

GRANT TRACKING FORM



PART #1: Notification of Grant Funds

(email to tony.saucerman@appleton.org)

APPLICANT DEPARTMENT: Appleton Fire Department

DATE: 12/13/2021

APPLICANT DEPARTMENT GRANT CONTACT NAME/TITLE: Jeremy Hansen/Fire Chief

COMMITTEE OF JURISDICTION: Safety & Licensing Committee

NAME OF GRANT/FUNDING SOURCE: Assistance to Firefighter's Grant Program/Department of Homeland Security

AMOUNT OF GRANT REQUEST: \$358,822

LOCAL MATCH REQUIREMENT: 35,882.20

SOURCE OF MATCH: General Fund Non-General Fund Not Applicable

TIMEFRAME OF GRANT: 01/09/2023 through 12/31/2024

TYPE OF GRANT REQUEST: Monetary Other (explain under 'purpose of grant')

PURPOSE OF GRANT (summary): The Appleton Fire Department (AFD) is requesting grant funding to support the purchase of advanced life support (ALS) cardiac monitors. The AFD has a strong desire to provide the community an exceptional pre-hospital experience by upgrading our medical response capabilities from Emergency Medical Technician (EMT) to Paramedic.

How does the grant meet City/Department/Program goals? This project relates to the City's mission of being '...dedicated to meeting the needs of the community and enhancing its quality of life.' This project will assist with Goal # 1 that states 'Improve response times,' and Goal # 2 that states 'provide the community with exceptional pre-hospital experience.'

What are the personnel requirements (include both existing and new staff) of the grant? There are no personnel requirements other than training on the equipment.

DEPARTMENT HEAD SIGNATURE: _____

PART #2: Request to Accept Grant Funds

(complete after notification of grant award; email to tony.saucerman@appleton.org)

AMOUNT OF GRANT AWARD: \$ _____

FEDERAL/STATE ID #: _____

LOCAL MATCH REQUIREMENT: \$ _____

Please describe the source of match, if applicable: _____

Please describe any major changes in proposed grant-funded activities: _____

PART	TO:	DATE:	TO:	DATE:	TO:	DATE:
#1: Request to Apply	Finance Dept		COJ – Info/Action		FAC – Info/Action	
#2: Request to Accept	Finance Dept		COJ – Action		FAC – Action	

COJ = Committee of Jurisdiction

FAC = Finance and Administration Committee