



Print Form

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA GAMING CONTROL BOARD

**Application for Local Law Enforcement Grant Program**

(Please refer to Program Guidelines for eligibility criteria and other relevant information.)

**APPLICANT INFORMATION**

Applicant Name \_\_\_\_\_

Co-Applicant (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Person to be contacted on matters involving this application (ALL FIELDS REQUIRED):

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**EMPLOYER IDENTIFICATION NUMBER (EIN)**

**VENDOR NUMBER**

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Number Verified\*\*

\*\* Please verify your vendor number at: <https://pasupplierportal.state.pa.us/irj/portal/anonymous> \*\*

**AREAS SERVED BY THE LOCAL LAW ENFORCEMENT AGENCY**

County \_\_\_\_\_ Population Served by this Project \_\_\_\_\_

Municipalities Served \_\_\_\_\_

PA House District # \_\_\_\_\_ PA Senate District # \_\_\_\_\_

If this application involves two or more law enforcement agencies, attach a separate sheet of paper listing each agency, population served, municipalities served and their respective legislative jurisdictions.

**PROXIMITY TO NEAREST LICENCED GAMING FACILITIES**

<u>Facility</u>	<u>Approximate Miles from Facility</u>
_____	_____
_____	_____

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

**PROJECT NARRATIVE**

Briefly describe the project for which grant funding is requested including specific information regarding where the program activities will be conducted. The description must clearly indicate that the requested funds will only be used to offset expenses related to investigating violations and enforcing laws regarding unlawful gambling in the Commonwealth, including any anticipated capital equipment purchases (See Guidelines for conditions). Include a list of the project objectives and explain the process by which the project will accomplish the stated objectives. Include specific measurable outcomes to be achieved by the project. Attach additional pages if necessary.

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

**PROJECT BUDGET**

Agency's Budget \_\_\_\_\_

\* The maximum grant award is \$250,000 per applicant. A grant may not exceed 10% of the budget of the local law enforcement agency or group of agencies applying for the grant.

Below are examples that show how to fill out the form on the next page.

Item	Budget Category	Amount Requested	Methodology	Purpose
Ex.	Investigative Overtime (including benefits)	\$15,000	200 hrs. of detective overtime x \$75.00 per hr. = \$15,000	To conduct undercover investigations to identify unlawful gambling activities.
Ex.	Public Outreach	\$3,000	2 officers x 4 events x 5 hrs, per event x \$75 per hour = \$3,000	Officers will staff an informational booth to advise the public and answer questions related to unlawful gambling.
Ex.	Vehicle Rentals	\$1,600	20 rentals x \$80 each = \$1,600 (200 hrs. / 2 detectives / 5 hrs. per investigation = 20 rentals)	Detectives cannot use personal vehicles or police cruisers in undercover investigations.
Ex.	Capital Equipment	\$5,000	(1) recording device, (1) surveillance camera, (1) software package, etc.	Undercover surveillance

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Operating Budget**

Provide an itemized project budget. Attach additional pages if necessary.

ITEM	Budget Category	Amount Requested	Methodology	Purpose
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

**Grand Total:** \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

**PERFORMANCE MEASURES**

Provide a minimum of two performance measures that will be tracked over the course of the grant period and included with the final report filed by the grant recipient.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**CERTIFICATION**

I hereby certify that all information contained in this document and attachments are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**ALL APPLICATIONS MUST BE RECEIVED BY JANUARY 21, 2020.**

*Applications received after this date will only be considered if additional funds are available and after the Board has announced that it is accepting additional Applications. All announcements will be made at a Board Meeting and on the Board's website.*

The Pennsylvania Gaming Control Board (PGCB) reserves the right to accept or reject any or all applications submitted for the Local Law Enforcement Grant Program contingent upon available funding and respective applicant eligibility. The PGCB also reserves the right to reject incomplete applications.

**MAIL OR E-MAIL COMPLETED APPLICATIONS TO:**

Pennsylvania Gaming Control Board  
Local Law Enforcement Grant Program  
303 Walnut Street  
P.O. Box 69060  
Harrisburg, PA 17106-9060

E-mail: [PGCB@pa.gov](mailto:PGCB@pa.gov) and type "Local Law Enforcement Grants" in the subject line.

If you have any questions regarding the grant application, please call (717) 346-8300