OMB Number: 4040-0004 Expiration Date: 12/31/2019

Application for Federal Assistance SF-424						
* 1. Type of Submissi  Preapplication  Application  Changed/Corre	ion: ected Application	⊠ Ne	ee of Application: ew ontinuation evision		Revision, select approportion (Specify):	oriate letter(s):
* 3. Date Received: 05/21/2019		4. Appli	cant Identifier:			
5a. Federal Entity Ide	entifier:			;	5b. Federal Award Ide	entifier:
State Use Only:				1.		
6. Date Received by	State:		7. State Application	Ide	entifier:	
8. APPLICANT INFO	ORMATION:					
* a. Legal Name:	ity of Key Wes	st				
* b. Employer/Taxpay	er Identification Nur	mber (EIN	I/TIN):	Iг	* c. Organizational DU	INS:
d. Address:						
* Street1: Street2: * City:	3132 Flagler	Avenue				
County/Parish:	Key West					
* State:					FL: Florid	da
* Country:					USA: UNITED ST	TATES
* Zip / Postal Code:	33021-4602				0011 0111120 01	
e. Organizational U	Init:				<u></u>	
Department Name:				I	Division Name:	
f. Name and contac	t information of p	erson to	be contacted on m	atte	ers involving this ap	pplication:
Prefix:			* First Nam	e:	David	
Middle Name:						
* Last Name: Bla Suffix:	ck	7				
Title: Police Lie	eutenant, Proj	ect Di	rector			
Organizational Affiliation:						
* Telephone Number: 305-809-1096 Fax Number:						
*Email: dblack@cityofkeywest-fl.gov						

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-19-GPD-056-00-01
*Title:  Fiscal Year (FY) 2019 Port Security Grant Program (PSGP)
Fiscal leaf (F1) 2019 Fold Security Grand Flogram (FSGF)
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:
City of Key West Port Security Enhancement for Police and Fire Departments.
Attach supporting documents as specified in agency instructions.
Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424					
16. Congressional Districts Of:					
* a. Applicant	L-026	* b. Program/Project FL-026			
Attach an additional I	ist of Program/Project Congressional Distric	cts if needed.			
		Add Attachment Delete Attachment View Attachment			
17. Proposed Proje	ct:				
* a. Start Date: 09	/01/2019	* b. End Date: 08/31/2022			
18. Estimated Fund	ling (\$):				
* a. Federal	165,596.25				
* b. Applicant	55,198.75				
* c. State	0.00				
* d. Local	0.00				
* e. Other	0.00				
* f. Program Income	0.00				
* g. TOTAL	220,795.00				
* 19. Is Application	Subject to Review By State Under Exe	cutive Order 12372 Process?			
		ler the Executive Order 12372 Process for review on			
	ubject to E.O. 12372 but has not been s	elected by the State for review.			
c. Program is n	ot covered by E.O. 12372.				
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)					
☐ Yes ☐ No					
	_				
	☑ No planation and attach				
If "Yes", provide ex	planation and attach	Add Attachment Delete Attachment View Attachment			
If "Yes", provide ex  21. *By signing this herein are true, comply with any re	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I am	Add Attachment  Delete Attachment  View Attachment  nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to aware that any false, fictitious, or fraudulent statements or claims may			
If "Yes", provide ex  21. *By signing this herein are true, comply with any re	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r	Add Attachment  Delete Attachment  View Attachment  nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to aware that any false, fictitious, or fraudulent statements or claims may			
If "Yes", provide ex  21. *By signing this herein are true, co comply with any re subject me to crimi  ** I AGREE	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I am inal, civil, or administrative penalties. (	Add Attachment  Delete Attachment  View Attachment  nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to aware that any false, fictitious, or fraudulent statements or claims may			
If "Yes", provide ex  21. *By signing this herein are true, co comply with any re subject me to crimi  ** I AGREE  ** The list of certification in the subject in the subje	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I am inal, civil, or administrative penalties. (	Add Attachment  Delete Attachment  View Attachment  nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to aware that any false, fictitious, or fraudulent statements or claims may U.S. Code, Title 218, Section 1001)			
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If "Yes", provide ex  21. *By signing this herein are true, co comply with any re subject me to criming the subject me to criminal the s	planation and attach  s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I aminal, civil, or administrative penalties. (I actions and assurances, or an internet site entative:	Add Attachment  Delete Attachment  View Attachment  Nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to a aware that any false, fictitious, or fraudulent statements or claims may U.S. Code, Title 218, Section 1001)  where you may obtain this list, is contained in the announcement or agency			
If "Yes", provide ex  21. *By signing this herein are true, comply with any re subject me to crimin ** I AGREE  ** The list of certificate specific instructions.  Authorized Repress  Prefix:  Middle Name:	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I aminal, civil, or administrative penalties. ( ations and assurances, or an internet site entative:  * Fir	Add Attachment  Delete Attachment  View Attachment  Nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to a aware that any false, fictitious, or fraudulent statements or claims may U.S. Code, Title 218, Section 1001)  where you may obtain this list, is contained in the announcement or agency			
If "Yes", provide ex  21. *By signing this herein are true, co comply with any re subject me to crimic ** I AGREE  ** The list of certifics specific instructions.  Authorized Repress  Prefix:  Middle Name:  * Last Name: She:  Suffix:	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I aminal, civil, or administrative penalties. ( ations and assurances, or an internet site entative:  * Fir	Add Attachment  Delete Attachment  View Attachment  Nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to a aware that any false, fictitious, or fraudulent statements or claims may U.S. Code, Title 218, Section 1001)  where you may obtain this list, is contained in the announcement or agency			
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If "Yes", provide ex  21. *By signing this herein are true, co comply with any re subject me to crimic * * I AGREE  ** The list of certifical specific instructions.  Authorized Repress  Prefix:  Middle Name:  * Last Name: She:  Suffix:  * Title: Senio:	planation and attach s application, I certify (1) to the statem omplete and accurate to the best of r sulting terms if I accept an award. I am inal, civil, or administrative penalties. ( ations and assurances, or an internet site entative:  * Fir	Add Attachment  Delete Attachment  View Attachment  Nents contained in the list of certifications** and (2) that the statements my knowledge. I also provide the required assurances** and agree to aware that any false, fictitious, or fraudulent statements or claims may U.S. Code, Title 218, Section 1001)  where you may obtain this list, is contained in the announcement or agency  st Name: Carolyn			

# CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION	
City of Key West	
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Prefix: * First Name: Carolyn	Middle Name:
* Last Name: Sheldon	Suffix:
* Title: Senior Grants Administrator	
*SIGNATURE: Carolyn Sheldon *DATE	E: 05/21/2019

# Skip to main content ND Grants

- <u>Applications</u>
   <u>Manage Applications</u>
- Crants
   Grants Dashboard
   Performance Progress Reports
   Manage Amendments
- Administration
- Organizations
   Request Organization Access
   Review Organization Access Requests
- kwgrants1
   Logout

  - HelpDownload Plug-ins

# **View Application**

- Application Information
- Applicant Information SF-424 Information

- Contacts SF-424A Attachments Certification Regarding Lobbying
- SF-LLL
- SF-424B

# **Application Information**

Application Number

Application Number
EMV-2019-PU-APP-00312
Funding Opportunity Name
Fiscal Year (FY) 2019 Port Security Grant Program (PSGP)
Funding Opportunity Number
DHS-19-GPD-056-00-01

Application Status Submitted

# **Applicant Information**

Legal Name <u>City of Key West Port</u> Type

Type
Others (specify)
Division Name
Department Name
Employer Identification Number (EIN)
59-6000346

59-6000346 Other Organizations that share this EIN DUNS Number 079864898 DUNS+4 0000

Applicant Congressional District Congressional District 18, FL

Physical Address 3132 Flagler Avenue Key West, Florida 33040 UNITED STATES

Mailing Address 3132 Flagler Avenue Key West, Florida 33040 UNITED STATES

# SF-424 Information

### Project Information

Project Title
City of Key West Port Security Enhancement for Police and Fire Departments.
Program/Project Congressional Districts
FL-26
Proposed Start Date

09/01/2019

Proposed End Date 08/31/2022 Areas Affected by Project (Cities, Counties, States, etc.) City of Key West Port

**Total Funding** 

# **Estimated Funding**

**Funding Source** Estimated Funding (\$)

Federal Funding \$165,596.25 **Applicant Funding** \$55,198.75 State Funding \$0.00 Local Funding \$0.00 Other Funding \$0.00 Program Income Funding \$0.00

Is application subject to review by state under the Executive Order 12372 process? Program is not covered by E.O. 12372. Is applicant delinquent on any federal debt? No

\$220,795.00

### **Contacts**

**Contact Name** Email Primary Phone Number Contact Types Signatory Authority Primary Contact Black, David dblack@cityofkeywest-fl.gov 305-809-1096 Authorized Official Secondary Contact Sheldon, Carolyn csheldon@cityofkeywest-fl.gov 3058093741

# SF-424A

# **Budget Information for Non-Construction Programs**

OMB Number 4040-0006 Expiration Date 06/30/2014

Burden Statement

Grant Program Port Security Grant Program CFDA Number

**Budget Object Class** Amount Personnel \$0.00 Fringe Benefits \$0.00 -Travel \$0.00 Equipment \$211,665.00 Supplies \$0.00 Contractual \$0.00 Construction \$0.00 Other \$9,130.00 Total Direct Charges \$220,795.00 **Indirect Charges** \$0.00 Budget Category Total \$220,795.00

Non-Federal Resources Applicant \$55,198.75 State \$0.00 Other \$0.00 Total Non-Federal Resources \$55,198.75

Amount

Program Income \$0.00 Total Budget Amount \$165,596.25 Federal Non-Federal \$55,198.75 Total Project Cost \$220,795.00

Direct Charges Explanation Indirect Charges Explanation

Income

#### Forecasted Cash Needs (Optional)

No Forecasted Cash Needs have been entered for this application

#### Future Funding Periods (Years) (Optional)

No Budget Estimates of Federal Funds Needed for the Balance of the Project have been entered for this application

Remarks

#### SF-424A Budget Information - Non-Construction Programs (4040-0006)

## SF-424A Budget Information - Non-Construction Programs (4040-0006)

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 4040-0006. The time required to complete this information collection is estimated to average 1.8 hours per response, including the time to review instructions, search existing data resources, gater the data needed and complete and review the information collection.

If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Services, OS/OCIO/PRA, 2001ndependence Ave., S.W., Suite 537-H, Washington D.C. 20201, Attention: PRA Reports Clearance Officer.

Agency, Total Responses, Average Burden per response in Hours, Total Burden Hours

- ency, lotal kesponses, Average Burden per response in F

  CNCS, 10, 4, 40

  DOI, 1274, 49/60, 1046

  DOS, 150, 5/60, 13

  EPA, 9098, 1.97, 17905

  SSA, 1400, 30/60, 700

  TREAS, 276, 1, 276

  VA, 184, 15/60, 46

  USDA, 7241, 3, 21723

  DOC, 5685, 20/60, 1895

  DOT, 50, 1.6, 80

  DHS, 150, 2, 300

  HHS, 1510, 2.64, 3998

  Total, 27028, 48022

  48022 hrs. / 27028 = 1.8 total hours per response.



#### **Attachments**

Attached Documents	Title	Description
Form SF424 2 1-V2.1.pdf	Form SF424_2_1-V2.1.pdf	Submitted in Grants.gov
Form GG LobbyingForm- V1.1.pdf	Form GG_LobbyingForm-V1.1.pdf	Submitted in Grants.gov
GrantApplication.xml	GrantApplication.xml	Submitted in Grants.gov
City of Key West Port Security Enhancement for Police and Fire Departments IJ#1.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#1	IJ#1
City of Key West Port Security Enhancement for Police and Fire Departments IJ#2.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#2	IJ#2
City of Key West Port Security Enhancements for Police and Fire Departments Budget #1.docx	City of Key West_Port Security Enhancement for Police and Fire Departments_Budget#1	Budget#1
City of Key West Port Security Enhancements for Police and Fire Departments Budget #2.docx	City of Key West_Port Security Enhancement for Police and Fire Departments_Budget#2	Budget#2

<b>Attached Documents</b>	Title	Description
City of Key West Port Security Enhancement for Police and Fire Departments IJ#1 Cost Estimate #1 3D Laser Scanner Camera.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#1 Cost Estimate #1 3D Laser Scanner	IJ#1 Cost Estimate #1 3D Laser Scanner
City of Key West Port Security Enhancement for Police and Fire Departments IJ#1 Cost Estimate #2 SUAS.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#1 Cost Estimate #2 SUAS.pdf	IJ#1 Cost Estimate #2 SUAS
City of Key West Port Security Enhancement for Police and Fire Departments IJ#2 Cost Estimate #1 Electric for Boat Lift.png	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#2 Cost Estimate #1 Electric for Boat Lift	IJ#2 Cost Estimate #1 Electric for Boat Lift
City of Key West Port Security Enhancement for Police and Fire Departments IJ#2 Cost Estimate #2 Boat Lifts.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#2 Cost Estimate #2 Boat Lift.png	IJ#2 Cost Estimate #2 Boat Lifts
City of Key West Port Security Enhancement for Police and Fire Departments IJ#2 Concept Drawing Boat Lift.pdf	City of Key West_Port Security Enhancement for Police and Fire Departments_IJ#2 Concept Drawing Boat Lift	IJ#2 Concept Drawing Boat Lift

#### **Certification Regarding Lobbying**

Status Date Signed 05/28/2019

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, 'Disclosure of Lobbying Activities,' in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,00 0 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

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If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, 'Disclosure of Lobbying Activities,' in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Applicant's Organization: City of Key West Port Signing Authority Name: Carolyn Sheldon Signature Date: 05/28/2019 Signatory Authority Title: Lieutenant

I, David Black, or my designee am hereby providing my signature for this application as of 05/28/2019

# SF-LLL

#### **Disclosure of Lobbying Activities**

**OMB Number** 0348-0046 Expiration Date 12/31/2013

Burden Statement

Status Sianed **Date Signed** 05/28/2019

Form Not Applicable to Application

### **Reporting Entity Information**

Name

Carolyn Sheldon

Address
1300 White St
Key West, Florida 33040
Congressional District, if known:
FL-026

FE-020 Federal Department/Agency: Federal Emergency Management Agency Federal Program Name/Description: Port Security Grant Program

CDFA Number, if applicable: 97.056

Federal Action Number, if known: Award Amount, if known:

# **Lobbying Registrant Information**

Not Applicable Not Applicable

Address Not Applicable Not Applicable

#### Individual Performing Services Information

Not Applicable Not Applicable

Address Not Applicable

Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Applicant's Organization: City of Key West Port Signing Authority Name: Carolyn Sheldon Signature Date: 05/28/2019 Signatory Authority Title: Lieutenant Telephone No: (305) 809-1096

I, David Black, or my designee am hereby providing my signature for this application as of 05/28/2019

#### SF-424B

#### **Assurances for Non-Construction Programs**

**OMB Number** 4040-0007 **Expiration Date** 06/30/2014

Burden Statement

Status Signed

Date Signed 05/28/2019

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

#### NOTE:

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- 1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- 3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis- Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327- 333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air Almplementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §\$469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

Applicant's Organization: City of Key West Port Signing Authority Name Carolyn Sheldon Signature Date: 05/28/2019 Signatory Authority Title: Lieutenant

I, David Black, or my designee am hereby providing my signature for this application as of 05/28/2019

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