

Cal EMA ID# \_\_\_\_\_

Award # \_\_\_\_\_

## CALIFORNIA EMERGENCY MANAGEMENT AGENCY

### GRANT AWARD FACE SHEET (Cal EMA 2-101)

The California Emergency Management Agency, hereafter designated Cal EMA, hereby makes a grant award of funds to the following:

1. Grant Recipient: County of Tulare

hereafter designated Recipient, in the amount and for the purpose and duration set forth in this grant award.

2. Implementing Agency: Tulare County Sheriff's Department

3. Project Title: So. Valley Marijuana Suppression Program

4. Grant Period: 07/01/10 to 06/30/11

\*Select the Grant year and fund source(s) from the lists below or type the appropriate acronym in box 9. Enter the amount(s) from each source. Please do not enter both State and Federal fund sources on the same line. Add any cash match(s) and enter total in Block 10G.

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
Select	5. Fed Prgms		\$550,000	\$550,000	N/A	N/A	N/A	\$550,000
Select	6. Fed Prgms							
Select	7. Fed Prgms							
Select	8. State Prgms							
Select	9. State Prgms							
	10. TOTALS		\$550,000	\$550,000				10 Grand Total: \$550,000

11. This grant award consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify I am vested with the authority, and have the approval of the City/County Financial Officer, City Manager, County Administrator, or Governing Board Chair, to enter into this grant award agreement; and all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Cal EMA Program Guidelines, the Cal EMA Recipient Handbook, the Federal OJP Financial Guide and Program Guidelines (if applicable), and the Cal EMA audit requirements, as stated in the applicable RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in the applicable RFP or RFA and agrees that the allocation of funds is contingent on the enactment of the State Budget.

12. Official Authorized to Sign for Applicant/Grant Recipient:

Federal Employer ID Number: 94-6000545

Name: J. Steven Worthley

Title: Chairman, Board of Supervisors

Payment Mailing Address: 2404 W. Burrell Ave.

City: Visalia, CA Zip: 93291

Telephone: (559) 733-6245, x 6520 FAX: (559) 737-4283  
(area code) (area code)

Email: TLSaenz@co.tulare.ca.us

Signature

Date: 5/25/10

[FOR Cal EMA USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Cal EMA Fiscal Officer

Date

Cal EMA Director (or designee)

Date

**CERTIFICATION OF ASSURANCE OF COMPLIANCE  
ANTI-DRUG ABUSE  
METHAMPHETAMINE LABORATORY OPERATIONS**

I, J. Steven Worthley hereby certify that  
(official authorized to sign grant award; same person as Section 12 on Grant Award Face Sheet)

RECIPIENT: County of Tulare  
IMPLEMENTING AGENCY: Tulare County Sheriff's Department  
PROJECT TITLE: South Valley Marijuana Suppression Program

is responsible for reviewing the *Grant Recipient Handbook* and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by Cal EMA including, but not limited to, the following areas:

**I. Federal Grant Funds**

Recipients expending \$500,000 or more in federal grant funds annually are required to secure an audit pursuant to OMB Circular A-133 and are allowed to utilize federal grant funds to budget for the audit costs. See Section 8000 of the Recipient Handbook for more detail.

- ☒ The above named recipient receives \$500,000 or more in federal grant funds annually.
- ☐ The above named recipient does not receive \$500,000 or more in federal grant funds annually.

**II. Equal Employment Opportunity – (*Recipient Handbook Section 2151*)**

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). **Cal EMA-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Equal Employment Opportunity Officer: Keven Backman  
Title: Human Resource Officer  
Address: 2900 W. Burrel Ave., Visalia, CA 93291  
Phone: (559) 636-4920  
Email: KBackman@co.tulare.ca.us

***Law enforcement personnel may seize as evidence and remove any bottles, cans, jugs and other containers, as well as contaminated apparatus and chemical samples from a clandestine drug site, however, law enforcement agencies are not responsible for the cleanup/remediation of any rooms, buildings or surrounding environments, including septic systems, rivers, streams or contaminated soils.***

(Check one of the following four boxes)

☐ Will **not** accept the JAG funds for the period of Enter the correct grant cycle.

OR

☒ Will accept the JAG funds for the period of July 1, 2010 - June 30, 2011, but will not use them in the **seizure or removal** of clandestine methamphetamine laboratories.

OR

☐ Will accept the JAG funds for the period of Enter the correct grant cycle, and comply with Federal, State, and local environmental, health, and safety laws and regulations applicable to the **seizure** of clandestine methamphetamine laboratories. Said compliance will include the following mitigation measures:

1. Recipient will provide medical screening of personnel assigned or to be assigned by the recipient to the seizure of clandestine methamphetamine laboratories;
2. Recipient will provide Occupational Safety and Health Administration (OSHA) required initial and refresher training for law enforcement officials and all other personnel assigned to the seizure of clandestine methamphetamine laboratories;
3. Recipient will equip personnel, as determined by their specific duties, with OSHA required protective wear and other required safety equipment;
4. Recipient will notify the Department of Toxic Substances Control (DTSC), and send written notification to the property owner of record, and the local Environmental Management and/or Public Health Department whenever a clandestine methamphetamine laboratory is seized; and
5. Recipient will enter into a written agreement with the local Social Services Department to notify the local Social Services Department whenever a minor is found at a clandestine methamphetamine laboratory site, and, if determined to be necessary, require that qualified personnel be dispatched to the site and, if determined to be necessary:
  - (i) Respond to the minor's health needs that relate to methamphetamine toxicity;
  - (ii) Take the minor into protective custody unless the minor is criminally involved in the clandestine methamphetamine laboratory activities or is subject to arrest/detention for other criminal violations;
  - (iii) Arrange for medical testing for methamphetamine toxicity; and
  - (iv) Arrange for any follow-up medical tests, examinations, or health care made necessary as a result of methamphetamine toxicity.

OR

☐ Will accept the JAG funds for the period of Enter the correct grant cycle, and comply with Federal, State, and local environmental, health, and safety laws and regulations applicable to the **seizure and/or removal** of clandestine methamphetamine laboratories. Said compliance will include the following mitigation measures:

1. Recipient will provide medical screening of personnel assigned or to be assigned by the recipient to the seizure and/or removal of clandestine methamphetamine laboratories;
2. Recipient will provide Occupational Safety and Health Administration (OSHA) required initial and refresher training for law enforcement officials and all other personnel assigned to the seizure and/or removal of clandestine methamphetamine laboratories;
3. Recipient will equip personnel, as determined by their specific duties, with OSHA required protective wear and other required safety equipment;
4. Recipient will send written notification to the property owner of record, and the local Environmental Management and/or Public Health Department whenever a clandestine methamphetamine laboratory is seized;
5. Recipient will enter into a written agreement with the local Social Services Department to notify the local Social Services Department whenever a minor is found at a clandestine methamphetamine laboratory site, and, if determined to be necessary, require that qualified personnel be dispatched to the site and, if determined to be necessary:
  - (v) Respond to the minor's health needs that relate to methamphetamine toxicity;
  - (vi) Take the minor into protective custody unless the minor is criminally involved in the clandestine methamphetamine laboratory activities or is subject to arrest/detention for other criminal violations;
  - (vii) Arrange for medical testing for methamphetamine toxicity; and
  - (viii) Arrange for any follow-up medical tests, examinations, or health care made necessary as a result of methamphetamine toxicity.
6. Recipient will assign properly trained personnel to prepare a Hazard Assessment and Recognition Plan (HARP) for the clandestine methamphetamine laboratory site;
7. Recipient or DTSC will utilize qualified disposal personnel to remove the chemicals, associated glassware, equipment, and contaminated materials and wastes from the clandestine methamphetamine laboratory site;
8. Recipient or DTSC will dispose of the chemicals, associated glassware, equipment, and contaminated materials and wastes at properly licensed disposal facilities or, when allowable, at properly licensed recycling facilities; and
9. Recipient or DTSC will monitor the records involving the transport, disposal and recycling components of subparagraphs numbered 7 and 8 immediately above in order to ensure proper compliance.

All appropriate documentation must be maintained on file by the project and available for Cal EMA or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Recipient may be ineligible for award of any future grants if the Cal EMA determines that any of the following has occurred:

(1) the Recipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

### CERTIFICATION

I, the official named below, am the same individual authorized to sign the Grant Award Agreement [Section 12 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: \_\_\_\_\_

Authorized Official's Typed Name: J. Steven Worthley

Authorized Official's Title: Chairman, Tulare County Board of Supervisors

Date Executed: 5/25/10

Federal Employer ID #: 94-6000545 Federal DUNS # 038431792

Current Central Contractor Registration Yes ☒ No ☐

Executed in the City/County of: County of Tulare

### AUTHORIZED BY: (not applicable to State agencies)

☐ City Financial Officer

☒ County Financial Officer

☐ City Manager

☐ County Manager

☐ Governing Board Chair

Signature: \_\_\_\_\_

Typed Name: Rita A. Woodard

Title: Auditor-Controller / Treasurer-Tax Collector, County of Tulare