Cost Approved: | \$80,000.00 | |
| Year: | 2013 | Federal Share: | \$60,000.00 | |
| Project Period of Performance: | 09/01/2013 to 08/31/2015 | Applicant Share: | \$20,000.00 | |
| View: Application | Details | | | |
| | | | | |
| | | | Assurances and Certifications V Go | |
| Assurances and Ce | complete/Complete link to go to individual f | ornis. When you are infished, | CICK THE SAVE AND CONTINUE DUCTOR. | |
| | ces-Nonconstruction Programs | | Complete | |
| orm 424D, Assuran | ces-Construction Programs | | Complete | |
| SF-GG, Certification | Regarding Lobbying | | Complete | |
| SF-LLL, Disclosure of Lobbying Activities | | | Not Applicable | |
| SF-LLL, Disclosure o | | | | |