

**Fiscal Year 2021
Tribal Emergency Management Performance Grant-American Rescue
Plan Act (EMPG-ARPA) Program
Notice of Interest (NOI)**

Instructions: This NOI template must be used to be considered for funding. Please complete all fields, answer all questions, and follow all instructions provided for this NOI. Failure to complete all fields will result in the NOI being disqualified.

Applicant Information

Please provide the following information:

Grant Year and Program:	Fiscal Year 2021 Tribal EMPG-ARPA Program
Tribe Name:	
Point of Contact's Name:	
Address:	
Telephone:	
E-Mail:	
FY 2021 EMPG-ARPA Funds Requested:	
Dun and Bradstreet Number (DUNS#): DUNS# must be valid and active.	
Federally-Recognized Tribe Status (Yes/No):	

By checking this box, the Applicant agrees that they are willing to accept less than their requested amount based on scoring, proposal selection, and the availability of grant funds.

If partial grant funding can be accepted:

Please identify, in whole dollars, the minimum amount of grant funding that will be accepted for this proposal in the box below. For example, if \$100,000 in EMPG-ARPA is being requested, but the Applicant can accept a minimum of \$50,000 in EMPG-ARPA for this proposal, enter the minimum dollar amount of \$50,000.

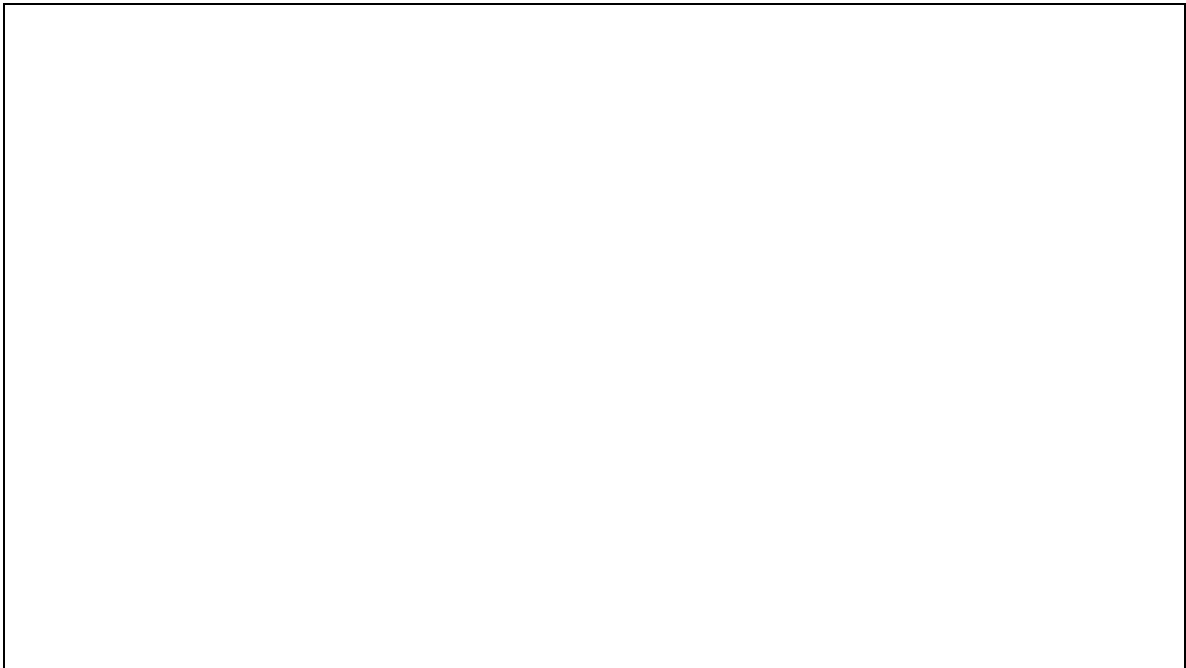
Minimum grant funding that will be accepted:

\$

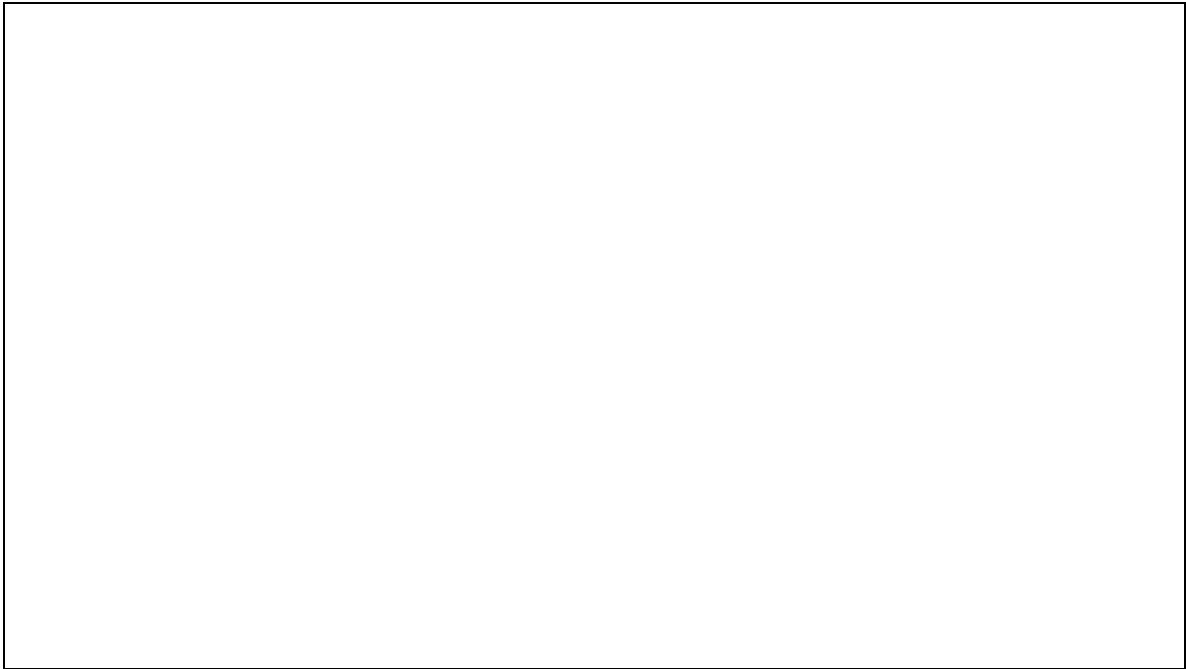
- I. Describe the tribe's current emergency management system (EMS) and how FY 2021 EMPG-ARPA funding will help improve it. (10 points)**



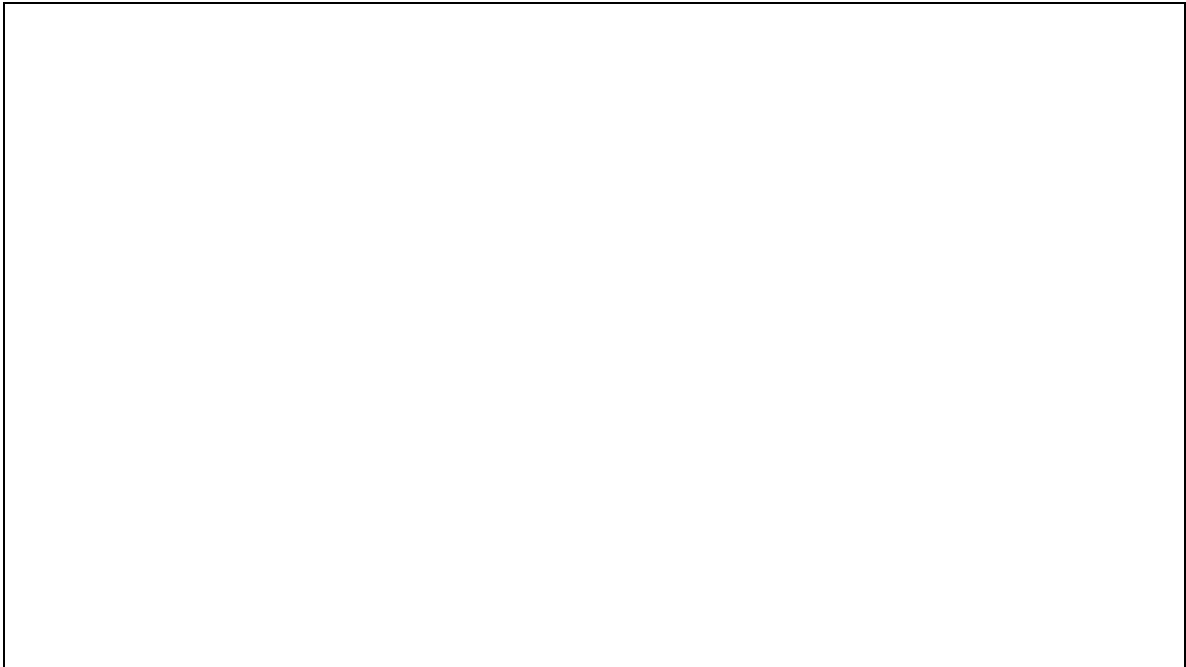
- II. Describe the proposed project(s) and how each proposed project will fill critical emergency management gaps. (10 points)**



III. Describe how the tribe will meet the Program's 50% match requirement. (5 points)



IV. Describe how each proposed project(s) will be completed within the period of performance. Please provide a timeline with key milestones. (5 points)



V. Budget Detail. Provide a breakdown of all allowable costs, to include an itemized list of activities. Where applicable, provide a list of equipment to be purchased, including quantities, costs, Authorized Equipment List (AEL) numbers, and AEL titles. (5 points)

*Proposed Project	Description	Solution Area	Proposed Amount
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Choose an item	\$
		Grand Total of Proposed Grant Funded Project	\$

**Provide additional attachment if necessary.*

Before submitting, please review your responses and ensure that they are complete. Submit the completed NOI, along with other required documents, via email to Yer Yang at Yer.Yang@caloes.ca.gov

IMPORTANT NOTE: Submissions received after the deadline of Friday, December 10, 2021, 5:00 PM (PST) will not be accepted and will be disqualified from continuing in the competitive application process. No exceptions can be made. Please plan accordingly.