APPLICATION FOR	2. DATE SUBMITTED	Applicant Identifier
FEDERAL ASSISTANCE		FF
	March 29, 2013	
1. TYPE OF SUBMISSION	3. DATE RECEIVED BY STATE	State Application Identifier
	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5.APPLICANT INFORMATION	· · · · · · · · · · · · · · · · · · ·	
Legal Name		Organizational Unit
El Dorado County		El Dorado County Sheriffs Ofc
Address		Name and telephone number of the
300 Fair Lane		person to be contacted on matters involving this application
Placerville, California 95667		Noren, Jackie
		(530) 621-6588
6. EMPLOYER IDENTIFICATION NUMBER (EIN)		7. TYPE OF APPLICANT
94-6000511		County
8. TYPE OF APPLICATION		9. NAME OF FEDERAL AGENCY
New		Bureau of Justice Assistance
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT
NUMBER: 16.745		
CFDA Criminal and Juvenile Justice and Mental Health TITLE: Collaboration Program		Expand the EDSO CIT program by funding CIT Special Assignment activities and funding CIT training
		for regional first responders, mental health service stakeholders to improve regional CIT response.
12. AREAS AFFECTED BY PRO	DJECT	
••••	, City of Rocklin, Sacramento	e, Amador County, Placer County, County, City of Citrus Heights, City
13. PROPOSED PROJECT		14. CONGRESSIONAL
Start Date: October 01, 2013		DISTRICTS OF
End Date: September	30, 2015	a. Applicant
		b. Project CA43
15. ESTIMATED FUNDING		
		1

Federal	\$199,682	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
Applicant	\$50,000	
State	\$0	
Local	\$0	Program is not covered by E.O. 12372
Other	\$0	
Program Income	\$0	<b>17. IS THE APPLICANT</b>
TOTAL	\$249,682	DELINQUENT ON ANY FEDERAL DEBT?

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALINDATA IN THIS APPLICATION PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.

Close Window