ORDER: AUTHORIZE LAFAYETTE COUNTY EMERGENCY MANAGEMENT AGENCY TO APPLY FOR THE FIREHOUSE SUBS FOUNDATION GRANT IN EACH QUARTER OF THE 2020 CALENDAR YEAR

Motion was made by Brent Larson, duly seconded by Chad McLarty, to authorize Lafayette County Emergency Management Agency to apply for the Firehouse Subs Foundation Grant in each quarter of the 2020 calendar year.

The vote on the motion was as follows:

Supervisor Brent Larson, voted yes Supervisor Larry Gillespie, voted yes Supervisor David Rikard, voted yes Supervisor Chad McLarty, voted yes Supervisor Mike Roberts, voted yes

After the vote, President Roberts, declared the motion carried, this the 6th day of January, 2020.

Mike Roberts, President Board of Supervisors Sherry Wall, Chancery Clerk

SAMPLE- Visit FirehouseSubsFoundation.org to apply online. **ACCOUNT REGISTRATION**

Applicant Title*	
Email*	(we prefer an official email address for your organization/department)
*Please note, this	information cannot be edited once submitted.
Firehouse	d DEPARTMENT INFORMATION e Subs Public Safety Foundation Grant Application be your organization's official name)
Department Tax ID # (xx-xxxxxxx):	
Mailing Address 1:	
Mailing Address 2:	
City, State & Zip Code:	
Shipping Address:	
Organization Phone Number:	
Organization Phone Ext:	
Alternate Contact Name: (must be diffe	erent from applicant name)
	st be different from applicant phone number)
Alternate Contact Ext:	en gift.
Alternate Contact Email Address: (mus	et be different from applicant email)
Communities Served:	
Population:	
Number of Runs/Calls for Service per Y	Year (for fire, EMS and police only):
Local Approval Pre-Qualifications department/organization) o As required by our community, to government as part of our process.	

o Our jurisdiction does not require pre-approval from local officials.

SAMPLE- Visit FirehouseSubsFoundation.org to apply online. **APPLICATION REQUEST INFORMATION**

Please select the type of grant you are requesting:

Equipment Donation/Prevention Education Items

Scholarships/Continuing Education

- Please note, our Foundation only reviews scholarship/continuing education grants connected with accredited schools
- For all-terrain wheelchair grant applications, email <u>foundation@firehousesubs.com</u> to request a paper all-terrain wheelchair grant application, and please title the email All-Terrain Wheelchair Grant Request

EQUIPMENT DONATION/PREVENTION EDUCATION ITEMS

The Foundation will determine the procurement method if your grant is approved. The equipment purchase will be implemented in one of two ways:

1) The Foundation Team will purchase the requested equipment on your behalf, and the vendor will ship it directly to your organization. Upon delivery, you must email a *signed & dated* copy of the packing slip to the Foundation.

OR

2) You will receive a Memo of Understanding from the Foundation. Once it is signed by both parties, you will receive a check to make your purchase according to the vendor quote. After you receive your equipment, you must email *signed and dated* copies of all invoices to the Foundation within one week of delivery.

What Equipment are you requesting? Please include the quantity of each item.
Vendor company name:
Sales representative first and last name:
Sales representative email address:
What is the TOTAL cost of the equipment?
Include sales tax and shipping, where applicable. Requests exceeding \$50,000 will not be accepted.
I understand that in order to be considered for funding, the total dollar amount and equipment quantities listed
on the submitted quote/bid must match the total above.
Has your department applied for this specific request in the past and been denied?
Yes No If yes, how many times, prior to this application, has this request been submitted?
Briefly explain how the equipment will benefit your community and your department.
This would have a direct impact on more thanchildren andsenior citizens in our
community. (For prevention education items.)

SAMPLE- Visit FirehouseSubsFoundation.org to apply online. COMMUNITY IMPACT (equipment & prevention education requests)

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SAMPLE- Visit FirehouseSubsFoundation.org to apply online. COMMUNITY IMPACT (scholarship/funding requests)

What positive effects will the funds specifically have? Pleas	e describe		edaesten taname	
benefit your local community. We ask that you do not cite i	ational st	atistics.		
FIREHOUSE SUBS RELATIONSHIP				
Address of Firehouse Subs location nearest you:				
How far is this location from your department? Miles			·· .	
How did you hear about our organization?				
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SAMPLE- Visit FirehouseSubsFoundation.org to apply online. FIREHOUSE SUBS PUBLIC SAFETY FOUNDATION PRINT/VIDEO RELEASE

Applicant First and Last Name:	
Applicant Organization:	

The undersigned representing the organization listed above, and its members, hereby grants Firehouse Subs Public Safety Foundation, Inc., Firehouse Restaurant Group, Inc. (including its subsidiaries and affiliates) and its officers, directors, nominees, designees, successors, and assigns (hereinafter called "Producer"), permission to use, sell, assign, convey, reproduce, copyright, and publish images or visual likenesses, names, and/or voices ("Personal Information") in any motion picture, videotape, photograph, sound or other recording, and/or other media for commercial, informational, educational, advertising, or promotional purposes.

I hereby waive any right that I may have to inspect or approve the finished product or the advertising copy which may be used in connection therewith, or the use to which it may be applied.

I hereby release, discharge, and agree to hold harmless Producer from any liability of any nature or description by virtue of any use whatsoever of my Personal Information, whether intentional or otherwise, including but not limited to any change that may occur or be produced in the taking of said pictures or images or in the recording of any sound, or in any processing in connection with the completion of the finished product.

I Accept the Terms of the Agreement

Date: