

|       |        |  |            |           |
|-------|--------|--|------------|-----------|
| CFDA# | 97.067 |  | Subaward # | 2018-xxxx |
|-------|--------|--|------------|-----------|

Riverside County Emergency Management Department  
GRANT SUBAWARD FACE SHEET

Subrecipient: Lake Elsinore

DUNS #:

Implementing Agency: City of Lake Elsinore

DUNS #:

Implementing Agency Address: 130 S. Main Street

Lake Elsinore

92530-4163

City

Location of Project: Lake Elsinore

Riverside

92530-4163

City

County

Disaster/Program Title: State Homeland Security Program

6. Performance Period: 10/30/17 to 05/31/20

| Project         | Discipline | Federal Amt. Requested | Total   | Cash Match | In-Kind Match (3rd Party) | Total Match | Total Project Cost          |
|-----------------|------------|------------------------|---------|------------|---------------------------|-------------|-----------------------------|
| EOC Enhancement | EMG        | \$6,237                |         | \$2,079    |                           | \$2,079     | \$8,316                     |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
|                 |            |                        |         |            |                           | \$0         | \$0                         |
| TOTALS          |            | \$6,237                | \$6,237 | \$2,079    | \$0                       | \$2,079     | Total Project Cost: \$8,316 |

This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

Official Authorized to Sign for Subrecipient:

Federal Employer ID Number:

Name: Jason Simpson

Title: Assistant City Manager

Telephone: (951) 674-3124

Email: [jsimpon@lake-elsinore.org](mailto:jsimpon@lake-elsinore.org)

(include area code)

Payment Mailing Address: 130 S Main Street

City: Lake Elsinore

Zip+ 4: 92530-4163

Signature:

Date:

Grant Management Point of Contact: (Individual designated by the Authorized Agent to manage all grant functions)

Title: Public Works Superintendent

Name: Rick De Santiago

Email: [rdesantiago@lake-elsinore.org](mailto:rdesantiago@lake-elsinore.org)

Telephone: (951) 674-5170

(include area code)



| FY18 State Homeland Security Program (SHSP) Application   |   |           |             |
|---|---|-----------|-------------|
| Agency Name:  | City of Lakre Elsinore  |           |             |
| Project Name:   | EOC Enhancement   |           |             |
| Amount Requested: (Whole amts only)   | \$8,316   |           |             |
| Can you accept partial funding? If so, what is the mininum you can accept?  | Yes   | How Much? | \$ 4,158.00 |
| In the event this project is eligible but not able to be funded at the beginning of cycle do you want this project to be considered for funding at a later date if additional funds become available?   | Yes   |           |             |
| How long will it take to complete this project if funded?   | 1 Year  |           |             |
| Project Description: please be precise and make sure to include what you are purchasing or activity you are providing   | Purchase two (2) Honda EU 7000IS Geneators to help facilitate power required to operate an EOC  |           |             |
| Is this an interoperable communications project? If yes explain how this project enhances interoperability throughout the OA , who you are interoperable with and obtain approval for project from the Communications Manager for your agency.<br><br>_____<br>Communications Manager's Printed Name<br><br>_____<br>Communications Manager's Signature | No  |           |             |
| Describe the need for this project (Be precise):  | In the event the primary EOC is non functional the generators will be relocated to a secondary EOC site   |           |             |
| How was the need determined?  | The only EOC the City designated is our current fire station with a stationary backup geneator. The portable generators will be used at secondary EOC site. |           |             |
| How does this project relate to a terrorism event?  | All Hazards EOC events  |           |             |
| Is this project a multi-region project, please describe regional impact and benefit?  | Yes, In a large scale event , the EOC will be supporting Multi Regional projects.   |           |             |



|       |        |  |            |           |
|-------|--------|--|------------|-----------|
| CFDA# | 97.067 |  | Subaward # | 2018-xxxx |
|-------|--------|--|------------|-----------|

Riverside County Emergency Management Department  
GRANT SUBAWARD FACE SHEET

Subrecipient:

Lake Elsinore

DUNS #:

Implementing Agency:

City of Lake Elsinore

DUNS #:

Implementing Agency Address:

130 S. Main Street

Lake Elsinore

92530-4163

City

Zip+4

Location of Project:

Lake Elsinore

Riverside

92530-4163

City

County

Zip+4

Disaster/Program Title:

State Homeland Security Program

6. Performance Period:

10/30/17

to

05/31/20

| Project                | Discipline | Federal Amt. Requested | Total   | Cash Match | In-Kind Match (3rd Party) | Total Match | Total Project Cost          |
|------------------------|------------|------------------------|---------|------------|---------------------------|-------------|-----------------------------|
| Information Technology | EMG        | \$6,300                |         | \$2,100    |                           | \$2,100     | \$8,400                     |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
|                        |            |                        |         |            |                           | \$0         | \$0                         |
| TOTALS                 |            | \$6,300                | \$6,300 | \$2,100    | \$0                       | \$2,100     | Total Project Cost: \$8,400 |

This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

Official Authorized to Sign for Subrecipient:

Name: Jason Simpson

Telephone: (951) 674-3124

(include area code)

Payment Mailing Address: 130 S Main Street

Signature:

Federal Employer ID Number:

Title: Assistant City Manager

Email: jsimpon@lake-elsinore.org

City: Lake Elsinore

Zip+ 4: 92530-4163

Date:

Grant Management Point of Contact:

(Individual designated by the Authorized Agent to manage all grant functions)

Name: Rick De Santiago

Telephone: (951) 674-5170

(include area code)

Title: Public Works Superintendent

Email: rdesantiago@lake-elsinore.org





| FY18 State Homeland Security Program (SHSP) Application   |  |           |             |
|---|--|-----------|-------------|
| Agency Name:  | City of Lakre Elsinore   |           |             |
| Project Name:   | INFORMTION TECHNOLOGY  |           |             |
| Amount Requested: (Whole amts only)   | \$8,400  |           |             |
| Can you accept partial funding? If so, what is the mininum you can accept?  | Yes  | How Much? | \$ 4,200.00 |
| In the event this project is eligible but not able to be funded at the beginning of cycle do you want this project to be considered for funding at a later date if additional funds become available?   | Yes  |           |             |
| How long will it take to complete this project if funded?   | 1 Year   |           |             |
| Project Description: please be precise and make sure to include what you are purchasing or activity you are providing   | Purchase twelve (12) New Latitude 3580 Laptops for EOC use   |           |             |
| Is this an interoperable communications project? If yes explain how this project enhances interoperability throughout the OA , who you are interoperable with and obtain approval for project from the Communications Manager for your agency.<br><br>_____<br>Communications Manager's Printed Name<br><br>_____<br>Communications Manager's Signature | No   |           |             |
| Describe the need for this project (Be precise):  | In the event the EOC is activated the laptops will be essencial for communicating with the Riverside County Emergency Operations Center via WebEOC |           |             |
| How was the need determined?  | Current laptops over 10 years old  |           |             |
| How does this project relate to a terrorism event?  | All Hazards EOC events   |           |             |
| Is this project a multi-region project, please describe regional impact and benefit?  | Yes, In a large scale event , the EOC will be supporting Multi Regional projects.  |           |             |





|       |        |  |            |           |
|-------|--------|--|------------|-----------|
| CFDA# | 97.067 |  | Subaward # | 2018-xxxx |
|-------|--------|--|------------|-----------|

Riverside County Emergency Management Department  
GRANT SUBAWARD FACE SHEET

Subrecipient:

Lake Elsinore

DUNS #:

Implementing Agency:

City of Lake Elsinore

DUNS #:

Implementing Agency Address:

130 S. Main Street

Lake Elsinore

92530-4163

Location of Project:

Lake Elsinore

Riverside

92530-4163

Disaster/Program Title:

State Homeland Security Program

6. Performance Period:

10/30/17

to

05/31/20

City

County

Zip+4

| Project   | Discipline | Federal Amt. Requested | Total   | Cash Match | In-Kind Match (3rd Party) | Total Match | Total Project Cost          |
|-----------|------------|------------------------|---------|------------|---------------------------|-------------|-----------------------------|
| Mass Care | EMG        | \$6,237                |         | \$2,079    |                           | \$2,079     | \$8,316                     |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
|           |            |                        |         |            |                           | \$0         | \$0                         |
| TOTALS    |            | \$6,237                | \$6,237 | \$2,079    | \$0                       | \$2,079     | Total Project Cost: \$8,316 |

This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

Official Authorized to Sign for Subrecipient:

Name: Jason Simpson

Telephone: (951) 674-3124

Payment Mailing Address: 130 S Main Street

Signature:

Federal Employer ID Number:

Title: Assistant City Manager

Email: jsimpon@lake-elsinore.org

City: Lake Elsinore

Zip+ 4: 92530-4163

Date:

(include area code)

Grant Management Point of Contact:

Name: Rick De Santiago

Telephone: (951) 674-5170

(Individual designated by the Authorized Agent to manage all grant functions)

Title: Public Works Superintendent

Email: rdesantiago@lake-elsinore.org

(include area code)



| FY18 State Homeland Security Program (SHSP) Application   |   |           |             |
|---|---|-----------|-------------|
| Agency Name:  | City of Lake Elsinore   |           |             |
| Project Name:   | Mass Care   |           |             |
| Amount Requested: (Whole amts only)   | \$8,316   |           |             |
| Can you accept partial funding? If so, what is the mininum you can accept?  | Yes   | How Much? | \$ 4,000.00 |
| In the event this project is eligible but not able to be funded at the beginning of cycle do you want this project to be considered for funding at a later date if additional funds become available?   | Yes   |           |             |
| How long will it take to complete this project if funded?   | 1 Year  |           |             |
| Project Description: please be precise and make sure to include what you are purchasing or activity you are providing   | Mobile Inflatable Tent. Size: 20ft.L x 12ft. W x 10ft. H - Rapid deployment shelter can be used as command post, triage and / or evidence protection.   |           |             |
| Is this an interoperable communications project? If yes explain how this project enhances interoperability throughout the OA , who you are interoperable with and obtain approval for project from the Communications Manager for your agency.<br><br>_____<br>Communications Manager's Printed Name<br><br>_____<br>Communications Manager's Signature | No  |           |             |
| Describe the need for this project (Be precise):  |   |           |             |
| How was the need determined?  | The only EOC the City designated is our current fire station. Should the fire station become inoperable, we can use the mobile tent as a secondary EOC site. Also, depending on the devastation cased by the event, the Mobile tent can |           |             |
| How does this project relate to a terrorism event?  | All Hazards EOC events  |           |             |
| Is this project a multi-region project, please describe regional impact and benefit?  | Yes, In a large scale event , the EOC will be supporting Multi Regional projects.   |           |             |



The State has prioritized the following investment strategies for the FY2018 award. Please note that Investment Justification #1(IJ #1) is to be used to report on Regional Threat Assessment Center activities only.

**IJ #1:• Strengthen the Capabilities of the State Threat Assessment System (for Fusion Centers Only)**

**IJ #2: • Protect Critical Infrastructure and Key Resources**

Site vulnerability and risk assessments; cameras, lighting, gates, bollards, fencing, etc. at critical infrastructure sites; access control system .

**IJ #3: Enhance Cybersecurity**

Information and security systems; cyber information sharing systems, software upgrades for information system and network security

**IJ #4: Strengthen Communications Capabilities through Planning, Governance, Technology and**

Radios, 911 dispatch systems, Public alert and warning systems, towers

**IJ #5: Improve Medical and Health Capabilities**

Medical surge; medical counter measures dispensing; medical supplies, isolation and quarantine; patient tracking

**IJ #6: • Prevent Violent Extremism through Multi-Jurisdictional/Inter-Jurisdictional Collaboration and**

May be likened to gang prevention programs, seminars/conferences related to PVE, training or planning related to PVE, Sovereign Citizens awareness training

**IJ #7:• Enhance Community Resilience, including partnerships with volunteers and community based organizations and programs**

CERT programs, Volunteer or donations management projects, VOAD programs, Ready campaigns

**IJ #8: • Strengthen Information Sharing and Collaboration**

agencies

**IJ #9: • Enhance Multi-Jurisdictional/Inter-Jurisdictional All Hazards Incident Planning, Response & Recovery Capabilities**

EOC upgrades or exercises, WebEOC projects, Fire incident response, mass evacuation, HazMat Teams, Fatality Management, Catastrophic Planning, Mass Care, Incident Management Teams, Search and Rescue, Bomb squads, SWAT Teams, Active shooter training and exercises, recovery related projects

**IJ #10: Homeland Security Exercise, Evaluation and Training Programs**

This IJ is about training and exercise infrastructure and not specific trainings and exercises. Projects include: training and exercise program staff, equipment for multi-purpose training and exercise facilities, multi-year training and exercise plan updates or conferences

ification

# Core Capabilities

This page contains the 32 core capabilities identified in the National Preparedness Goal and is intended to assist everyone who has a role in achieving all of the elements in the Goal.

These capabilities are referenced in many national preparedness efforts, including the National Planning Frameworks. The Goal grouped the capabilities into five mission areas, based on where they most logically fit. Some fall into only one mission area, while some others apply to several mission areas.

**When choosing a Core Capability please keep in mind that it should align with the end result or outcome of whatever it is you are doing, for example not all plans would fall under Planning. An overall plan such as and EOP would be under the Planning core capability but a Mass Dispensing Plan would fall under the "Public Health, Healthcare, and Emergency Medical Services" core capability because it is a specific plan for a specific situation.**

---

## Planning

Mission Areas: All

Description: Conduct a systematic process engaging the whole community as appropriate in the development of executable strategic, operational, and/or tactical-level approaches to meet defined objectives.

## Operational Coordination

Mission Areas: All

Description: Establish and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities.

## Public Information and Warning

Mission Areas: All

Description: Deliver coordinated, prompt, reliable, and actionable information to the whole community through the use of clear, consistent, accessible, and culturally and linguistically appropriate methods to effectively relay information regarding any threat or hazard, as well as the actions being taken and the assistance being made available, as appropriate.

## Forensics and Attribution



## Mission Area: Prevention

Description: Conduct forensic analysis and attribute terrorist acts (including the means and methods of terrorism) to their source, to include forensic analysis as well as attribution for an attack and for the preparation for an attack in an effort to prevent initial or follow-on acts and/or swiftly develop counter-options.

## Intelligence and Information Sharing

---

Mission Areas: Prevention, Protection

Description: Provide timely, accurate, and actionable information resulting from the planning, direction, collection, exploitation, processing, analysis, production, dissemination, evaluation, and feedback of available information concerning physical and cyber threats to the United States, its people, property, or interests; the development, proliferation, or use of WMDs; or any other matter bearing on U.S. national or homeland security by local, state, tribal, territorial, Federal, and other stakeholders. Information sharing is the ability to exchange intelligence, information, data, or knowledge among government or private sector entities, as appropriate.

## Interdiction and Disruption

---

Mission Areas: Prevention, Protection

Description: Delay, divert, intercept, halt, apprehend, or secure threats and/or hazards.

## Screening, Search, and Detection

---

Mission Areas: Prevention, Protection

Description: Identify, discover, or locate threats and/or hazards through active and passive surveillance and search procedures. This may include the use of systematic examinations and assessments, biosurveillance, sensor technologies, or physical investigation and intelligence.

## Access Control and Identity Verification

---

Mission Area: Protection

Description: Apply and support necessary physical and technological measures to control admittance to critical locations and systems.

## Cybersecurity

Mission Area: Protection

Description: Protect (and if needed, restore) electronic communications systems, information, and services from damage, unauthorized use, and exploitation.

## Physical Protective Measures

Mission Area: Protection

Description: Implement and maintain risk-informed countermeasures, and policies protecting people, borders, structures, materials, products, and systems associated with key operational activities and critical infrastructure sectors.

### **Risk Management for Protection Programs and Activities**

Mission Area: Protection

Description: Identify, assess, and prioritize risks to inform Protection activities, countermeasures, and investments.

### **Supply Chain Integrity and Security**

Mission Area: Protection

Description: Strengthen the security and resilience of the supply chain.

### **Community Resilience**

---

Mission Area: Mitigation

Description: Enable the recognition, understanding, communication of, and planning for risk and empower individuals and communities to make informed risk management decisions necessary to adapt to, withstand, and quickly recover from future incidents.

### **Long-term Vulnerability Reduction**

---

Mission Area: Mitigation

Description: Build and sustain resilient systems, communities, and critical infrastructure and key resources lifelines so as to reduce their vulnerability to natural, technological, and human-caused threats and hazards by lessening the likelihood, severity, and duration of the adverse consequences.

### **Risk and Disaster Resilience Assessment**

---

Mission Area: Mitigation

Description: Assess risk and disaster resilience so that decision makers, responders, and community members can take informed action to reduce their entity's risk and increase their resilience.

### **Threats and Hazards Identification**

---

Mission Area: Mitigation

Description: Identify the threats and hazards that occur in the geographic area; determine the frequency and magnitude; and incorporate this into analysis and planning processes so as to clearly understand the needs of a community or entity.

### **Critical Transportation**

---

Mission Area: Response

Description: Provide transportation (including infrastructure access and accessible transportation services) for response priority objectives, including the evacuation of people and animals, and the delivery of vital response personnel, equipment, and services into the affected areas.

### [Environmental Response/Health and Safety](#)

Mission Area: Response

Description: Conduct appropriate measures to ensure the protection of the health and safety of the public and workers, as well as the environment, from all-hazards in support of responder operations and the affected communities. Haz-Mat activities are included in this capability

### [Fatality Management Services](#)

Mission Area: Response

Description: Provide fatality management services, including decedent remains recovery and victim identification, working with local, state, tribal, territorial, insular area, and Federal authorities to provide mortuary processes, temporary storage or permanent internment solutions, sharing information with mass care services for the purpose of reunifying family members and caregivers with missing persons/remains, and providing counseling to the bereaved.

### [Fire Management and Suppression](#)

Mission Area: Response

Description: Provide structural, wildland, and specialized firefighting capabilities to manage and suppress fires of all types, kinds, and complexities while protecting the lives, property, and the environment in the affected area.

### [Infrastructure Systems](#)

Mission Area: Response, Recovery

Description: Stabilize critical infrastructure functions, minimize health and safety threats, and efficiently restore and revitalize systems and services to support a viable, resilient community.

### [Logistics and Supply Chain Management](#)

Mission Area: Response

Description: Deliver essential commodities, equipment, and services in support of impacted communities and survivors, to include emergency power and fuel support, as well as the coordination of access to community staples. Synchronize logistics capabilities and enable the restoration of impacted supply chains.

## Mass Care Services

Mission Area: Response

Description: Provide life-sustaining and human services to the affected population, to include hydration, feeding, sheltering, temporary housing, evacuee support, reunification, and distribution of emergency supplies.

## Mass Search and Rescue Operations

Mission Area: Response

Description: Deliver traditional and atypical search and rescue capabilities, including personnel, services, animals, and assets to survivors in need, with the goal of saving the greatest number of endangered lives in the shortest time possible.

## On-scene Security, Protection, and Law Enforcement

Mission Area: Response

Description: Ensure a safe and secure environment through law enforcement, Bomb Squads and related security and protection operations for people and communities located within affected areas and also for response personnel engaged in lifesaving and life-sustaining operations.

## Operational Communications

Mission Area: Response

Description: Ensure the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces.

## Public Health, Healthcare, and Emergency Medical Services

Mission Area: Response

Description: Provide lifesaving medical treatment via Emergency Medical Services and related operations and avoid additional disease and injury by providing targeted public health, medical, and behavioral health support, and products to all affected populations.

## Situational Assessment

Mission Area: Response

Description: Provide all decision makers with decision-relevant information regarding the nature and extent of the hazard, any cascading effects, and the status of the response.

## Economic Recovery

Mission Area: Recovery

Description: Return economic and business activities (including food and agriculture) to a healthy state and develop new business and employment opportunities that result in an economically viable community.

### Health and Social Services

Mission Area: Recovery

Description: Restore and improve health and social services capabilities and networks to promote the resilience, independence, health (including behavioral health), and well-being of the whole community.

### Housing

Mission Area: Recovery

Description: Implement housing solutions that effectively support the needs of the whole community and contribute to its sustainability and resilience.

### Natural and Cultural Resources

Mission Area: Recovery

Description: Protect natural and cultural resources and historic properties through appropriate planning, mitigation, response, and recovery actions to preserve, conserve, rehabilitate, and restore them consistent with post-disaster community priorities and best practices and in compliance with applicable environmental and historic preservation laws and executive orders