



PO Box 2017 Cameron Park, CA 95682-2017

www.calcupa.org

# CUPA FORUM BOARD

## ENVIRONMENTAL PROTECTION TRUST FUND

### GRANT APPLICATION

#### 1. ENTITY INFORMATION

You must submit one (1) application per project. All applications will be scored as one complete application and not divided up. Your application will be accepted or denied as a whole. Grant applications must be from agencies implementing one or more of the Unified Programs (UP) or from entities other than a UP, if a majority of the Trustees agree that the proposal benefits UP implementation and enforcement. The department director or designee must sign this grant application.

**Project Name:** Tehama County CUPA new vehicle project

**Name of UPA or Other Entity:** Tehama County Environmental Health

**Name of Department Head, Director or Designee:** Tia Branton

**Address:** 633 Washington Street Rm. 36

**City, State, Zip Code:** Red Bluff, Ca 96080

**Phone:** 530-527-8020

**Fax:** 530-527-6617

**E-Mail Address:** tbranton@tehama.gov

**Name of Grant Contact:** Tia Branton

**Address:** 633 Washington Street Rm. 36

**City, State, Zip Code:** Red Bluff, Ca 96080

**Phone:** 530-527-8020

**Fax:** 530-527-6617

**E-mail Address:** tbranton@tehama.gov

**Number of UP Staff:** 3 (with new hire)

**Number of Regulated Facilities:** 402

**Please describe your agency's participation in CUPA Forum meetings to include regional or workgroup meetings.**

**We attend Regional Cupa meetings including the UST TAG, as well as attending the CUPA conference**

**Programs UPA Implemented.**  HW     HM     UST     AST     Cal-ARP

## 2. EXECUTIVE SUMMARY

Provide a brief description of the purpose and benefits of the grant proposal.

The purpose of this grant proposal is to obtain money to buy a new vehicle for our UPA program staff

## 3. GRANT AMOUNT

Grant Amount Requested: \$ \$42,000

## 4. HAS YOUR AGENCY RECEIVED ENFORCEMENT PENALTY MONEY IN THE LAST 3 YEARS AND IF SO, WHAT HAS BEEN PURCHASED?

Items Purchased: n/a

Amount: \$ 0.00

## 5. OTHER GRANTS RECEIVED

Y OR N / WHO FROM AND FOR WHAT None

## 6. WORK PLAN: (SCOPE OF WORK)

The grant applicant shall develop a work plan as part of this grant application that describes the objective of the project, sustainability, anticipated goals, benefits to the UP and performance measures or measures of success in 1500 words or less. The scope of work could be as simple as describing equipment, purchase date, proposed use and benefit or as complex as a description of implementation activities, tasks and equipment to be purchased (or both). The work plan shall include a detailed timeline that delineates critical and completion dates of the activities and tasks. The work plan shall include a brief narrative summary for each activity and task that clearly describes the activity or task and depicts the steps that will be taken or the methods to be used for completion. The description(s) should include as much detail as necessary to depict the overall implementation efforts through the period of the grant. If applicable, the description should also include the degree of applicability to all elements of the UPs, e.g. hazardous waste, underground storage tanks, etc. and the degree that the proposal could be used by other agencies or replicated.

◀ Please Attach Work Plan to Application ▶

## 7. PROJECTED BUDGET

Describe in line item detail, the expenditures, the appropriate Sales Tax and costs necessary to complete the project described in the Work Plan. The grant award must be used to pay for costs listed in this budget. The Trustees will consider "like for like" substitutions for approved grants, but the use of the grant award to pay for other costs not specified in the budget will likely be denied. The applicant will be required to provide evidence to verify that the grant allocation was used as specified in this budget.

◀ Please Attach Projected Budget to Application ▶

## 8. REIMBURSEMENT OPTIONS

If more than one option is selected, then the option(s) must be specified in the line item detail in the projected budget.

- Received approved grant monies up front (in July of the year grant approved)
- Submit invoice for reimbursement
- Have CFB Trust pay supplying entity directly (subject to discretion of Trustees)

## 9. GRANTEE APPLICANT SPECIFIC CERTIFICATIONS

These criteria are mandatory. Please read and initial that you understand and will comply:

- This grant will be used to supplement the annual budget of the Grantee. It will not be used to reduce or supplant the annual operating budget of the Grantee.
- The grant applicant maintains an accounting system that is sufficient to track the use of Trust Fund monies and to report on these transactions as required under the terms of the grant.
- Successful applicants acknowledge the Trust Fund's right to conduct an audit of purchase(s) made with Trust Fund monies.
- Grant funds must be expended for the purposes approved in the grant within two years or repaid to the Trust Fund, unless otherwise stipulated in the grant award.
- For equipment, please read and initial that you understand and will comply. I further certify that I am authorized to receive money for procurement of the items herein.
- Grant applicants requesting equipment purchases must certify that their organization maintains a fixed asset tracking system and a periodic inventory of equipment is performed.
- A copy of the invoice and a picture of equipment purchased with these funds must be submitted to the Trustees after the purchase.

## 10. FOR EMERGENCY VEHICLES AND/OR EQUIPMENT, PLEASE ANSWER THESE QUESTIONS:

Have you attempted to obtain any grants such as the HMEP, Homeland Security, or other grant?

YES                       NO

If yes, what did your agency get? How much? [Click here to enter text.](#)

[Click here to enter text.](#)

If no, please explain why not: Our County OES obtains grants from HMEP and Homeland Security

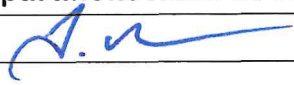
[Click here to enter text.](#)

Vehicles: To be eligible for consideration, the vehicle shall be used to support activities of the Unified Program, no more than 2 every 10 years can be purchased and vehicles cannot exceed number of UPA inspectors.

## 11.) CERTIFICATION

I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge and that I am an employee of the applicant authorized to submit the application. I further certify that I am authorized to receive money for procurement of the items herein. All procedures and mandates have been followed in the preparation of this application, including financial procurement and when approvals are necessary from the governing body. I further understand that any false, incomplete, or incorrect statements may result in the disqualification of this application. By signing this application, I waive any and all rights to privacy and confidentiality of the proposal on behalf of the applicant.

Director/Department Head or Authorized Designee

Signature: 

Printed name of Director/Department Head or Authorized Designee:

Tia Branton

Date: 3-4-22 Click here to enter text.

Send completed application to:

Sheryl Baldwin, Grant Manager  
PO Box 2017  
Cameron Park, CA 95682-2017

Phone: (530) 676-0815

Fax: (530) 676-0515

email to: [Sheryl@calcupa.org](mailto:Sheryl@calcupa.org)

## **. WORK PLAN: (SCOPE OF WORK)**

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### **Work Plan (Scope of Work)**

Tehama County Environmental Health’s grant proposal is to fund the replacement of an existing environmental health department vehicle used in the CUPA program that has approximately 140k miles on the odometer and has become costly to repair. This new vehicle would be used to conduct all inspection types in CUPA as well as provide transportation to and from trainings/meetings.

**Projected Budget**

Current County bid for new vehicle is 40,530.25. County is requesting 42,000 to purchase new vehicle, in case of change in pricing. All funds not used for purchase of vehicle would be returned. See Attached Budget.



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## CUPA Forum Board

Environmental Protection Trust Fund

### Supplemental Application for Vehicles or Emergency Response Equipment

#### Agency Name

Tehama County Environmental Health

#### Vehicles Intended Use:

Unified Program

Emergency Response

#### Will the vehicle be used for other duties assigned to inspector(s) in other programs?

YES  NO

If "yes," what is the percentage of intended use for the Unified Program? [Click here to enter text.](#)

Has your agency used trust grants for vehicles? If so when and how many?

In July 2012 Tehama County Environmental Health received \$18,530 to purchase a vehicle and then used the remaining \$1,470 of the \$20,000 grant to replace tires for another vehicle in the CUPA fleet.

#### Are your vehicles run through the county/city fleet services or are they managed through your own Department?

Fleet Services  Department  Other (name) [Click here to enter text.](#)

**Are there “life of the vehicle” policies as per your fleet services?**

**YES**  **Limit in miles:** [Click here to enter text.](#)

**NO**  **If yes, what is the policy?** [Click here to enter text.](#)

**What are your budget constraints that prevent you from purchasing your vehicle?**

Tehama County Environmental Health is only partially fee supported. All remaining costs are paid out of the General Fund. The 2025-2026 Tehama County Budget required \$2,548,687 from reserves to balance the budget. There is no money for us to purchase a vehicle.