

***Missouri Police Chiefs Charitable Foundation***

*1001 East High Street, Jefferson City, MO 65101 Phone: 573-636-5444, Fax: 573-636-6634*

**Law Enforcement Equipment Grant Notification**

EMW-2017-SS-00047-15

**DIRECTIONS FOR GRANT APPLICATION**

1. This grant opportunity provides (4) four equipment options for agencies to apply for:
2. License Plate Readers
3. Live Scan Devices
4. Rapid ID Devices
5. Mobile Data Terminals
6. This Grant Application Form incorporates fillable fields to make the application process easier. **All Grant Applications must be emailed to** **slineback@mopca.com**
7. An agency may apply for more than one type of equipment, but a new application must be completed and emailed to slineback@mopca.com for each type of equipment. To apply for more than one type of equipment, select the equipment type on question (1) one on the application form and complete the remainder of the application. Make sure your narrative justification is for the type of equipment you are requesting and then submit the application to slineback@mopca.com. Repeat the process on a new application (make sure the next type of equipment is selected on question (1) one on the Application Form and the justification to support the need is for the equipment requesting). You may repeat this process for each type of equipment available for this grant.
8. Once you complete your Application Form(s), save it (title it with your agency name, type of equipment being requested, and the grant year being 2017 (example: DEPARTMENT X Live Scan 2017). Once saved, email to slineback@mopca.com
9. All applications are **DUE by 5 p.m. January 20, 2018**.
10. If you have questions, contact Sheldon Lineback at 573.636.5444 or email at slineback@mopca.com



***Missouri Police Chiefs Charitable Foundation***

*1001 East High Street, Jefferson City, MO 65101 Phone: 573-636-5444, Fax: 573-636-6634*

**Law Enforcement Equipment Grant Notification**

EMW-2017-SS-00047-15

**Directions: You can apply for more than one piece of equipment but it must be submitted as a separate request – SEE DETAILED DIRECTIONS ON PAGE 1.**

1. Grant Equipment Request Type: Choose an item.
2. Applicant Agency: 
3. Agency DUNS #: 
4. Federal Tax ID #: 

**Agency Authorized Official (Mayor/City Administrator)**

1. Name/Title: 
2. Phone: 
3. Email: 
4. Mailing Address: 

**Applicant Project Director (Chief/Sheriff)**

1. Name/Title: 
2. Phone: 
3. Cell Phone: 
4. Email: 
5. Mailing Address: 

**Applicant Fiscal Officer (Treasurer/City Administrator)**

1. Name/Title: 
2. Phone: 
3. Email: 
4. Mailing Address: 

**Equipment Request**

1. Number of equipment seeking: 
2. Do you currently have this equipment? Choose an item.
3. If so, are you seeking replacement? Choose an item.
4. If you are seeking replacement, how old is the device? 
5. Do you have MULES or Regis access? Choose an item.
6. Are you willing to pay for ongoing maintenance fees? Choose an item.
7. Total agencies benefiting from this equipment: 
8. Total calls for service in 2017: 
9. Total number of offense cycle numbers for 2017: 

***Offense Cycle: Number of offenses from which fingerprints were generated***

1. Total population served by applicant agency: 
2. Total number of sworn officers: 
3. Total number of non-sworn employees: 
4. Total number of patrol vehicles: 
5. Are you compliant with UCR Reporting? Choose an item.
6. Are you compliant with Forfeiture Reporting? Choose an item.
7. Are you compliant with Racial Profiling Reporting? Choose an item.

Please provide justification for the need of the equipment requested. Please make sure to click the drop down box below to identify the equipment this application is being applied for.

Grant Equipment Request Type: Choose an item.

**PLEASE EMAIL THIS APPLICATION TO SHELDON**

**LINEBACK (****slineback@mopca.com****) BY JANUARY 20th, 2018.**