

# THE STATE OF CONNECTICUT

## DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION

DIVISION OF STATEWIDE EMERGENCY TELECOMMUNICATIONS (DSET)

## CAPITAL EXPENSE GRANT APPLICATION (SFY 2024 – 2025)

1111 Country Club Road, Middletown, CT 06457 (860) 685-8080 An equal opportunity employer



## **<u>Capital Expense Grant Application</u> STATUTORY AUTHORITY & DSET POLICIES AND PROCEDURES**

In accordance with the Regulations of Connecticut State Agencies Sec. 28-24-5a & 28-24-10a (Adopted effective July 1, 2020) regional emergency communications centers and funded municipalities with populations in excess of 40,000 may apply for funding from the Capital Expense Fund.

In reference to this grant, capital expenditures shall be defined as any single, non-recurring acquisition in excess of **\$10,000** for durable goods, information technology or related services in a single budget cycle that support "Emergency Telecommunications". Examples of eligible expenses include: architectural services, building materials, restoration services and labor needed to accommodate new equipment in existing buildings; upgrades or equipment replacement and associated labor for radio telecommunications; computer-aided dispatch (CAD) software; technical upgrades; and record management systems, furniture, consoles, and radio tower equipment for emergency communications centers. Funding *will not* be provided for vehicles, real estate, or building purchases.

Funding for capital expenses grants is based on a formula of 20% of the total subsidy for regional emergency telecommunications centers and funded cities. The chief executive officer of the town or city, or the representative board of the regional PSAP, must provide documentation of any available matching funds to the Division.

Requests must be received <u>at least 90 days</u> prior to purchase. If funds are available and the project is approved, the funded municipality or regional center would be the applicant and the direct recipient of the funds. Reimbursements cannot be paid directly to contractors.

The process for submitting grant applications and requesting reimbursement is as follows:

- Submit application with documentation that clearly describes, in detail, the intended purchase.
- Requests **must** be accompanied by a letter of commitment from the organization's board or municipality's chief elected official, indicating funds are committed to <u>fully</u> fund the project.
- Grant applications must include a detailed need statement and project plan including a detailed project description, estimated timelines, and costs.
- Applications are accepted from July 1st to April 30th. Funding for capital expenditures is granted on a State Fiscal Year (SFY) calendar (July 1st -June 30th).
- The grant term shall commence upon written approval from DSET. The State will then issue a Purchase Order (PO).
- Upon completion of the project submit a letter requesting reimbursement, which references the PO number and description of purchase, within 120 days from approval. Exceptions may be made but must be pre-approved by DSET. Include invoices and proof of payment (e.g., cancelled check(s), bank statement for ACH/EFT payments).

Rev. 6/24

State of Connecticut Department of Emergency Services and Public Protection Division of Statewide Emergency Telecommunications

### **Capital Expense Grant Application**

This application must be filled out in its entirety and submitted for approval to the Division of Statewide Emergency Telecommunications (DSET) no less than 90 days prior to the anticipated expenditure. DSET will not honor requests which are not pre-approved.

Multiple requests require separate applications. Purchasing guidelines, as described, must be followed.

**Project Name:** 

**PSAP/RECC** Name:

**Contact Name(s):** 

**Contact Phone Number(s):** 

**Email Address(es):** 

I have read and understand the attached **DSET** Policies and Procedures: Print Name of Authorized Individual:

Signature of Authorized Individual:

Date:

Rev. 6/24

**Instructions:** Type responses in the application and print for signature. Electronic signatures will be accepted. Handwritten applications that are not legible will be rejected. Attach additional pages if necessary.

1. Detailed Description of Project (explain how your project supports emergency telecommunications)

2. Detailed Description of Services or Equipment to be Purchased (indicate the room or site where it will be located and the anticipated life expectancy)

#### 3. Type of Procurement (select one)

Purchases over \$10,000 and under \$50,000 require at least three written quotes, from responsible and qualified sources of supply. Use the space below to describe how your vendor was selected and attach all bids submitted. Documentation must be submitted to DSET prior to the purchase of any capital expense item.

Purchases over \$50,000 require a publicly advertised, sealed bid/RFP. Use the space below to describe how your vendor was selected and attach supporting documents. Documentation must be submitted to DSET prior to the purchase of any capital expense item.

Exceptions may be granted by DSET for purchases made from a State Master Contract or through a Sole Source vendor. Use the space below to request an exception and provide sufficient details to support your request.

**4.** Estimated Costs and Vendor Information (list costs below or attach purchasing documentation (e.g., proposals, quotes, bids)

5. Estimated Timeline for Project Implementation and Completion

### CERTIFICATION

Signatures of the PSAP Director and the Chief Elected Official or authorized Regional Center Board Representative pledging commitment of matching funds, as required by the Regulations of Connecticut State Agencies, Sections 28-24-1a through 28-24-12a.

Printed Name of the Chief Elected Official / RECC Board Representative: Date

Signature of the Chief Elected Official / RECC Board Representative:

Printed Name of the PSAP/RECC Director:

Signature of the PSAP/RECC Director:

You may scan and send an electronic copy by e-mail to the attention of Mark Gorka.

E-mail: mark.gorka@ct.gov OR mail the application to the following address:

The Department of Emergency Services and Public Protection Division of Statewide Emergency Telecommunications 1111 Country Club Road Middletown, CT 06457

#### -- For DSET Staff Review --

Approved:

Not Approved:

Comments:

Reviewed by: Division of Statewide Emergency Telecommunications Date:

Date