**Missouri 911 Service Board Financial Assistance Program**

**SIGNATURES AND CERTIFICATIONS**

WHEREAS, § 650.330, RSMo Supp. 2019, requires the Missouri 911 Service Board to administer and authorize grants and loans from the Missouri 911 Service Trust Fund under § 650.335, RSMo Supp. 2018 to provide funding for 911 communications service projects of certain counties and cities;

WHEREAS, § 650.335, RSMo Supp. 2018, provides that the purpose of grants and loans from the Missouri 911 Service Trust Fund shall include implementation of 911 services in counties of the state where services do not exist or to improve existing 911 systems; promotion of consolidation where appropriate; mapping and addressing all county locations; ensuring primary access and texting abilities to 911 services for disabled residents; implementation of initial emergency medical dispatch services, including prearrival medical instructions in counties where those services are not offered as of July 1, 2019; and development and implementation of an emergency services internet protocol network that can be shared by all public safety agencies;

WHEREAS, the Missouri 911 Service Board has established a 911 Financial Assistance Program and set an application window of September 15 – October 30, 2020 during which eligible counties and cities may submit applications prepared by their 911 services authorities to request grants and/or loans to finance costs incurred by them and their 911 services authorities for 911 communications service projects;

WHEREAS, [*Insert County Name, or if Sikeston or the City of St. Louis, city name*] is eligible to submit an application to the Missouri 911 Service Board for funding of a 911 communications service project;

WHEREAS, [*Insert the lead 911 entity or elected emergency services board – i.e. PSAP]* has prepared this application, to the Missouri 911 Service Board for [*Insert County Name, or if Sikeston or the City of St. Louis, city name*];

WHEREAS, [*Insert County Name, or if Sikeston or the City of St. Louis, city name*] propose(s) to submit the attached application to the Missouri 911 Service Board for the 911 communications project described therein to [*insert a summary of what the project would accomplish and the jurisdictions served*];

WHEREAS, the proposed project has a budgeted cost of $\_\_\_\_\_\_\_\_\_\_ with $\_\_\_\_\_\_\_\_\_ being funded by [*Insert Name of Funding Source*] and requested a [*Grant and/or Loan*] in the amount of $\_\_\_\_\_\_\_\_\_ from the Missouri 911 Service Trust Fund;

WHEREAS, the project application must include a written certification from the governing body of an applicant city or county approving the applicant city or county entering into a project agreement with the Missouri 911 Service Board if the application is approved; and

WHEREAS, the [*Insert County Name, or if Sikeston or the City of St. Louis, city name*] does have areas of need which may be addressed through the Missouri 911 Service Board’s 911 Financial Assistance Program and the 911 communications project proposed in the attached application.

NOW, THEREFORE, BE IT RESOLVED by the [*Insert “County Commission”, or if you are Sikeston or the City of St. Louis, your city governing body*]of [*Insert County Name, or if Sikeston or the City of St. Louis, city name*], Missouri, that it approves [*Insert County Name, or if Sikeston or the City of St. Louis, city name*] submitting the attached application to and entering into a project agreement with the Missouri 911 Service Board if the application is approved.

WHEREAS, [*Insert County Name, or if Sikeston or the City of St. Louis, city name]* authorize the Board to transmit funds to its county treasury, or if the county has an elected emergency services board established pursuant to 190.335 RSMo or 190.292 RSMo, its elected services board, all portions of financial assistance from the Fund for costs to be incurred by *[Insert name of the lead 911 entity]* in implementing the project;

WHEREAS, [*Insert County Name, or if Sikeston or the City of St. Louis, city name]* and [*Insert name of the lead 911 entity, and/or name of elected emergency services board, if applicable]* certify that any financial assistance obtained from the fund will be expended only for purposes specified in the approved application or the project agreement and allowed by law.

WHEREAS, if applicable, [*Insert County Name, or if Sikeston or the City of St. Louis, city name*] certifies that it will repay any portion of a loan that is transmitted directly to it by the Board for costs incurred in implementing the project, with interest as required by the Board, and will annually budget an amount sufficient to make any payments required by the Board under section 650.335, RSMo.

WHEREAS, if applicable *[Insert elected emergency services board established pursuant to 190.335 RSMo or 190.292 RSMo]* certifies that it, on behalf of its applicant, will repay any portion of a loan that is transmitted directly to it by the Board for costs incurred in implementing the project, with interest as required by the Board, and will annually budget an amount sufficient to make any payments required by the Board under section 650.335, RSMo. Delete this section if if you do not have an elected emergency services board.

THEREFORE, BE IT FURTHER RESOLVED, that the [*Applicant City/County, and/or 911 Services Authority or Other entity*] will dedicate $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of local cash matching funds to be used in this project. Delete this section if you are not requesting a loan.

**ACCEPTANCE OF TERMS AND CONDITIONS**.

This Agreement is to be signed by an authorized signatory of each 911 Services Authority and Applicant on the Application certifying that each agrees to comply with all the terms and conditions of the award and Agreement specified above.

The above terms and conditions of the grant are hereby accepted and agreed to as of the date specified.

**Applicant: (Insert County Name, or if Sikeston or the City of St. Louis, city name)**

Signatory: (Insert **name and title** of County Commissioner, or if Sikeston or the City of St.Louis, name of other governing body representative)

Signature:

Date:

**Elected Emergency Services Board, if applicable: (Insert name of Elected Services Board if you have one established pursuant to 190.335 RSMo or 190.292 RSMo)**

Signatory: (Insert name **and title** of Elected Emergency Service Board Representative)

Signature:

Date:

**Lead 911 Entity, if not already listed: (PSAP, for example)**

Signatory: (Insert name **and title** of primary contact for the project from the lead 911 entity)

Signature:

Date: