

EMHSD-19 (7-23)
MICHIGAN STATE POLICE
EMERGENCY MANAGEMENT & HOMELAND SECURITY DIVISION
APPLICATION FOR DISASTER ASSISTANCE

(Under Section 19, Act 390 PA 1976 as amended)

1. Applications may be submitted by a county or municipality.
2. Local units submitting applications shall appoint an agent to act on their behalf.
3. In accordance with Rule 30.54, this application shall be accompanied by a resolution of the governing body (see page 2 for sample language).
4. Applicant completes unshaded parts of this form.

1. POLITICAL SUBDIVISION		2. APPLICANT'S AGENT		INTERNAL USE ONLY	
Name Charter Twp. of Meridian		Name Dante Ianni		Date Received	
Address 5151 Marsh Rd Okemos, MI 48864		Title Finance Director		Date Reviewed	
Population 43,916		Address 5151 Marsh Rd Okemos, MI 48864		Incident No.	
				Applicant's Agent Telephone Number 517-853-4104	
3. DISASTER BURDEN FOR PROGRAM ELIGIBILITY (See Rule 30.53(d) of the Administrative Rules)					
Dates of Consecutive 5-day period From 8/24/23 TO 8/28/23			Current Fiscal Year General Fund Budget for Affected/Responding Agency 2024 - \$8,106,734		
One (1) percent of current general fund operating budget (see above budget) \$81,067.34			Amount of actual expenses for listed agencies during 5-day period \$30,345.48		
Identify Affected/Responding Agencies for Incident: Meridian Twp. Fire Department Meridian Twp. Department of Public Works					
4. ALL ELIGIBLE DISASTER EXPENDITURES AND COSTS FOR REIMBURSEMENT CONSIDERATION (Rule 30.56 of the Admin. Rules)					
Overtime for police department	0	Equipment repair costs for disaster	0		
Overtime for fire department	1021.13	Volunteer costs	0		
Overtime for public works department	0	Costs to repair damage to public facilities or road systems caused by disaster	0		
Overtime for county road commission	0	Other Costs Not Listed Above (list each)	29324.35		
Overtime for emergency medical services	0	Granger \$664.35 Upper Cut Tree service \$4,000.00	29324.35		
Overtime for other employees	0	Redwood Landscaping \$16,095	29324.35		
Contracts with other jurisdictions	0	Luke Landscaping \$8,565	29324.35		
Fuel for equipment used	0	TOTAL	30,345.48		
Shelter supplies for disaster	0				
<i>NOTE: Normal or day-to-day expenses; any costs reimbursed by a federal, state or local agency; any costs reimbursed by insurance; or any capital outlay expenditures are not eligible.</i>					
5. PREVIOUS OPERATING BUDGET (See Rule 30.58 of the Administrative Rules)					
Applicants total operating budget for preceding fiscal year (all fund sources) \$74,723,355			Ten (10) percent of the amount at left \$7,472,335.50		
6. SIGNATURE OF APPLICANT'S AGENT					
Signature				Date	
7. DISTRICT COORDINATOR REVIEW					
	Yes	No	N/A		No
Application and resolution complete				Applicant eligible	
Copy of local emergency declaration				Amount claimed	
Exhaustion of local effort				Amount eligible	
Emergency Management Program				COMMENTS:	
Work Agreement Form					
Annual Exercise					
Current Plan Standard					
Adequate Plan Standard					
Plan Implementation Standard					
Support Plan (if applicable)					
Substantiation of Claims Standard				District Coordinator's Signature	Date
Damage Assessment Standard					
DIRECTORS RECOMMENDATION					
Grant approval recommended <input type="checkbox"/>		Grant amount recommended		Grant disapproval recommended <input type="checkbox"/>	
Reasons for disapproval					
Signature				Date	

**STATE DISASTER CONTINGENCY FUND GRANT
RESOLUTION**

BE IT RESOLVED BY _____ (1) OF _____ (2),

WHEREAS, _____ (2), Michigan, is a political subdivision within the State of Michigan with an official Emergency Operations plan in compliance with Section 19 of the Emergency Management Act, Act 390, Public Acts of 1976, as amended.

WHEREAS, _____ (2), sustained severe losses of major proportions brought on by the _____ (3) resulting in the following conditions (4):

WHEREAS, _____ (1) certifies that the _____ (5) Emergency Operations Plan was implemented at the onset of the disaster at _____ (6) and all applicable disaster relief forces identified therein were exhausted.

WHEREAS, as a direct result of the disaster, public damage and expenditures were extraordinary and place an unreasonably great financial burden on _____ (2) totaling _____ (7).

NOW, THEREFORE BE IT RESOLVED THAT _____ (1) requests the Governor authorize a grant to the _____ (2) from the State Disaster Contingency Fund pursuant to Section 19, Act 390, Public Acts of 1976, as amended.

FURTHERMORE, _____ (8) is authorized to execute for and in behalf of _____ (2) the application for financial assistance and to provide to the State any information required for that purpose.

Action taken and incorporated in the minutes of a meeting of

_____ (name of governing body)

on _____ (date)

Attest;  (name of clerk)

NOTES: (1) Insert name of governing body (City Council, County Board of Commissioners, Township Board, etc.)

(2) Insert name of political subdivision (City of _____, _____ County, Township of _____)

(3) Insert the type of disaster (tornado, flood, explosion, etc.) _____ . etc.)

(4) Insert a brief description of the effects of the disaster on the community.

(5) County governments and municipalities under 10,000 population insert the term "county"; municipalities over 10,000 population insert the term 'municipal' if they maintain a separate plan; or the term "county/municipal" if they are included in the county plan.

(6) Insert the time and date the plan was implemented.

(7) Insert the total dollar value of eligible disaster expenditures and costs (from Section 3 of the application).

(8) Insert the name of the applicant's agent who is authorized to act for and on behalf of the political subdivision.