FFY 2021 EMPG Subgrant Application

PLICANT INFORMA	TION:					
Town / City / Trib	e:					
DUNS # /roquiro	۵۱.	SAMs Regist	ration Expiration			
DUNS # (require	x):	Date (required):				
DJECT Point of Con	tact (Emergency Ma	nager / Director):				
Name:		, , , , ,				
Title:						
Email:			Phone:			

MEMA Goal that your project f	alls within:							
THIRA/SPR category that your within:	project falls							
Other Source of Gap Identifica	tion:							
Are you purchasing anything t	hat will be ins	talled?						
Are you purchasing any comm	unication equ	ipment?						
Are you purchasing a drone or	drone accesso	ories?						
Are you purchasing sonar equi	pment?							
BUDGET								
What is your Total Eligible Awa	ard Amount?							
Is this a Multiple Community /	Regional Proj	ect?						
		If YES , list o	each con	nmunity and the	ir eligibl	e awar	d amount belo	w:
Town/City/Tribe Name	Award Amount Town/City/Tribe Name				2	Award Amount		
Provide a breakout of your proj	ect's estimate	d costs be	low:					
Description of Expenditure		AEL#		Portable or Installed	Quantity		Total Cos	ts
			TOTAL Estima	tad Dra	iost			

^{*}If you do not know the AEL # it is okay to leave blank

MATCH Provide your match description below (your match must be equal to your award amount and be allowable activities:

Description of Activity / Expense	Amount
TOTAL	

Email your completed application to EM.Grants@mass.gov