DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

O.M.B. No. 1660-0085 Expires March 31, 2018

APPLICATION FOR CRISIS COUNSELING PROGRAM SERVICE (IMMEDIATE SERVICES PROGRAM)

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 8 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3100, Paperwork Reduction Project (1660-0085) NOTE: Do not send your completed form to this address.

Privacy Act Statement

<u>GENERAL:</u> The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a (b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/FEMA - 004 Grant Management Information Files System of Records, 74 Fed. Reg. 39705 (August 7, 2009) and upon written request, by consent, by agreement, or as required by law.

AUTHORITY: Section 416 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (42 U.S.C. § 5183).

<u>PURPOSES AND USES:</u> This information is being collected for the primary purpose of determining eligibility for the Crisis Counseling Assistance and Training Program, Immediate Services Program funding following a presidentially declared disaster.

EFFECTS OF NONDISCLOSURE: The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent FEMA from providing the requested funding.

PART I: General Application Information

Completion of this form including applicable attachments satisfies legal requirements for application for the Immediate Services Program (ISP) under 42 U.S.C. §§ 5183 as implemented at 44 C.F.R. §§ 206.171. Failure to use this application may result in a failure to meet these requirements and/or a delay in processing the request. This application must be submitted within 14 days following the declaration of a major disaster.

1. Request Date:

1/29/2018

2. Declaration #:

FEMA-4353-DR

3. Declaration Date:

01/15/2018

4. Name of State, Indian Tribal Government, or Territory Requesting Services:

California

5. Primary Point of Contact (POC) for the Administration of this Program:

5a. POC Name:

Lidia Armas

5b. POC Organization:

California Office of Emergency Services, Cal OES Deputy Individual Assistance Branch Director

5c. POC Mailing Address:

3650 Schriever Avenue, Mather, CA 95655

5d. POC E-mail Address:

Lidia.Armas@caloes.ca.gov

5e. POC Phone Number:

916-845-8144

6. Amount requested for Immediate Services Program (ISP) funding. (Please round to nearest dollar).

\$882,946.62

PART II: Plan of Service / Needs Assessment

7. Please describe current State and local mental health services and explain why they cannot meet the disaster-related mental health needs caused or aggravated by the disaster.

In California, a comprehensive array of Medicaid (Medi-Cal) specialty mental health services (SMHS) is provided to Medi-Cal (Medicaid) beneficiaries in each county through a county mental health plan (MHP), which contracts with the Department of Health Care Services (DHCS) to provide SMHS. County MHPs are required to provide or arrange for the provision of SMHS to Medi-Cal beneficiaries that meet specific SMHS medical necessity criteria consistent with their mental health treatment needs and goals, as documented in the beneficiaries' client plans. People affected by these disasters may not meet medical necessity criteria required to receive federal

Medicaid-reimbursed SMHS. SMHS are funded primarily by a combination of federal Medicaid dollars, realigned State funds, and dedicated county funds.

In addition to SMHS, California counties also provide other specialized mental health services and programs funded by the Mental Health Services Act, and other funding sources, to individuals that may or may not be Medi-Cal beneficiaries or may not meet the criteria for accessing services. MHSA funds may only be used to provide mental health services to adults with serious mental illness or children with serius emotional disturbance. Programs funded with MHSA funding is determined locally through a specified stakeholder process and adopted by the local board of supervisors.

No dedicated funding is provided for disaster-related behavioral health services. The counties declared as disaster areas include: Los Angeles, Santa Barbara, San Diego, and Ventura. All three counties, except for San Diego has a request for ISP in implementing the Crsis Counseling Program.

In addition to the flooding and mudslides in Los Angeles, Santa Barbara, and Ventura counties, many California residents were also victims of or impacted by the recent wildfires that took place in Butte, Mendocino, Napa, Nevada, Sonoma, and Yuba counties during October 2017. Additionally, several California residents were also impacted by the Las Vegas Shooting incident. In response to these events, counties are providing mental health services to those who were impacted.

Historically, the mental health field has experienced challenges with limited funding and shortages of mental health professionals and paraprofessionals.

As described above, the current State and county (local) mental health service delivery system and funding sources cannot meet the disaster-related mental health needs of people affected by the current disasters due to the lack of designated funding for disaster-related mental health services; the shortage of providers; multiple disasters occurring simultaneously; and the fact that many people affected by these disasters comprise a new population for the county to serve.

8. Estimated Population to Be Served:

OPTION A: Applicants may opt to use their own method for determining the estimated population to be served. Please cite any data sources used and the methodology used to determine the estimated population to be served. Please also list proposed provider's number of direct and non-direct staff anticipated.

OPTION B: Use the following table to estimate the impacted population for each requested service area (county, parish, tribal land, etc.). Populate the table using census data for the total population for each designated service area. Multiply the "percentage impact factor by the "total census population" to arrive at an estimated population to be served during the ISP. Please select a "percentage impact factor" between 3/4% (0.0075) and 2% (0.02) of your census population to target for services; provide a brief justification for the "percentage impact factor" you have chosen in the box below. Please also list the number of direct and non-direct staff anticipated.

Service Provider Name (if known) and Requested Declared Service Areas	Total Census Population in Requested Declared Service Areas	Percentage Impact Factor (0.0075 to 0.02)	Estimated Population to Be Served Within 60 Days	Number of Direct Staff FTEs (Crisis Counselors, Team Leads) (Typically 300:1 Ratio)	Number of Non- Direct Staff FTEs (Admin., Fiscal, Data, etc.) (Typically 15–20%)
Los Angeles	282000.00	0.0075	2115.00	7.00	1.00
Santa Barbara	107021100		2146.42	14.00	2.00
Ventura			3350.96 14.00	14.00	2.00
			0.00		
			0.00		
			0.00		
			0.00		
			0.00		
			0.00		
			0.00		
TOTALS:	556869.00		7612.38	35.00	5.00

Please describe any special circumstances not captured in the above table that will have an impact on the need for crisis counseling services. Include any high-risk groups or populations of concern (e.g., children, adolescents, older adults, ethnic and cultural groups, people with disabilities and other access and functional needs, lower-income populations, first responders). Please include your plan to reach these populations.

See Attachment 1 for needs assessment data.

Santa Barbara County: % Impact Factor = .02 Direct Staff Ratio = 1:200

To determine the estimated population to be served and the percentage impact factor for Santa Barbara County, Department of Health Care Services (DHCS) utilized the following methodology and data sources:

- 1) Used zip codes to determine cities that were evacuated during the fires and mudslides;
- 2) Used Department of Finance (DOF) population estimates to determine the number of individuals living within the evacuated zip codes;
- 3) Determined percentage of impact of Thomas Fire to be attributed Santa Barbara County based on percentage of total population affected by the fire:
- 4) Reviewed additional data (i.e., homes destroyed, evacuations, deaths, etc.) to determine the percentage impact factor used to determine estimated population to be served

Santa Barbara County is a vast county that is primarily divided into three regions (south, west, and north). According to the 2010 Census Bureau, 423,895 residents occupy the coastline of Santa Barbara. The main economic drivers for the county are tourism, agriculture (including farming and wineries), oil, military base, and higher education (UC Santa Barbara, Santa Barbara Community College, Westmont College, Alan Hancock, language schools).

The Thomas Fire and the Montecito Mudslide that occurred from December 2017 to January 2018 have had an unprecedented impact on Santa Barabra county. In total, the Thomas Fire burned over 280,000 acres, the largest acreage ever burned in California; destroyed 1,063 structures and damaged 280 structures. As a result of the fire, 27 homes were destroyed in Santa Barbara county. During the Thomas Fire, 93,243 individuals were impacted by evacuation orders across Santa Barbara and Ventura counties. Two weeks after the Thomas Fire, mudslides in Santa Barbara occurred causing 6,000 evacuation. The mudslides have changed the geography of Santa Barbara county. It took many homes and erased property lines and in many cases, there is no longer a lot for the owner to rebuild upon. In some cases, homes have been moved to other properties. As a result of the mudslides, another 440 homes were damaged/destroyed, 23 commercial businesses were damaged/destroyed, and there were 21 deaths and 2 missing persons. The agriculture commission has yet to conduct a full environmental impact report to assess the damage to the agriculture industry in Santa Barbara County. There will be an economic impact on the county due to this destruction of property (assessments, taxes will see immediate impact). The Coast Village Road business district suffered severe mud damage and will be challenged to reopen for normal business (over 115 small businesses). In addition, domestic employees (childcare, gardeners, cleaners, cooks, etc.) have no place to work and residents have no place to live.

The farmworker population and domestic/service worker population may require services provide outside of normal business hours. The mudslides also impacted more affluent neighborhoods. These individuals may be less apt to seek out crisis services, or recognize the signs/symptoms of distress, and may require additional/multiple outreach attempts before engaging in community efforts.

A number of the mudslide victims were children or youth, which has caused the disaster response to focus on establishing Compassion Centers at eight local schools. Two schools could not open on campus and were temporarily moved to local college campuses, which has been very disruptive to students and families already displaced from their homes. Multiple parent meetings, school town halls, student support sessions, and staff interventions were provided reaching more than 500 impacted individuals. Lengthy evacuation periods negatively impacted residents, including those whose homes were not damaged. Support has also been provided to congregations at four churches.

Special needs include those with limited English skills (Spanish, Nepalese, or other language), elderly and infirm or limited mobility, undocumented, and those who lost both their residence and employment.

The loss of Vista Del Mar psychiatric hospital in Ventura has negatively impacted Santa Barbara County by eliminating access to acute inpatient beds, which had been contracted at an average of 10 per day. This loss leaves just 16 acute beds for involuntary service in county, increasing pressure on an already over-burdened resource.

Like many major cities in California, Santa Barbara County also faces limited housing supply. One of the county's priorities prior to the disaster was to increase housing and acute beds for the mentally ill. The lack of resources due to this disaster will make rentals and housing even less affordable and out of reach for clients. Price gouging in the rental market has already been seen, and the local realtors association is assisting displaced individuals find temporary and long term housing. Other priority issues include increasing outreach to the homeless, responding to crisis calls, and insuring access to timely mental health services.

The 101 freeway is the major connector throughout the county was closed briefly during the fire, and for nearly two weeks after the mudslide. Due to its extended closure, the county's wine country, agriculture and tourism have all been impacted by both of these this disasters. Deliveries of goods from south of Carpinteria were unable to be completed, furthermore impacting the economic flow of the community.

Also due to the freeway shutdown, county staff residing south of Montecito had to commute using boats, trains and county contracted bus convoys from Ventura to Santa Barbara. The local hospital also deployed planes to transport medical staff from the Los Angeles area to work. Many staff stayed in hotels for multiple days because they were unable to return home. Additionally, a large portion of county staff commute from Ventura county were either not able to make it in to work or were having to come in on alternative transportation (ferry, train, escorted bus). Alternative transpertation schedules do not coincide with a normal work day, leaving the department short staffed to see clients, much less meet the added demand of the disaster.

During to the Thomas Fire, smoke and ash became so bad that schools were forced to shut down for at least two weeks, and residents were strongly advised to wear N95 masks (more than 400,000 masks were distributed throughout the county), with south county being the primary focus. The holiday closure followed the Thomas Fire and shortly after returning from the holiday closure, the floods and mudslides transpired. Several schools (minimum seven public schools), daycares, elementary, private, and colleges continued to be closed.

Since the Thomas Fire and the mudslide (December 4 - January 12), Santa Barabara county has launched nine mental health activities (a combination of call lines, school parent supports, staffing at shelters, community meetings etc.). In addition, Santa Barbara is currently assisting the Office of Emergency Management (OEM) by answering calls from the public, acting as Public Information Officer, and are deployed across all sections of the impacted areas. The county is also providing counseling assistance at the evacuation shelter and staffing local "Compassion Centers" at various schools throughout the community. Lastly, the county crisis team have worked with individuals to assist with evacuations and repopulating families as they were returned to their homes or were told about the loss of their loved ones.

The Red Cross opened shelters during the fires and the mudslide. These were populated by evacuees and homeless, who encountered no barriers to entrance. Numerous calls for county staff to assist with disruptive behavior at the shelters by non-evacuees ensued. After the mudslide, the Red Cross relocated evacuees to hotels and closed the shelter within 48 hours. 108 individuals were served across both disasters.

Santa Barbara County Behavioral Health Department has employed a contractor, The Mental Wellness Center (MWC), to implement the Crisis Counseling Program (CCP). MWC has the capacity to quickly hire paraprofessionals as well as licensed clinicians, as the organization is currently operating several paraprofessional and clinical program in the area. The county anticipates hiring 2.0 FTE team leads and 12.0 FTEs crisis counselors, which will encompass a mixture of clinicians, para-professionals, fiscal, and data staff for a total of 16 FTEs.

Ventura County: % Impact Factor = .02 Direct Staff Ratio = 1:300

To determine the estimated population to be served and the percentage impact factor for Ventura County, DHCS utilized the following methodology and data sources:

- 1) Used zip codes to determine cities that were evacuated during the fires and mudslides;
- 2) Used Department of Finance population estimates to determine the number of individuals living within the evacuated zip codes;
- 3) Determined percentage of impact of Thomas Fire to be attributed to Ventura county based on percentage of total population affected by the fire:
- 4) Reviewed additional data (i.e., homes destroyed, evacuations, deaths, etc.) to determine the percentage impact factor used to determine estimated population to be served

On December 4, 2017, the Thomas Fire started north of the City of Santa Paula. The fire quickly spread throughout Ventura County severely affecting the cities of Santa Paula, Ventura, Ojai, Fillmore and the unincorporated areas of Ventura County. At the height of the fire, approximately 94,000 residents were under mandatory evacuation. As mentioned above, the Thomas Fire left a devastating impact with the loss of many structures, including several large apartment complexes. Two lives were loss.

Agriculture is one of the largest driving economic factors in Ventura County. Agricultural loss was a significant impact from the Thomas Fire. Avocado groves suffered the most damage from fire, representing 65% of fire-damaged farm land. A full accounting of the damage is not anticipated until the 2018-19 season. It is expected that this loss of agriculture will significantly impact the labor force that relies on this industry in Ventura County. The housing supply was also significantly impacted by the Thomas Fire. According to the US Department of Housing and Urban Development, Ventura County is the 13th least affordable housing community in the nation. Approximately 60% of wages are estimated to be spent on housing. Additionally, the vacancy rate in Ventura County is approximately 2%. The loss of 22 farmworker housing units, 2 large apartment complexes, and 1,000+ homes has significantly impacted the already scarce inventory of available and affordable housing. Other economic factors impacted by the Thomas Fire include loss of employment wages, loss of farmworker housing, and loss of agricultural land which will impact employment. Stressors from loss of homes, rebuilding, relocation of schools, relocation of families; financial stress during recovery phase also contributed to the overall devastation experienced by the community. Many of the homes lost in the Ventura hillsides belonged to senior citizens. Navigating the process of rebuilding and recovery may provide significant stress to these individuals.

Additionally, one of the communities affected was an upper-middle class neighborhood of long-time residents. It is anticipated that outreach and engagement will need to be tailored to this group that may not readily recognize their needs or seek services on their own. Furthermore, access to mental health services for the Latino populations was difficult prior to the fires due to work schedules, transportation and daycare. These are relevant issues that is a priority for Ventura Behavioral Health.

Ventura Behavioral Health Department was also directly impacted by the fire. One of its mental health facility Vista Del Mar Hospital was burned in the Thomas Fire, which is a loss of 87 psychiatric hospital beds. This loss widens the current gap of available beds and will require out of county placement for individuals requiring hospitalization. Due to the fire, Vista Del Mar had to lay off most of their staff (approximately 200 individuals were laid off). This will continue to be a hardship for Ventura Behavioral Health Department, its staff, and for residents in need of services.

There are 220 schools in Ventura County and many were closed due to evacuations and air quality. Fortunately, no school facilities were lost during the disasters, however many students and teachers lost their primary residences. This significantly impacted families as they had to identify childcare and many potentially lost wages, as they could not report to work. The county is currently working with the local schools and intends increase outreach efforts and provide support services to families impacted by the disasters.

Since the Thomas Fire, Ventura Behavioral Health Department has assisted in providing immediate response in the Red Cross Shelters, Local Assistance Center, re-entry points and on-going Community Based responses. From December 5, 2017 to January 22, 2018, the county has deployed 487 (duplicated) staff to 123 deployments and approximately 3,100 hours of staff time. As mentioned above, the county has been working closely with the school districts to provide additional clinical support to the students and faculty. Lastly, Ventura County has been providing debriefing and psychological first aid to existing staff that were directly impacted by the fires.

Ventura County plans to utilize staff from their list of contractors, Vista Del Mar (VDM) Hospital, and other local community based organizations to provide staffing for the Crisis Counseling Program (CCP). It is anticipated that the CCP program can be implemented immediately with paraprofessionals and clinical staff through contracted services.

Los Angeles County: % Impact Ratio = .0075 Direct Staff Ratio = 1:300

To determine the estimated population to be served and the percentage impact factor for Los Angeles County, DHCS utilized the following methodology and data sources:

- 1) Used zip codes to determine cities that were evacuated during the fires and mudslides;
- 2) Used Department of Finance population estimates to determine the number of individuals living within the evacuated zip codes;
- 3) Determined percentage of impact of Skirball Fire, Rye Fire, and Creek Fire to be attributed to Los Angeles county based on percentage of total population affected by the fire;

4) Reviewed additional data (i.e., homes destroyed, evacuations, deaths, etc.) to determine the percentage impact factor used to determine estimated population to be served

Los Angeles County experienced three wild fires during December 2017 - the Creek Fire, Rye Fire, and the Skirball Fire. The three fires burned more than 8,220 acres and destroyed 66 residential structures and 63 outbuilding structures.

According to Los Angeles County Office of Emergency Management, the economic impact to Los Angeles County was minimal. Nevertheless, there are significant impacts to multiple communities, including homes destroyed and incurring major damages. The cost of repairs may expand out over the next five years for homes in the burn areas due to additional damages that may occure related to rain, debris flows, and flooding. Some homeowners impacted by the fires were self-employed and also lost their home offices. Rebuilding housing may be a challenge for some vulnerable and low-income communities as they may have little or no insurance coverage.

Some homeowners and renters will have to relocate and their children will possibly have to change schools. Furthermore, self-employed individuals who lost their homes and home offices will need to rebuild their homes and business concurrently.

Fortunately, no schools were lost during the fires. Although some schools were evacuated or were closed due to debris and smoke. Some schools needed to be cleaned due to debris and smoke from the fires.

During the three fires, both human and animal shelters were established. Hundreds of evacuated residents did utilize the shelter options, however no fire evacuees remained in shelters.

Currently, Los Angeles Department of Mental Health remains available to assist clients who are experiencing disaster-related trauma. The Department maintains a 24/7 Access Center Help Line to assist the community, including people who were impacted by the fires with crisis counseling and referrals for mental health treatment. Residents in LA County may face challenges in accessing services due to limited outreach services in the impacted communities. Furthermore, the need to maintain mental health staff to assist with ongoing crisis and trauma counseling for those impacted by the fire for the next 12-24 months also poses a challenge for the county. Other on-going efforts that LA County is currently implementing include operating a Local Assistance Center (LAC), handing out brochures, and hosting debriefing sessions for staff coping with stress during a disaster.

Los Angeles County intends to utilize existing staff from the Department of Mental Health to provide Crisis Counseling Program (CCP) services. The county also anticipates hiring additional temporary staff to implement the CCP. This process would take approximately three months.

	(IMMEDIATE SERVICES PROGRAM)
9.	Provide a brief description of administrative oversight plans (supervision and monitoring of crisis counselors, team leads, data collection efforts, monitoring and managing stress, etc.).
	The CCP State Program Coordinator (.5 FTE), Provider Liaison (1.0 FTE), data evaluator (.25 FTE), and fiscal coordinator (.5 FTE) will be staffed by DHCS.
	DHCS will provide administrative oversight of the grant and the local providers using a combination of onsite program reviews, technical assistance conference calls, correspondance updates, and documentation review. DHCS staff will attend the mandatory CCP trainings.
	The CCP State Program Coordinator will provide technical and administrative oversight work for the CCP Grant application process. Functions include the provision of strategic and operational guidance on the project and coordination of specific processes related to the application.
	The DHCS Fiscal Specialist will track and monitor funds, review and submit requests for program budget modifications, prepare fiscal reports, and perform quality control and oversight of program purchases. The fiscal specialist will also work closely with the provider's fiscal specialist to ensure funds are accessible to providers and are being appropriately used for crisis counseling services.
	The DHCS Data Evaluator will work with the provider's data/evaluation specialist to provide oversight and technical assistance.
	Each provider's team leader(s) will provide supervision, monitoring, and manage stress of the crisis counselors. All data will be collected through an online data portal, or other specified data system.
	All providers will have a .5 FTE (minimum) fiscal coordinator who will track and monitor funds, perform quality control and oversight, and ensure all contracts are appropriate with state and federal mandates. All providers will have a .5 FTE (minimum) data/evaluation specialist who will provide data analysis and feedback to the state fiscal specialist/data evaluator and project manager.
10	The Crisis Counseling Assistance and Training Program (CCP) requires mandatory training during the ISP as described in the CCP guidance. Please describe additional training (if any) that you plan to provide and the rationale for providing such training.
	After mandatory training has been performed, each county will provide cultural competency/awareness and a stress management training. A FEMA approved trainer will be providing Core Content training.
	In order to increase efficiencies, DHCS expects to utilize a regional approach when providing the Core Content training by offering the training in one county. This approach will reduce the need for overnight stays and lodging. Until the training logistics are finalized, lodging and per diem are included in each county's budget. Additionally, funding to cover the cost to secure the training location is included in each county's budget, should the county not have a location available to use that is free-of-charge.
10	Da. Does the State, Indian Tribal Government, or Territory have experienced CCP trainers? (Yes No

PART III: Response Activities

11. Please describe any mental health-specific response activities undertaken from the date of incident to the date of application.

The DHCS Mental Health and Substance Use Disorders Disaster Behavioral Health (DBH Team) team contacted each county behavioral health/mental health director in counties significantly affected by wildfires and mudslides. The DBH Team is working closely with county representatives to inquire as to the needs of their communities and special populations, inform the directors of available services and strategies to respond to the needs, provide resource materials about the impacts of disasters from federal Substance Abuse and Mental Health Services Administration, inform directors of available services through federal Crisis Counseling Assistance and Training Program grant funding, and to gather data and information to apply for the CCP grant.

PART IV: Budget

12. Attach Standard Form 424: Request for Federal Assistance (SF-424) and Standard Form 424a: Budget Information: Non-Construction Programs. The SF-424 should include all projected operating costs as well as pre-award costs, if any. Pre-Award Costs: Non-Federal entities may request reimbursement for costs associated with crisis counseling services provided from the date of the incident to the date of the ISP application. Reimbursement is limited to crisis counseling services allowable under the CCP and not for any other type of behavioral health response and must be approved in writing.

13.	Attach a Budget Narrative explaining each line item on the SF-424	4a. Identify p	ore-award costs requested, if any.				
PART V: Assurances							
14.		ase acknowledge that the State, Territory, or Tribal Government will comply with the following assurances as referenced in the MA-State/FEMA-Tribe agreement and the DHS Standard Terms and Conditions available at http://www.dhs.gov/publication/fy15-s-standard-terms-and-conditions .					
	a. Lobbying:	Yes	○ No				
	b. Drug-Free Workplace:	Yes	○ No				
	c. Disbarment and Suspension and Other Responsibility Matters	Yes	○ No				
15. By signing below, the Governor or Chief Tribal Executive agrees to and/or certifies that:							
	☑ The requirements are beyond the State, Territory, or Tribal Government's capabilities.						
The program, if approved, will be implemented according to the plan contained in the application approved by the Regional Administrator.							
	The State, Indian Tribal Government, or Territory will maintain close coordination with and provide reports to the Regional Administrator.						
	The State, Indian Tribal Government, or Territory's emergence disaster mental health planning.	cy plan, prep	pared under Title II of the Stafford Act, will include				
16.	6. By signing below, the Governor's Authorized Representative (GAR) or the Chief Tribal Executive affirms that the foregoing questions have been answered correctly and truthfully to the best of their knowledge.						
	Grace Koch		1/29/18				
	Signature		Date				
PAI	RT VI: Application Checklist						
17.	7. The following documents have been submitted with this application:						
	a. Completed ISP Application	Yes	○ No				
	b. Request for Federal Assistance (SF-424)	Yes	○ No				
	c. Budget Information – Non-Construction Programs (SF-424a)	Yes	○ No				
	d. Assurances for Non-Construction Programs (SF-424b)	• Yes	○ No				
	e. Budget Narrative	• Yes	○ No				