

GOVERNMENT

Grant Proposal Notification

GPN Number: 009-24		Date of Notification:	02/08/2024	
(Completed by Finance Department)		(MM/DD/YYYY)	
Parent Committee Agenda Date:	02/20/2024	Grant Application Due Date:	02/16/2024	
(Completed by Finance Department		Grant Application Bac Batel	(MM/DD/YYYY)	
Name of Grant:	ame of Grant: Sustained Traffic Enforcement Program			
Name of Grantor:	Illinois Department of Transportation			
Originating Entity:	U.S. Department of Transportation			
County Department:	Sheriff's Office			
county Department.				
Department Contact:	Lt. Frank Bibbiano x2084			
	(Name, Title, and Extension)			
	Judicial Public Safety			
Parent Committee:				
Grant Amount Requested:	\$ 39,081.00			
Type of Grant:	Formula			
	(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)			
Is this a new non-recurring Gran	t: 🗸 Yes	No		
Source of Grant:	✓ Federal	✔ State	Corporate	
If Federal, provide CFDA:	0.600 If State, provide CSFA: 25-0343-11			
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1. Justify the department's need for this grant.

The Sustained Traffic Enforcement Program will allow the Sheriff's Office to do directed traffic, DUI, and occupant safety campaigns at no cost to the County. Thus making roadways and travel safer for those who live and work in DuPage County.

Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Provide a 2. brief explanation.

This initiative will further the strategic plan of DuPage County by making vehicle travel safer for all who live and work in DuPage County thus making it a more desirable place to live, work, and raise a family in DuPage. It will further the effort to improve the quality of life in DuPage County.

3. What is the period covered by the grant?

<u>10/01/2024</u> to: <u>09/30/2025</u> (MM/DD/YYYY)

No

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. ______ and _____ (MM/YY) (Duration)

- 4. Will the County provide "seed" or startup funding to initiate grant project? (Yes or No)
 - 4.1. If yes, please identify the Company-Accounting Unit used for the funding
- If grant is awarded, how is funding received? (select one): 5.

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)





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Yes

- 6. Does the grant allow for Personnel Costs? (Yes or No)
 - 6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary _	\$39,081.00	_ Percentage covered by grant	100
6.1.2. Total fringe benefits _	\$15,632.40	_ Percentage covered by grant	0%
6.1.3. Are any of the County-p	provided fringe benefits	disallowed? (Yes or No):	Yes

6.1.3.1. If yes, which ones are disallowed?

The only fringe benefits covered are those for non-enforcement part-time employees. They would be covered commensurate with the percentage of time that employee works on the grant. No non-enforcement part-time employees are anticipated to be working on this grant.

Since no part-time employees will be working on the grant all other fringe is disallowed.

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

1000-4400

6.2. Will receipt of this	s grant require the hir	ring of additional staff? (Yes or No):	No	_
6.2.1. If yes, how n	many new positions w	ill be created?			
6.2.1.1. Fu	Ill-time	Part-time	Temporary		
6.2.1.2. Will the headcount of the new position(s)		ne new position(s) be pla	aced in the grant accounti	ng unit?	(Vac ar Na)
6.2.1.2.1.	If no, in what Co	ompany-Accounting Uni	t will the headcount(s) be	placed?	(Yes or No)



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	6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No)			
	6.3.1. If yes, please answer the following:			
	6.3.1.1.	How many years beyond the grant term?		
	6.3.1.2.	What Company-Accounting Unit(s) will be used?		
	6.3.1.3.	Total annual salary		
	6.3.1.4.	Total annual fringe benefits		
7.	Does the grant all	ow for direct administrative costs? (Yes or No)	No	
	7.1. If yes, please	answer the following:		
	7.1.1. Total es	timated direct administrative costs for project		
	7.1.2. Percent	age of direct administrative costs covered by grant		
	7.1.3. What pe	ercentage of the grant total is the portion covered by the grant		
8.	What percentage	of the grant funding is non-personnel cost / non-direct administrative cost?	4.29%	
9.	Are matching fund	ls required? (Yes or No):	No	
	9.1. If yes, please	answer the following:		
	9.1.1. What pe	ercentage of match funding is required by granting entity?		
	9.1.2. What is	the dollar amount of the County's match?		



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	9.1.3. \	Vhat Company-Accounting Unit(s) will provide the matching requirement?		
10.	What amo	Int of funding is already allocated for the project?	\$0.00	
	10.1.	If allocated, in what Company-Accounting Unit are the funds located?		
	10.2.	Will the project proceed if the funding opportunity is not awarded? (Yes or No):		No
11	What is the	total project cost (Grant Award + Match + Other Allocated Funding)?	\$39,081	.00