

FFY 2004 ADAA/Criminal History Record Improvement (CHRI) federal program

Population of Implementing Agency jurisdiction: _____

Entire budget of Implementing Agency: _____

Budget of Program Agency (law enforcement agency): _____

- Budget dedicated to personnel expenses; Please include all benefits, pension, overtime, etc: _____
- How many employees does this budget account for? _____
- Budget dedicated to equipment related expenses: _____
- Budget dedicated to all other agency expenses: _____

How many paid, full-time, certified officers, including Chief? _____

How many paid, part-time, certified officers? _____

Total number of sworn and non-sworn employees in your agency: _____

Does Program Agency provide 24 hours of patrol service? Y N _____ (# of hours, if No)

Does the Implementing or Program Agency manage a Drug Asset Forfeiture Fund? Y N

- If Yes, Please indicate balance during the last 24 months: Low _____ High _____
- What type of expenditures has the agency made with these funds during the past 24 months? _____

Financial Situation

Describe your Agency's financial situation and how it relates to your application for grant funds. What is preventing your agency from making this purchase without ICJIA funding? What line items are covered in the law enforcement agency's budget? (Attach separate sheet, if necessary)

Economic & Housing Characteristics (Please utilize U.S. Census Bureau data; please cite any other sources)

Median Household Income: _____

Percentage of Families and Individuals below Poverty Level: _____

Median Home Value: _____

Total Occupied Housing Units: _____

Owner Occupied Housing Units: _____

Renter Occupied Housing Units: _____

Vacant Housing Units: _____

Labor Force Population: _____

Livescan Purchase

1. Has your agency ever been awarded a Livescan from the ICJIA or other federal or state granting body? _____

If yes: Please list the Date(s) awarded: _____

2. How many Livescans does your agency currently own and operate? _____

3. Will an ICJIA funded Livescan machine replace an existing Livescan? _____

If yes: How old is the Livescan that will be replaced? _____

How many fingerprint submissions have been transmitted by your existing Livescan during its life? _____

Please describe any repairs that this Livescan might need? _____

If no: Would this Livescan be your agency's first? _____

If yes: Please explain why your agency has not previously purchased a Livescan and why one is currently needed: _____

How many print cards does your agency submit, annually, to Bureau of Identification ? _____

4. Will a new Livescan be used to supplement an existing and fully operational Livescan? _____

If yes: Please explain your need for multiple Livescans. Include the total number of Livescans you currently use; how many fingerprint transmissions you submitted in calendar year 2007; and a brief narrative to justify: _____

OPTIONAL

What additional funding opportunities would you like to see in the future to benefit your agency while enhancing officer and public safety?

PREPARED BY: _____
Original Signature

Police Chief: _____
Original Signature

Date Prepared: _____

Date Signed: _____