



**BP5/FY2017
PHEP Funding**

Applicant Information

**Legal Name of Applicant Agency:
Mailing Address:**

Collin County

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

Payee Name:

Collin County

Payee Mailing Address:

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

State of Texas Comptroller Vendor ID # (9 digit + 3 digit mail code):

DUNS # (9 digits required for subrecipient contractors):

74873449

Type of Entity (Choose one)

City: Click on appropriate box
County:
Other Political Subdivision:

Project Period

Start Date: 7/1/2016
End Date: 6/30/2017

Counties Served

County(ies) Served:

Collin County

Amount of Funding Allocated:

\$545,327.00

CONTACT PERSON INFORMATION

Legal Business Name:

This form provides information about the appropriate contacts in the contractor's organization in addition to those on the FACE PAGE. If any of the following information changes during the term of the contract, please send written notification to the Contract Management Unit.

Health Director/CEO:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

B-13/FSR Rep:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

PHEP (HAZARDS) Program Leader:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

SNS (CRI) Coordinator:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

eGrants Authorized Signatory:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

Emergency Contact:
Cell Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

eGrants System Admin:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

BUDGET SUMMARY (REQUIRED)

Legal Name of Respondent:

Collin County

Budget Categories	Total Budget (1)	DSHS Funds Requested (2)	Direct Federal Funds (3)	Other State Agency Funds* (4)	Local Funding (Match) (5)	Other Funds (6)
A. Personnel	\$375,493	\$332,190			\$43,303	
B. Fringe Benefits	\$138,156	\$127,893			\$10,263	
C. Travel	\$7,280	\$7,280			\$0	
D. Equipment	\$0	\$0			\$0	
E. Supplies	\$53,125	\$53,125			\$0	
F. Contractual	\$0	\$0			\$0	
G. Other	\$25,826	\$24,839			\$987	
H. Total Direct Costs	\$599,880	\$545,327	\$0	\$0	\$54,553	\$0
I. Indirect Costs	\$0	\$0				
J. Total (Sum of H and I)	\$599,880	\$545,327	\$0	\$0	\$54,553	\$0
				Match Percentage	10.00%	

If the Contractor is using Indirect Costs as Match, then enter the amount in Line 16, Column H.

TRAVEL Budget Category Detail Form

Legal Name of Respondent:

Collin County

Conference / Workshop Travel Costs					
Description of Conference/Workshop	Justification	Location City/State	Number of:	Travel Costs	
			Days & Employees		
Quarterly PHEP Contractor Meeting (four meetings)	Contractor meeting conducted by DSHS	Austin, TX	4 meetings / 2 days / 1 employee	Mileage	\$2,000
				Airfare	\$0
				Meals	\$200
				Lodging	\$1,000
				Other Costs	\$0
				Total	\$3,200
Public Health Preparedness Summit	Conference for public health and emergency preparedness professionals	Atlanta, GA	4 days/2 employees	Mileage	\$100
				Airfare	\$900
				Meals	\$500
				Lodging	\$1,300
				Other Costs	\$200
				Total	\$3,000
				Mileage	\$0
				Airfare	\$0
				Meals	\$0
				Lodging	\$0
				Other Costs	\$0
				Total	\$0
				Mileage	\$0
				Airfare	\$0
				Meals	\$0
				Lodging	\$0
				Other Costs	\$0
				Total	\$0
TOTAL FROM TRAVEL SUPPLEMENTAL CONFERENCE/WORKSHOP BUDGET SHEETS					\$0

Total for Conference / Workshop Travel

\$6,200

Other / Local Travel Costs

Justification	Number of Miles	Mileage Reimbursement Rate	Mileage Cost (a)	Other Costs (b)	Total (a) + (b)
Out of office meetings, seminars, exercises, training, including day travel within DFW metroplex. Will be utilized by all BT funded staff.	1000	\$0.540	\$540		\$540
Short seminars, conferences, meetings within state of Texas. Will be utilized by all BT funded staff.	1000	\$0.540	\$540		\$540
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
TOTAL FROM TRAVEL SUPPLEMENTAL OTHER/LOCAL TRAVEL COSTS BUDGET SHEETS					\$0

Total for Other / Local Travel \$1,080

Other / Local Travel Costs: \$1,080

Conference / Workshop Travel Costs: \$6,200

Total Travel Costs: \$7,280

Indicate Policy Used:

Respondent's Travel Policy

State of Texas Travel Policy

SUPPLIES Budget Category Detail Form

Legal Name of Respondent:

Collin County

Itemize and describe each supply item and provide an estimated quantity and cost (i.e. #of boxes & cost/box) if applicable. Provide a justification for each supply item. Costs may be categorized by each general type (e.g., office, computer, medical, educational, etc.)

Description of Item <small>Provide estimated quantity and cost</small>	Purpose & Justification	Total Cost
Office Supplies	Clipboards, paper, writing utensils, labels, etc. (approximately \$350/FTE)	\$2,205
POD Supplies	Various medical and non-medical supplies for each of 24 primary deployable POD kits (approximately \$750/POD kit). These include additional POD signage inside the POD, external signage and drive-thru items (such as cones, safety lights, and small barriers), replacement of existing expired POD supplies (such as hand sanitizer and bandages), administrative supplies for drive-thru PODs (such as enclosed clipboards), and POD inventory supplies (such as inventory marking tools and supplies).	\$18,000
Grant Program Supplies	Gloves, masks, crowd control posts, signs, etc., as needed to support various deliverables, including Information Sharing, Mass Care, Non-Pharmaceutical Interventions, and Mass Prophylaxis operations. Also includes alpha or first responder POD planning not covered by POD Supplies. Medical supplies ~\$500 and non-medical office-type supplies ~\$2000; specific quantities or items are not finalized at this time	\$2,500

POD Computer Go-Kit	Computer tablet, 12.3" touchscreen, 256 GB, Intel Core i7, 8GB RAM (10 @ \$1400/ea), Keyboard for tablet (10 @ \$104/ea), Ext Warranty and Protection plan for computer tablet (10 @ \$367/ea), tablet docking station (10 @ \$160/ea), DisplayPort cable (10 @ \$11/ea), Ethernet Adapter (10 @ \$32/ea), Optical DVD Drive for tablet (10 @ \$25/ea), Rolling Backpack (10 @ \$53/ea) Rugged case for computer tablet (10 @ \$70/ea), Screen shield for computer tablet (10 @ \$60/ea), Allows the POD command staff to be able to communicate back to the EOC and receive updated information and documents from the EOC as they become available.	\$22,820
Computer/Tablet Software	Software for tablets and desktop computers (10 @ \$760/ea). Allows the POD command staff to be able to use the tablets to view and edit documents as needed.	\$7,600
TOTAL FROM SUPPLIES SUPPLEMENTAL BUDGET SHEETS		\$0

Total Amount Requested for Supplies:

\$53,125

OTHER COSTS Budget Category Detail Form

Legal Name of Respondent:

Collin County

Description of Item <small>Include quantity and cost/quantity</small>	Purpose & Justification	Total Cost
ATT Wireless Cell Phone	Cellular phone service (6 users, ~\$70/month, 12 months) for public health staff. This will continue to support staff communication outside of our office and allow staff to be on-call at all times for activation due to a public health or other emergency.	\$5,040
Conference Registration Fee	Registration fees for Public Health Summit (\$600/person, 2 people person)	\$1,200
Language Line	On-demand translation services for non-English speaking clients at Points of Dispensing, vaccination clinics, or during epidemiological investigations. Cost is billed as-used.	\$750
Outreach	Annual budget for MRC recruitment and outreach materials, including print advertising	\$7,500
Printing and Communication Materials	Printing for additional SNS or other outreach brochures & materials; printing of employee business cards, as needed.	\$7,349
Subscriptions/References	Reference and other materials for Health Care Services (3 reference items @ ~\$250/ea; 3 subscription items @ ~\$750/ea)	\$3,000
TOTAL FROM OTHER SUPPLEMENTAL BUDGET SHEETS		\$0

Total Amount Requested for Other:

\$24,839

	Fringe Benefits Total	\$10,263
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