



P E R M Asm



2021 PERMA Firefighter Risk Reduction Mini-Grant Program
(in collaboration with the New York State Association of Fire Chiefs)

Request for Applications

Application Deadline: February 21, 2021

Questions regarding this *Request for Applications (RFA)* and the 2021 PERMA Firefighter Risk Reduction Mini-Grant Program should be directed to: Pete Frisoni
Public Safety Risk Management Specialist
PERMA
9 Cornell Road
Latham, NY 12110
518-220-0383
pfrisoni@perma.org

Online applications are preferred and can be done at perma.org. **Submission deadline is February 21, 2021.**

If submitting a paper copy, complete the attached application and endorsement page. Additional pages may be included as necessary to provide the required information. Email all documents to pfrisoni@perma.org or mail to Pete Frisoni at the address above.

Emailed/mailed applications must be received/postmarked by February 21, 2021.

Introduction and Purpose

The purpose of this grant is to provide financial assistance to members in obtaining equipment that will help reduce duty-related illnesses.

PERMA will award grants to reimburse the purchase of gear washers and dryers, which remove carcinogens from turnout gear while maintaining gear durability.

The PERMA Risk Management department and NYS AFC will conduct ongoing evaluations of agencies awarded this equipment to determine its effectiveness in preventing illness.

Submission Process

Submission deadline is February 21, 2021.

Eligible fire departments should complete the online *Application* and *Endorsement Page* at perma.org. Applicants will be able to save their work in the online application system and return to complete the application at another time. Applicants must click the “Submit” button at the end of the application process. Applicants will receive an email confirmation if their application was received. Submissions received after the deadline will not be considered.

If submitting a paper copy, complete the attached application and endorsement page. Additional pages may be included as necessary to provide the required information. Email all documents to pfrisoni@perma.org or mail to Pete Frisoni at the address on first page. Emailed/mailed submissions received/postmarked after the deadline will not be considered.

Scoring

The maximum number of points available for each section of the application is indicated on it. The application’s maximum total is 100 points.

Applications will be scored by a panel of reviewers from PERMA and NYS AFC. The scores will be averaged and the final average scores ranked. This ranking will determine which applicants are awarded funds. A total of five (5) \$5,000 grants will be awarded.

Individual scoring results will not be revealed.

Awards and Payments

Applicants selected for funding will be notified by PERMA in April. Purchases made prior to the award date will not be eligible for reimbursement.

Members agree that the equipment must be ordered by May 31, 2021 and a copy of the order submitted to PERMA.

Payment will be made to awardees upon submission of all requested documentation.

An award is intended to assist with payment toward the equipment purchase. It does not ensure reimbursement of the item’s full purchase price. Awardees are responsible for paying the balance of any purchase exceeding their award.

Awardees agree to allow PERMA (with reasonable notice) access to fire company facilities and representatives in order to inspect purchased equipment and to interview personnel, and will participate in completing surveys and visual documentation of grant utilization, including but not limited to photos/video of the equipment. PERMA may use said photos/video in publications or other media material produced, used, or contracted by PERMA, including but not limited to newsletters, emails, its website, social media platforms, etc.

2021 PERMA Firefighter Risk Reduction Mini-Grant Program
Endorsement Page

Department Name: _____

Mailing Address: _____

Physical Address (if different from mailing address):

Contact Name: _____

Contact Title: _____

Contact Email: _____

Contact Phone: _____

NYS AFC Membership Number: _____

The signatures below are required for the application to be considered. By signing, each person is certifying that the applicant department is both a PERMA and NYSAFC member in good standing and will adhere to the stipulations, terms, and conditions detailed in the *Request for Applications*.

The PERMA Permanent Representative may be the chairperson of the board of fire commissioners, mayor, city manager or other municipal officer.

Fire Chief /Authorized Signer Title Date

Print Name: _____

PERMA Permanent Representative Title Date

Print Name: _____

**2021 PERMA Firefighter Risk Reduction Mini-Grant Program
Application**

Department Information (5 points)

Total annual call volume: _____

Annual number of: Fire Calls _____

EMS Calls _____

EMS Transports _____

Annual budget (excluding personnel expenses): _____

Approximate percentage of budget spent on safety equipment, safety initiatives, and injury risk reduction activities: _____%

Have you had an injury claim in past 5 years? Yes No

If "Yes," how many? _____

Safety Committee Information (20 points)

Does your department have or participate in a safety committee? Yes No

If "Yes," how often does the committee meet?

- Monthly
- Quarterly
- Twice each year
- Annually
- Other (specify) _____

Safety Training Information (40 points)

Please provide two (2) examples of injury risk reduction trainings the department conducted since 2019 (excluding mandatory OSHA training). Include date(s), a description of the training, who instructed the training, topics covered, costs, number of personnel trained, and any other pertinent information.

Please describe any unique or proactive injury risk reduction initiatives (other than training activities) the department has implemented since 2019. Include information on why you chose to address the particular risk, what was done, costs, date(s) implemented, and any successful results or outcomes resulting from the injury risk reduction initiative.

Equipment Request Information (35 points)

Do you currently own the equipment for which you are requesting funding? Yes No

If “Yes,” when was it purchased (mo/yr)? ____/____

If “Yes,” is it operational? Yes No

Do you plan to provide training on the proper use of the requested equipment? Yes No

If “Yes,” describe the type of training you plan to provide and who will conduct the training.

Do you plan to develop a policy/standards for use of the equipment? Yes No

If “Yes,” who will be responsible for developing the policy/standards?

Briefly provide an example of how the requested piece of equipment would have been helpful in a previous response or activity.
