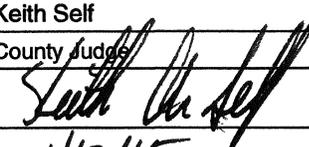


**FISCAL YEAR 2015
APPLICATION FOR FEDERAL ASSISTANCE**
(Instructions on Reverse)

NAME OF PROGRAM/ ASSISTANCE: EMERGENCY MANAGEMENT PERFORMANCE GRANT (EMPG)		1. CFDA NUMBER: 97.042		2. APPLICANT STATUS: New Applicant <input type="checkbox"/> Renewal <input checked="" type="checkbox"/>		
3. FEDERAL FISCAL YEAR: FY 2015		4. START DATE: OCTOBER 1, 2014		5. END DATE: SEPTEMBER 30, 2015		
APPLICANT INFORMATION						
a. Legal Name of Applicant Organization (as it appears on the EMPG Application (TDEM-17): Collin County			b. Name & Telephone Number of Emergency Management Coordinator: Kelley Stone (972) 548-5537			
c. Mailing Address: 4300 Community Avenue McKinney, TX 75071 Employer Identification Number/Tax ID# 75-6000873			d. Physical Address (if different from Mailing Address):			
EMPG PERSONNEL SUMMARY (include only those staff that will be paid with EMPG funds)						
e. Number of EMPG Staff & Percentage of Time Worked in Emergency Management Duties						
	# Staff	Percent	# Staff	Percent	# Staff	Percent
1) Full Time:	1	100				
2) Part Time						
Total Number of EMPG-Funded Personnel: 1						
ESTIMATED EXPENSES						
f. Salary & Benefits (from line 18, form TDEM-66)					\$97,957.32	
g. Travel Expenses (from line 19 form TDEM-66)					\$2000.00	
h. Other Expenses (from section 11 on reverse)						
i. Total Expenses (F + G + H)					\$99,957.32	
j. Federal Share (I x .50)					\$49,978.66	
Note: If you cannot meet the cash match requirement, check the box below and attach a match proposal as specified in Section 2 of the <i>Local Emergency Management Performance Grant Guide</i> . TDEM must review and approve any exceptions made to the cash match requirement at the time of application. <input type="checkbox"/> Cash Match Exception Requested						
CERTIFICATION: I certify that to the best of my knowledge and belief this application and its attachments are true and correct.						
k. Typed Name of Authorized Official:			Keith Self			
l. Title of Authorized Official:			County Judge			
m. Original Signature of Authorized Official:						
n. Date Signed:			1/12/15			

