

Tennessee Emergency Management Agency Hazardous Materials Emergency Preparedness (HMEP) FFY 2026 Sub-Grant Application

Complete application submittal is due August 29, 2025, by 4:00 pm. Late submissions will not be accepted.

REQUIRED digital submittal received by August 29, 2025, by 4:00 pm.

All applications must include the following:

- 1. Cover Sheet page 2 of the Application
- 2. Certification page 3 of the Application
- 3. Planning, training, or Exercise Activity Request (all that apply)
- 4. Section 4 Budget and Match page 7 of the Application

For each activity, complete and attach the appropriate Section sheets, depending on the activity type

- 1. Section 1 of the Application is for Planning (i.e., Commodity Flow Surveys, Regional Hazard Analysis) page 4 of the Application.
- 2. Section 2 of the Application is for Training (i.e., Hot Zone Conference, Hazmat Technician Refresher) page 5 of the Application.
- 3. Section 3 of the Application is for Exercise (i.e., Full Scale Hazmat Exercise) page 6 of the Application.
- 4. Include the Scope of Work Narrative for each activity
 - (MS Word format—See Appendix C for requirements and Example)
- 5. Include a Budget Narrative for each activity (MS Word format—See Appendix D for requirements and Examples)
- 6. Include a Budget for each Activity (MS Excel format—See Appendix D for requirements and Examples)

REQUIRED digital submittal to HMEP.Grant@tn.gov by August 29, 2025, by 4:00 pm.

- 1. All submission materials i.e., Scope of Work Narratives and Budget Narratives, as MS Word documents or PDF
- 2. All spreadsheets as MS Excel files
- 3. Full application as one PDF file

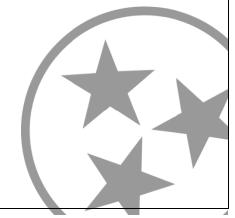
Appendix Legend

Appendix A = Training Activity List

Appendix B = Exercise Activity List

Appendix C = Activity Narrative Requirements and Example

Appendix D = Activity Budget Narrative and Budget Example



Requester Name: Agency/Program/Organization: Mailing Address: City: Email: Phone: Fax: GRAWT ACTIVITY INFORMATION UNQUE ENTITY ID (UE! #) PERIOD OF PERFORMANCE START / END DATES PARTICIPATOR AQUIENCE (CHECK ALL THAT APPLY) ADMINISTRATION ADMINISTRATION HEALTH HOSPITAL LAW ENFORCEMENT If requesting more than one activity, list all activities in priority order. Scoring will be based on the priorities identified in the Allocation Methodology. 1. 2. 3. 4. 5. 6. 7. 8. 9. 9. 10. 11. 12. 13.	REQUESTER INFORMATION			
Mailing Address: City: Zip Code: Email: Fax: Grant Activity Information Unique Entity ID (UEL#) Federal Employer Identification Number (FEIN) PERIOD OF PERFORMANCE 10/1/2025 – 9/30/2026 START / END DATES PARTICIPANT OR AUDIENCE ADMINISTRATION GEMS FIRE/HAZMAT HEALTH HOSPITAL LAW ENFORCEMENT NEGOVOAD PUBLIC WORKS EMERGENCY COMMUNICATION If requesting more than one activity, list all activities in priority order. Scoring will be based on the priorities identified in the Allocation Methodology. 1	Requester Name:			Date of Request:
City: Zip Code:	Agency/Program/Organization:			•
Email: Phone: Fax:	Mailing Address:			
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PARTICIPANT OR AUDIENCE (CHECK ALL THAT APPLY) ADMINISTRATION	GRANT ACTIVITY INFORMATION			
START / END DATES PARTICIPANT OR AUDIENCE (CHECK ALL THAT APPLY) TRANSPORTATION EMS FIRE/HAZMAT LAW ENFORCEMENT MGO/VOAD PUBLIC WORKS EMERGENCY MANAGEMENT HEALTH HOSPITAL LAW ENFORCEMENT MGO/VOAD PUBLIC WORKS EMERGENCY MANAGEMENT TRANSPORTATION EMS FIRE/HAZMAT LAW ENFORCEMENT EMERGENCY MANAGEMENT HEALTH HOSPITAL LAW ENFORCEMENT EMERGENCY MANAGEMENT Trequesting more than one activity, list all activities in priority order. Scoring will be based on the priorities identified in the Allocation Methodology. 1.		UNIQUE ENTITY ID (UEI #)		FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)
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Allocation Methodology. 1		TRANSPORTATION HEALTH NGO/VOAD	■EMS ■ HOSPITAL	☐ FIRE/HAZMAT ☐ LAW ENFORCEMENT
	Allocation Methodology. 1			

CERTIFICATION SHEET

Certifying Agent:

The signatory listed below represents and warrants the authority to allocate sub-grant funds and execute them on behalf of the entity for the activity specified above.

Total Amount of Fund	Is Requested: \$		
1. Project Manage	r:		
Name (Print):		Title:	
Signature:		Date:	
Office Phone:	Cell Phone:	Email:	
2. Chief/Director o	of requesting agency:		
Name (Print):		Title:	
Signature:		Date:	
Office Phone:	Cell Phone:	Email:	
3. Chief Elected Of	fficial:		
Name (Print):		Title:	
Signature:		Date:	
Office Phone:	Cell Phone:	Email:	

SECTION 1 - PLANNING ACTIVITY REQUEST ACTIVITY NAME: ACTIVITY / VENDOR NAME: ADDRESS: PHONE: FAX: SELECT PREAPPROVED PLANNING ACTIVITY **Regional Hazard Analysis Commodity Flow Surveys CAMEO Software** Other (description below): PLANNING ACTIVITY NARRATIVE (PLEASE SEE APPENDIX C FOR REQUIREMENTS OF NARRATIVE) PLANNING BUDGET INFORMATION (PROVIDE DETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE APPENDIX D) **CONTRACTOR** - Attach Scope of Work in **CONTRACTOR TRAVEL** Narrative CONTRACTOR LODGING/PER DIEM/CAR RENTAL FACILITY RENTAL - TOTAL **ACTIVITY SUPPLIES - TOTAL** ACTIVITY EQUIPMENT RENTAL/PURCHASE - TOTAL COST ESTIMATE TRAVEL EXPENSES PER PERSON: Lodging **Estimated Date of Project** • Travel/Per Diem/Car Rental Start mm/dd/yyyy: _____ **Total Cost:** OTHER (SPECIFY): **TOTAL 80% FEDERAL FUNDS REQUESTED:** 20% Non-Federal Match:

SECTION 2 -TRAINING ACTIVITY REQUEST		
ACTIVITY NAME: ACTIVITY / VENDOR NAME:		
ADDRESS: PHONE: FAX:		
Yes - COURSE LOGISTICS SUPPORT REQUE	STED FROM TEMA	
No - COURSE LOGISTICS PROVIDED BY OTH Participants will register at (Provide registre	HER AGENCY ation contact information, web address, phone number, mailing address, etc.):	
BELECT TRAINING ACTIVITY (APPENDIX A CONTAINS A LIST OF ALLOWABLE ACTIVITIES) Hazmat Challenge HOTZONE International Association of Fire Chiefs (IAFC) International Hazmat Conference The Continuing Challenge National Association of SARA Title III Program Officials (NASTTPO) Conference Cold Zone Conference Midwest Hazmat Conference Annual Hazmat Workshop Other		
TRAINING BUDGET INFORMATION (PROVIDE D	EE APPENDIX C FOR REQUIREMENTS OF NARRATIVE) ETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE	
APPENDIX D) NUMBER OF INSTRUCTORS:	INSTRUCTOR FEE INSTRUCTOR TRAVEL INSTRUCTOR LODGING/PER DIEM/CAR RENTAL FACILITY RENTAL - TOTAL COURSE SUPPLIES - TOTAL COURSE EQUIPMENT RENTAL/PURCHASE - TOTAL COST ESTIMATE EXPENSES PERSON:	
ANTICIPATED NUMBER OF STUDENTS:	Registration Lodging Travel/Per Diem/Car Rental	
Estimated Date of Training mm/dd/yyyy:	OTHER (SPECIFY): Total Cost: TOTAL 80% FEDERAL FUNDS REQUESTED: 20% Non-Federal Match:	

SECTION 3 -EXERCISE REQUEST		
EXERCISE NAME		
SITE NAME AND PHYSICAL ADDRESS:		
ARE YOU REQUESTING STAFF SUPPORT FROM If YES, specify:	TEMA FOR THE ACTIVITY? Yes No	
ANTICIPATED NUMBER OF PARTICIPANTS:	DATE, TIME, AND DURATION OF EXERCISE:	
HOST OF EXERCISE:		
LIST PARTICIPATING AGENCIES/JURISDICTION	S:	
EXERCISE TYPE: (APPENDIX B CONTAINS A DESTRUCTION TO THE TOP (TTX) Drill Function	SCRIPTION OF EXERCISES HMEP CAN COVER) tional Exercise (FE) Full Scale Exercise (FSE)	
Exercise Activity Narrative (Please see A	APPENDIX C FOR REQUIREMENTS AND EXAMPLE)	
Exercise Budget Information (Provide Appendix D FOR REQUIREMENTS AND EXAMPLE	DETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE	
CONTRACTOR - Attach Scope of Work in	FEES/TRAVEL	
Narrative	EXERCISE SUPPLIES	
	OTHER (SPECIFY):	
Host - Attach Scope of Work in	SALARIES/BENEFITS	
Narrative	FACILITY RENTAL	
	EQUIPMENT RENTAL/PURCHASE	
	EXERCISE SUPPLIES	
	OTHER (SPECIFY):	
PARTICIPANTS	TRAVEL	
Attach Budget for Each Agency	LODGING/PER DIEM	
Participant	Total Cost:	
	OTHER (SPECIFY):	
	TOTAL 80% FEDERAL FUNDS REQUESTED:	
	20% Non-Federal Match:	
Estimated Date of Exercise mm/dd/ <u>yyyy:</u>		

SECTION 4 - All Activities Combined Budget and Match

Description	Dollar Amount
Amount of HMEP (80% Federal Funds Requested for all activities)	\$
Non-federal Match (20% of the total project cost) is the same as 25% of the federal share. Example; total project cost of $1,000 = 800$ federal share + 200 non-federal share)	\$

MATCH can be in the form of cash or in-kind/soft contributions or both.

A Cash Match, i.e., a cash contribution, can come from the coordinating entity's own funds (general revenue), cash donations from non-federal third parties (e.g., partner organizations), or non-federal grants.

A cash match contribution can only be applied to your match requirement once it is expended on a cost or activity identified in your work plan.

An in-kind or Soft Match is a non-cash contribution of value provided by the area coordinating entity or by non-Federal third parties. In-kind matches typically involve the calculated value of personnel, goods, and services, including direct and indirect costs.

MATCHES must:

Be documented and verifiable in your records;

Not included as match contributions for any other Federal award (i.e., if you have already used funds to match another federal grant, they cannot be applied towards HMEP activities).

Provided for in your approved budget;

Not Supplant already designated funds with Federal Funds.

Description of Match for all activities (All Match must be non-federal (e.g., cannot use EMPG, DHS, etc.)

Type of match (soft-match or cash, or both)	\$
Source (time of fire fighter, law enforcement, students, first responder, others, etc.)	\$
Salary and/or fringe benefit (rate x hours) *	\$
Facility space used for planning/exercise	\$
HMEP project-related travel (planning/training) to be used as match	\$
Equipment used for training/exercise (describe)	\$
Other allowable match (describe)	\$
Total match (non-federal and not used for any other federal and/or state funded projects)	\$

APPENDIX A

TRAINING - ALLOWABLE ACTIVITIES

Mission-Specific and Competency Courses

Hazmat Incident Command System

(ICS): ICS-100: Introduction to the Incident

Command System

ICS-200: Incident Command System for Single Resources and Initial Action Incidents

ICS-300: Intermediate Incident Command System

ICS-400: Advanced Incident Command System

Industrial Fire Fighting- (rail yards, fuel transfer facilities and ports)

Confined Space Rescue

Hazmat Basic Life Support/Advance Life Support – Medics respond to hazmat calls

Chemistry for Emergency Responders Airport Rescue Fire Fighting (aircraft response and rescue)

Radiological (sources in transportation, but not weapons of mass destruction)

Tank Car Specialty

Cargo Tank

Specialty

Intermodal Tank Specialty

Marine Tank Vessel

Specialty

Flammable Liquid Bulk Storage

Flammable Gas Bulk Storage

Radioactive Material Specialty

Notes:

The examples of allowable activities provided are not intended to be all-inclusive, and the absence of a specific activity does not preclude its possible approval. Conversely, proposed activities will be reviewed prior to approval, considering various factors, including the cost-benefit of the specific implementation.

Core Competency Courses

Awareness Operations Technician

Hazmat Incident Commander

Hazmat Officer

Hazmat Safety Officer

Hazmat Refresher

Hazmat Technical Decon Refresher

Developing a Plan of Action

Chemistry of Hazmat

Surveying a Hazmat Incident

General Competencies

Level A Personal

Protective Level B

Personal Protective

Hazmat Level B Dress-out and Decon

ID of Methods and Procedures

Hazardous Materials Monitoring Refresher

Additional Training Courses

CAMEO training

The Hazmat IQ Training

Hazmat for Dispatcher

Hazmat Containers

Containment and Control

HAZWOPER Training

Hazmat Air Monitoring Training

Ammonia Training

Tank truck rollover simulator

National Incident Management System Levels 300 & 400

Calibration Gas Kits for Hazmat Training (equipment)

Hazmat Training Tools Package (geared towards hazmat training and exercises)

Chlorine training props (equipment)

Ammonia Safety and Emergency Response Training (ASERT)

Hazardous Materials Outreach

Ethanol Training for First Responders

APPENDIX B

Exercise - ALLOWABLE ACTIVITIES (Example)

Exercises within the scope of the HMEP grant fall under two categories:

Discussion-based (seminar, workshop, tabletop):

These exercises familiarize players with current plans, policies, agreements, and procedures and provide a medium for developing new ones.

Discussion-based exercises may involve single or multiple agencies and/or functions. Though they generally only cover broad topics, they involve little or no cost and modest time commitments and are a quick method of briefing individuals or organizations on unfamiliar topics.

Operations-based (drill, functional, full-scale):

These exercises validate the plans, policies, agreements, and procedures solidified in discussion-based exercises. They can
clarify roles and responsibilities, identify gaps in resources needed to implement plans and procedures and improve individual
and team performance. Operations-based exercises are characterized by actual reaction to simulated intelligence, response
to emergency conditions, mobilization of apparatus, resources, and/or networks, and commitment of personnel, usually over
an extended period of time. In these exercises, player action is designed to mimic personnel and resources' reaction, response,
mobilization, and commitment in real-time play. Operations-based exercises are usually funded under the HMEP training grant.

APPENDIX C

ACTIVITY SCOPE OF WORK NARRATIVE (Example)

NARRATIVE SHOULD INCLUDE THE FOLLOWING DETAILS

PLEASE COMPLETE THE FOLLOWING NARRATIVE AS A WORD DOCUMENT FOR EACH INDIVIDUAL ACTIVITY.

- Organization and Points of Contact Information
- Planning and Training Needs Assessment

Describe the current capacity and any areas of deficiency concerning preparedness for transporting hazardous materials. This may include:

- 1) A discussion of whether the applicant has identified a need to assess transportation flow patterns of hazardous materials within the State or between the State and another state and
- 2) Providing the number of hazmat preparedness plans that need updating.
- 3) Describing the location and need for exercises to be conducted that involve preparation for response to incidents involved in the transportation of hazardous materials.
- 4) Provide the number of responders needing training and the number of persons currently trained in the different disciplines of response functions (e.g., the number of firefighters, EMTs, and EMSs that need training). Provide a scalable request for two participants up to the total number preferred and include justification for why sending additional participants will benefit the program.
- 5) Narrative Description, Justification, Scope, Purpose, Duration of Planning or Training Activity
- Project / Activity Dates and Times
- Scope of Work Narrative, Budget, and Budget Narrative for each activity
- List of supplies or equipment with cost associated with each

Example Activity Narrative
2024 Grant Year – 2024 IHMC
Hopedale HMEP Grant Narrative

Submitting agency: Hopedale Fire Department

Date of submission: MM/DD/20YY

Project contact: Michael Rinehart

Phone: 615-123-4567 / cell: 615-123-4567

Email: example@tn.gov

Project request: Reimbursement of the cost associated with attending the 2024 International Hazmat Conference.

Narrative

The Hopedale Fire Department's Hazardous Materials (Hazmat) Regional Response Team (RRT) has an agreement with the State of Tennessee to respond to any Hazmat call within the county automatically and, on request by TEMA, anywhere in the State.

The HFD would like to send 2 persons to attend the 2024 International Hazmat Conference in Baltimore, MD, IN, held from June 8 to 11, 2024. This would be a great opportunity to keep up with the latest firefighting methods and tactics, check out the newest equipment, and improve our instructors.

The HFD applies for a grant of \$12,428.00. This will be an 80%/20% grant, with the 20% paid by the HFD. The total would be \$2,485.60, which will be offset by the salary cost carried by the HFD.

Description

Receipts for all items will be provided after the training. We are applying for reimbursement of the cost of:

Registration fee of 1,100/person. This includes two days of hands-on training.

The conference is 3 days, and travel of 2 days.

Lodging. Two rooms (one person per room). At \$1,400 per room for 4 nights.

Per Diem for 8-days at the rate of \$45.00/day. They will be leaving on Sunday and return on Thursday. (Please See Note*)

A sizeable rental vehicle (due to the luggage mentioned above) is needed for local transportation, with added fuel and parking costs.

*Please note that the amounts given in this example are for demonstration only and your local government may have different requirements for meal Per Diem and other expenses while traveling.

APPENDIX D

ACTIVITY BUDGET NARRATIVE (Example)

- BUDGET NARRATIVE SHOULD INCLUDE THE FOLLOWING DETAILS (SEE BELOW SAMPLE)
- PLEASE COMPLETE THE FOLLOWING BUDGET NARRATIVES AS AN MS EXCEL DOCUMENT.
- Lodging Description
- Per diem per night
- Registration Fee
- Flight Cost
- Luggage fees
- Rental car
- Total cost project
- Total Federal Funds Requested
- 20% match to be paid
- Total activity expenses (Requested + 20% match)

Grant request HFD 2024 International Hazmat Conference

Item	Cost each	Quantity	Grant request
Lodging Baltimore, MD 4 nights, 1 person per room	\$1,400.00	2	\$2,800.00
Per diem, 5 days at \$54.00	\$432.00	4	\$1,728.00
Registration Fee	\$1,100.00	4	\$4,400.00
Flight, to Baltimore - with luggage fees	\$700.00	4	\$2,800.00
Rental	\$700.00	1	\$700.00
Total cost project			\$12,428.00
Type of match (soft-match or cash, or both)		CASH	
Source (time of fire fighter, law enforcement, students, citizen, first responder, others, etc.)		Fire Fighter	
Other (describe, e.g. indirect cost)			
Salary and/or fringe benefit (rate x hours) *			
Facility space used for planning/exercise			
HMEP project related travel (planning/training) to be used as match			
Equipment used for training/exercise (describe)			
Other allowable match (describe)			
Total 80% Federal Funds Requested			\$9,942.40
20% to be paid by soft or hard match			\$2,485.60
Total activity expenses (80% + 20% match)			\$12,428.00

