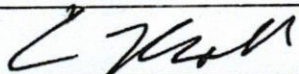


Contract / Leases / Agreements / Grants Form

This is	New		Renewal	<input checked="" type="checkbox"/>	Filling this out on a computer? Please type an X into the appropriate box.
This is a Grant	Yes	<input checked="" type="checkbox"/>	No		If you marked YES this needs to go through Grant Review .
This is an	Agreement _____ Contract _____ Lease _____ Other _____:				
Name of Entity who Contract / Lease / Agreement / Grant is with	STATE of Michigan - Marine Patrol Department of Natural Resources				
Project Name	Marine Enforcement				
Attorney Review	All Contracts / Leases / Agreements / Grants must have Attorney Review and approval through the Commissioner's Office.				
Insurance Review	All Contracts / Leases / Agreements / Grants must have appropriate insurance coverage per the attached list. It is the Department Heads responsibility to make sure that all requirements are met and listed on the insurance certificate.				
Total Amount	\$ 20,303.00				
Organization Match	\$ Federal Funded - Full / State Funded 35%				
County Match	\$ 15% = \$3045.45				

I have reviewed and approved this Contract / Lease / Agreement / Grant and attached appropriate insurance:

	3-9-23
The Department Head Requesting	Date Signed

GRANT REVIEW COMMITTEE APPROVAL:

County Clerk:	Date Signed:	I am requesting a meeting	
County Treasurer:	Date Signed:	I am requesting a meeting	
Finance Chairman:	Date Signed:	I am requesting a meeting	
County Administrator:	Date Signed:	I am requesting a meeting	

Please do NOT mark below this line

.....

INTEROFFICE USE ONLY

Date Received:	Date Sent for Attorney Review:
Attorney Approval Received:	Insurance Received:

Contract / Leases / Agreements / Grants Form

This is	New		Renewal	<input checked="" type="checkbox"/>	Filling this out on a computer? Please type an X into the appropriate box.
This is a Grant	Yes	<input checked="" type="checkbox"/>	No		If you marked YES this needs to go through Grant Review .
This is an	Agreement _____ Contract _____ Lease _____ Other _____:				
Name of Entity who Contract / Lease / Agreement / Grant is with	LE / Grants Management w/MDNR				
Project Name	MDNR MAINE SAFETY GRANT				
Attorney Review	All Contracts / Leases / Agreements / Grants must have Attorney Review and approval through the Commissioner's Office.				
Insurance Review	All Contracts / Leases / Agreements / Grants must have appropriate insurance coverage per the attached list. It is the Department Heads responsibility to make sure that all requirements are met and listed on the insurance certificate.				
Total Amount	\$ 20,303.00				
Organization Match	\$ 0				
County Match	\$ 12 of Federal Funds Approved 15% of State Funds				

I have reviewed and approved this Contract / Lease / Agreement / Grant and attached appropriate insurance:

The Department Head Requesting	Date Signed

GRANT REVIEW COMMITTEE APPROVAL:

County Clerk:	Date Signed:	I am requesting a meeting
County Treasurer: <i>Sandy Ladd</i>	Date Signed: <i>3-8-23</i>	I am requesting a meeting
Finance Chairman:	Date Signed:	I am requesting a meeting
County Administrator	Date Signed:	I am requesting a meeting

Please do NOT mark below this line

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INTEROFFICE USE ONLY

Date Received:	Date Sent for Attorney Review:
Attorney Approval Received:	Insurance Received:



ALPENA COUNTY SHERIFF'S OFFICE

Sheriff Erik W. Smith · 4900 M 32 W · Alpena, Michigan 49707
Phone (989) 354-9830 · Fax (989) 340-1008 · www.alpenasheriff.com

Please find the attached Michigan Department of Natural Resources Marine Safety Grant, I have requested \$20,303.00 on the application. The DNR will authorize money one of two ways. State funding or Federal funding. Historically we have had Federal funding and does not require a county match. State funding requires 15% county match.

I am requesting \$20,303.00. This is only the requested amount, historically we will be approved for a range of \$5,200 - \$7,200 depending on how much money the Coast Guard kicks in to County agencies.

Sgt. J.P. Ritter

Applicant Information

Instructions:

1. Enter the name of the Contact Person and select a Grant Type and the Type of Funds being requested.
2. Click **Save** to save this page.

Michigan Department of Natural Resources
Law Enforcement / Grants Management
**Marine Safety Program
Grant Application**

This information is required under the authority of Part 801 Marine Safety, 1994 PA 451, as amended.

**CFDA 97.012 Boating
Safety Financial Assistance**

Grant Applicant (Law Enforcement Agency)

Alpena County Sheriff Department

* Grant Type

Operating

* Contact Person

J.P. RITTER

* Type of Funds Requested

State

Federal

No Preference

*SIGMA Vendor Number

*SIGMA Address Code

386004890

CV0047952

*UEI Number *JSLNL2ZMUN55*
Number and Street or Rural Route

Telephone

FAX

4900 M-32 W

(989) 354-9839

N/A

City

State

ZIP

Alpena

MI

49707

Email

ritterj@alpenacounty.org

Law Enforcement Wages And Benefits

Instructions:

1. Enter the number of Full Time and/or Part Time personnel working in the Marine Safety Program.
2. If personnel are entered, then the information must be completed below.
3. Click **Save** to update totals on this page.

*Number of law enforcement personnel working in the Marine Safety program:

4
Full Time

2
Part Time

Detail of Law Enforcement Wages and Benefits:

Full Time

A) Average hourly wage of officers working in the county Marine Safety program	\$30.50
B) Average Fringe percentage	43.00%
C) Estimated total hours of Marine Safety law enforcement and related activities	100

Part Time

A) Average hourly wage of officers working in the county Marine Safety program	\$21.35
B) Average Fringe percentage	11.00%
C) Estimated total hours of Marine Safety law enforcement and related activities	525

Total Full Time	\$4,361.50
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Total Part Time	\$12,441.71
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Total	\$16,803.00
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Contracted Services, Supplies & Materials

Instructions:

1. Enter the information below as it pertains to this grant request.
2. Click **Save** to update totals on this page.

Patrol Vehicle Usage

A) Mileage rate calculation for vehicles.

	Mileage rate			\$
	Total estimated miles	x		
	Subtotal			\$0.00

B) Leased vehicle calculation for vehicles.

	Total Lease amount/month (all vehicles)			\$
	Number of months	x		
	Total estimated fuel & oil costs	+		\$
	Subtotal			\$0.00

C) Actual cost calculation for 2 vehicles.

	Total estimated fuel & oil costs			\$500.00
	Total estimated maintenance costs	+		\$500.00
	Subtotal			\$1,000.00

Patrol Vehicle Total
\$1,000.00

Patrol Boat Usage

A) Actual cost calculation for 3 vehicles.

Total estimated fuel & oil costs
\$2,000.00

Total estimated maintenance costs + \$500.00

Patrol Boat Total
\$2,500.00

Materials/Supplies to be purchased

Item	Quantity	Cost per item	Total
		\$	\$0.00
Materials/Supplies Total			\$0.00

Services to be Contracted

Service	Cost per service	
	\$	
Contracted Services Total		\$0.00

Total Contracted Services, Supplies & Materials
\$3,500.00

Summary of Estimated Expenditures

Instructions:

1. Click **Save** to update totals on this page.

Law Enforcement Wages and Benefits Total (Operating grant)	\$16,803
Contracted Services, Supplies & Materials Total (Operating grant)	\$3,500
Total	\$20,303.00