

Daily Use Radio Grant Program Application



Department of Military Affairs 2400 Wright Street Madison, WI 53708 Phone: 608-888-5501

State of Wisconsin Department of Military Affairs Office of Emergency Communications DMA- 2301 (C.9/2024)

Application complies with Wis. Stat. §323.29(2) and 323.29(5). Completion of the form is voluntary; however, lack thereof will prevent grant processing.

INSTRUCTIONS: Submit completed form with required documentation to <u>interop@widma.gov</u> by the deadline specified in the grant announcement. If you are experiencing issues submitting your application, call (608) 888-5501 for assistance.

SECTION 1 Applicant Information			
AGENCY NAME			
PHYSICAL ADDRESS	MAILING ADDRESS (Leave blank if same as physical address)		
Main Point of Contact			
NAME	TITLE		
EMAIL	PHONE NUMBER		
Secondary Point of Contact (must be different from above)			
NAME	TITLE		
EMAIL	PHONE NUMBER		
Signatory Official			
NAME	TITLE		
EMAIL	PHONE NUMBER		

SECTION 2 Project Narrative		
A. Provide a summary of the proposed expenses to be funded during the grant period.		
B. Provide a proposed timeline for your project(s), including proposed start/end date, anticipated purchasing process plan and implementation schedule. Timeline should not exceed May 1, 2027.		

SECTION 3 Background Information		
A. Please describe how WISCOM is used by your agency/county today.		
B. Please describe any activities undertaken to consolidate equipment needs and requirements with other agencies to leverage volume discounts and maximize the purchasing power of grant funds.		

C. Please describe and/or provide evidence of investment in increased local WISCOM coverage and/or usage.			
SECTIO	N 4 Standards Compliance Certification		
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	g this application form, the applicant certifies, to the best of their ability, that the information provided		
	rue and accurate at the time of this grant application. The applicant also certifies that the below ents and criteria have been met or will be met within the grant period.		
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	ne statements carefully and check "yes" if the requirement has been met/will be maintained during period and "no" if the requirements have not been met or cannot be maintained during the grant		
period.	period and the fit the requirements have not been met or cannot be maintained during the grant		
Yes	1. The grant applicant agrees to program a minimum prescribed set of state, national, and federal		
No	interoperability channels in all radios replaced or upgraded with grant funds.		
Yes	2. The grant applicant is submitting a copy of fully executed WISCOM User Agreements for the		
No Yes	applying agency(ies)/unit(s) of government with this application. 3. The grant applicant will financially plan for each replaced or upgraded radio's future replacement.		
No	3. The grant applicant will infancially plan for each replaced of appraise radio's future replacement.		
Yes	4. The grant applicant has or will develop a maintenance plan to keep radios purchased with grant		
No	funds in good operational order.		
Yes	5. The grant applicant has coordinated the submission of this application on behalf of all daily users		
No Yes	in the county. 6. The grant applicant understands and will complete any regular maintenance and/or calibration in		
No	accordance with the manufacturer's recommendations and specifications.		
Yes	7. The grant applicant has completed the attached budget spreadsheet to the best of their ability.		
No			
Yes	8. The grant applicant understands the 20% match requirements and has included the source of		
No	required matching funds below.		
Other (please explain)			

SECTION 5 Additional Applicant Data			
Applicants are required to submit interoperability readi	ness data, including (but not limited to) information on:		
Please list any existing interoperability repeaters/systems and their location (GPS or ASR preferred) such as MARC, VTAC, UCALL/UTAC, and 8CALL/8TAC repeaters (stationary or deployable) owned or maintained by the applicant or other daily users in the county.			
Please describe any radio caches maintained by the applicant or other daily users in the county that may be available to other counties.			
Please describe any current LTE integrations being used, such as push-to-talk over cellular services.			
Please list the current lineup of interoperability frequencies/channels/talk groups currently programmed in agency radios.			
SECTION 6 Authorized Signature			
Signatory Official Printed Name	Date		
Signatory Official Signature			