

**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION AUTHORIZING SUBMITTAL OF GRANT APPLICATION TO THE  
BUREAU OF JUSTICE ASSISTANCE FOR THE  
BULLETPROOF VEST PARTNERSHIP PROGRAM**

WHEREAS, the Village of Downers Grove, an Illinois municipal corporation, has completed Bureau of Justice Assistance FY2008 Bulletproof Vest Partnership Program application form for financial assistance in the total amount of \$2,500 for the purchase of ten (10) bulletproof vests; and

WHEREAS, the Village Council has reviewed said grant application and agreement conditions, and has authorized the filing of said application with the Bureau of Justice Assistance.

NOW, THEREFORE, be it resolved by the Village of Downers Grove, DuPage County, Illinois, as follows:

1. That the Village of Downers Grove submit the FY 2008 Bulletproof Vest Partnership Program application in the amount of \$2,500 for the purchase of ten (10) bulletproof vests.
2. That the Village Manager and Village Clerk are hereby respectively authorized and directed for and on behalf of the Village to execute, attest, seal and deliver the grant application agreement, substantially in the form approved in the foregoing paragraph of this Resolution, together with such changes as the Manager shall deem necessary.
3. That the proper officials, agents and employees of the Village are hereby authorized and directed to take such further action as they may deem necessary or appropriate to perform all obligations and commitments of the Village in accordance with the provisions of the grant application agreement.
4. That the Village of Downers Grove agrees to the conditions and requirements listed in the grant application agreement.
5. That this resolution shall be in full force and effect from and after its passage as provided by law.

\_\_\_\_\_  
Mayor

Passed:

Attest: \_\_\_\_\_  
Village Clerk

Section Application > Submit Application > Submit Application for Funding for BVP Approval

OMB #1121-0235  
(Expires: 10/31/2006)

**PLEASE NOTE:** Applications for funding may be submitted for the purchase of any armor that meets the established NIJ ballistic or stab standards ordered **on or after April 1, 2008**. Once the open application period closes, funding levels will be established and all applicants will be notified.

Jurisdiction: DOWNERS GROVE VILLAGE  
 Status(Last Submission Date): Open Application (Not Submitted)  
 Jurisdiction's Vest Replacement Cycle: 5 Years [Update Pre Application](#)  
Unspent BVP Funds Remaining \$579.75  
 Unspent BVP Funds Obligated for Vest Purchases: \$0.00  
Emergency Replacement Needs: 0

**Submit Application for Funding for BVP Approval**

| Name   | Quantity  | Application for Funding<br>Extended Cost | Tax, S&H*     | Total Cost        |
|--|-----------|--|---------------|-------------------|
| DOWNERS GROVE VILLAGE                              | 10        | \$5,000.00                               | \$0.00        | \$5,000.00        |
| <b>Grand Totals</b>                                | <b>10</b> | <b>\$5,000.00</b>                        | <b>\$0.00</b> | <b>\$5,000.00</b> |
| <b>Requested BVP Portion of Total Cost, up to:</b> |           |  |               | <b>\$2,500.00</b> |

\* Total Taxes, Shipping and Handling Cost for each Application

Customer Satisfaction Survey

Please indicate your customer satisfaction regarding how easy this form was to understand and use:

Select Difficulty Level

Please indicate your customer experience using the Internet to conduct business:

Select Experience Level

CERTIFICATION

Chief Executive Certification:

As chief executive officer (or authorized designee) of this jurisdiction, my submission of this Application for Funding Form under the Bulletproof Vest Partnership Grant Act, represents my legally binding acceptance of the terms set forth on this form; and the program's statutory and programmatic requirements, restrictions, and conditions, including the following:

In the case of any equipment or products that may be authorized to be purchased with financial assistance provided, using funds appropriated or otherwise made available by this Act, it is the sense of the Congress that entities receiving the assistance should, in expending the assistance, purchase only American - made equipment and products.

The recipient acknowledges that this grant is for Federal preparedness assistance. Therefore, the recipient agrees that it will implement and comply with the National Incident Management System (NIMS) as required by Homeland Security Presidential Directive 5 (HSPD-5). <http://www.fema.gov/nims>. The recipient acknowledges that the Secretary of Homeland Security will develop standards and guidelines for determining whether a State or local entity has adopted the NIMS. Finally, the recipient further acknowledges that the Secretary of Homeland Security will determine compliance with the NIMS and the recipient agrees to abide by the

Secretary's decision on compliance.

The applicant will give the sponsoring agency or the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers or documents related to this application and any subsequent payments received as a result of this application.

I acknowledge and accept the Chief Executive Certification.

Funding Limits Certification:

If the submission of this application for funding is in conjunction with transactions for the purchase of vests, I understand and agree to abide by the following:

I understand that all funding awards will be subject to the availability of funds and I acknowledge that there is no guaranteed level of funding associated with the submission of this application to the BVP program.

I agree to meet my financial and contractual obligations associated with any purchase transactions, regardless of the amount of funding received through this application.

I acknowledge and accept the Funding Limits Certification.

**I certify to the best of my knowledge and belief, all information in this application is true and correct.**

Signature:

As the jurisdiction's chief executive officer (or designee), authorized to submit this application, I hereby enter my full name in the space provided below:

[Submit Application for BVP Approval](#)

**Paperwork Reduction Act Notice**

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time for all components of a jurisdiction to complete and file this Application for Funding form is two hours. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you may use the Suggestions e-mail option on this BVP web site, or you may write to the BVP, c/o Bureau of Justice Assistance, 810 Seventh Street NW, Washington, DC, 20531.